

Quality assurance and quality improvement in medical practice by clinical audit in Hungary

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Abstract

Background

For assuring and improving quality of healthcare, everyday medical practice should be based on appropriate scientific evidences and on results of health technology assessment (HTA). Evidence based medicine (EBM) is the integration of clinical expertise, patient values, and the best evidence into the decision making process for patient care, when health technologies are used.

Problem

Currently there is a worldwide gap between clinical guidelines based on evidences provided by scientific research, health technology assessment (HTA) and clinical practice.

Moreover there is no reliable information about the dissemination and implementation of clinical guidelines in the Hungarian hospitals.

Solution

To use the method of clinical audit. Clinical audit is an effective technique, to measure the clinical practice against clinical guidelines, protocols and other professional standards and – if it is necessary – to implement change to ensure that all patients receive care according to principles of the best practice.

Aims

To gather data regarding the usage of clinical audit in Hungarian hospitals.

To find the best methods to promote clinical audit activity nationwide.

Methods

(1) A nationwide survey was performed to investigate the adaptation of clinical guidelines and the usage of clinical audit in Hungarian hospitals in 2013.

(2) In a two-year project period a literature research was performed to identify and synthesize all research evidence and arguments relevant to clinical audit. This was performed by a team of experts from the University of Debrecen.

(3) A pilot clinical audit was conducted to improve the management of heavy menstrual bleeding (HMB) at the Department of Obstetrics and Gynaecology, University of Debrecen.

The methodological materials and the pilot audit were financed by the European Social Fund and implemented in the framework of the Hungarian "Social Renewal Operational Programme" (TÁMOP 6.2.5 /A-12/1-2012-0001).

Results

(1) According to the results of our survey, the systematic collection and adaptation of clinical guidelines to local context were performed by only 44.3 % of the Hungarian hospitals. Also, only 17% of the hospitals did at least one clinical audit in 2013.

(2) During the two-year period of the project we developed a new national guideline on external clinical audit and a methodology handbook for the implementation and conducting of internal clinical audit in Hungary. The guide to internal clinical audit was developed both for leaders and health care providers to promote and ensure the implementation and sustainability of clinical audit activity at all levels in hospitals.

(3) During this period, the ratio of conservative treatment in the management of women with HMB was increased at the Department of Obstetrics and Gynaecology. However, several resisting forces were also identified such as lack of time, usual work, lack of knowledge or privileged care of certain patients.

Conclusions

- To close the gap between scientific knowledge and clinical practice, healthcare providers should integrate clinical audit into their routine practice.
- For assuring cost effective, evidence based practice, clinical audit should be an integral part of quality systems in healthcare.
- Therefore there is a need for international benchmarking and knowledge sharing with regard to development, implementation and evaluation of clinical audit.
- Regular evaluations of the professional quality, including clinical audit activity of hospitals are also necessary in order to improve the clinical outcomes and patient safety.