

SAFETY AND QUALITY STEERING GROUP SUMMARY TEMPLATE

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| Subject Area | National Audit Assurance Report (NAAR) Clinical Audit - National Audit Assurance Report (NAAR) |
| Date of Report | November 2025 |
| Purpose of Report | Assurance |

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| Report Complied By | Fiona Davidson & Clinical Audit Team with 'Nominal' Leads for National Clinical Audits |
| Role | Head of Clinical Audit |

| Brief Summary update of Areas of Good Practice (bullet points) |
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| <p>The purpose of this paper is to provide:</p> <ul style="list-style-type: none"> The annual overview of the SHSCT's participation in the NHS England Quality Accounts List of National Clinical Audits (NCAs) for 2024/2025 together with the rationale for any non-participation (n=30). The composite SHSCT programme of local clinical audits centrally registered in the 2024/2025 period (n=150). The annual overview of the SHSCT's participation in NHS Benchmarking exercises and National Registries for 2024/2025. An updated SHSCT position on the progression of recommendations arising from participation in these national audits, including those still relevant from previous years. The annual update on data sharing & GDPR (Section 5.0) The work in 24/25 to strengthen the Trust's clinical audit function – (Section 6.0) An in-year update on the planned participation in the 2025/2026 list of NCAs (appendix 4). <p>This report contains two significant sections:</p> <ul style="list-style-type: none"> Section 3: summarises the recommendations for improvement, as RAG assessed by the clinical audit lead / service area and the progress or otherwise made in taking these forward in 24/25 – see pages 9 - 12. Section 4: summarises the areas to raise awareness to the Safety & Quality Steering Group (SQSG) as assessed by the clinical audit lead / service area, these can constitute – an area of challenge or concern / a risk / an example of good practice or a barrier to improvement - see pages 13-29. |

| Challenging Issues of Concern (Including issues that are noted on Risk Registers) | | |
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| <i>Challenges</i> | <i>Mitigations taken (if any)</i> | <i>Assurances (if any)</i> |
| All noted on pages 13-28 | At Directorate / Division / Specialty Level | Varies depending on NCA programme |
| Themed on Page 28 | At Directorate / Division / Specialty Level | Varies depending on NCA programme |

| Areas of development and Improvement |
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| <p>In the period April 2024 to March 2025, SHSCT saw:</p> <ul style="list-style-type: none"> Engagement and participation maintained across the significant number of audits where NI HSCTs are eligible to participate. Current NCAs and historical NCA returns reported an increase in progress updates – 65% 24/25, 56% 23/24, 47% 22/23 and 68% 21/22. A progress update can be based on the fact that SHSCT data was submitted and / or improvement in progressing actions or recommendations. In 24/25 'nil' returns (29%) had decreased from 35% in 23/24. See Figure 1.0 (p5) and hyperlink content in section 2.0 (P6-8) for each individual NCA 'progress' or 'nil' update. |

- **Progress in implementing current or previous action plans or recommendations** however remains vulnerable to the on-going effects of pressures on front line service provision such that **18%** NCA recommendations (excl MBRRACE-UK) have been RAG assessed as 'complete' in SHSCT and **82%** in maternity / IMWH (MBRRACE-UK national recommendations) (**see pages 10 – 12**).
- Pages 28 and 29 display the themes (i.e. accommodation, workforce, clinical service availability, patient flow, data sharing etc) that have been reflected in 24/25 updates from the nominal leads for National Audit in both barriers to improvement and area of progress. (**see pages 28 &29**)
- Work to continue to strengthen the SHSCT Clinical function has seen progress and is reported in section 6. (**p30 - 35**)

Trust Committee Reporting Schedule

- *Governance Committee Report Update (Attached)*

Any Other Items for noting (bullet points)

Include if applicable - Asset management/management of equipment (servicing and maintenance)

- *E.g. Training sessions organised for staff to attend*