



Audit Topic Proposal Form

"Audits Undertaken Determines Improvement in Treatments"



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*"Audits Undertaken Determines Improvement in Treatments"***Audit Department Assistance:***(Only 2 of no's 1-3 will be granted, please select carefully)*CASENOTES/X-RAYS In the 1st instance 50 SETS of Casenotes will be provided
(You MUST have a SECURE AREA for notes to be stored)

How many?

60

(1) QUESTIONNAIRE / PROFORMA DESIGN*(If no help required please give a copy of your proforma for filing)*Yes ☒No ☒**(2) ANALYSIS***(Will not be offered if audit is part of training)*Yes ☒No ☒**(3) PRESENTATION**Yes ☒No ☒**PLEASE ENSURE LINE MANAGER HAS SIGNED BELOW***(The form cannot be processed without the line manager's signature)*

Line Manager Signature: _____

Please PRINT Line Manager Name: _____

PATRICK STEWART

SCHEDULE OF CLINICAL AUDIT COMMITTEE MEETINGS

Meeting Date	Closing Date for Entry
3 rd January 2006	22 nd December 2005
7 th March 2006	22 nd February 2006
2 nd May 2006	26 th April 2006
18 th July 2006	28 th June 2006
5 th September 2006	30 th August 2006
7 th November 2006	25 th October 2006
9 th January 2007	22 nd December 2006

Please leave your request with the Dept 2 weeks before the date of the meeting

FOR COMMITTEE USE ONLYType of work : AUDIT ☒ SERVICE EVALUATION ☐ PART OF RESEARCH PROJECT ☐OTHER _____ APPROVED ☒ NOT APPROVED ☐ COMMENTS _____