Day Surgery Clinical Pathway
Compliance Audit Tool

Healthcare Improvement Unit

21/12/2017

NOTE: Number of charts audited =   **20**

Code 2: Complete, Code 1: Partial, Code 0: Not met, n/a = not applicable

Clinical Pathway Item by Phase	Case 1	Case 2	Case 3	Case 4	Case 5	Case 6	Case 7	Case 8	Case 9	Case 10	Case 11	Case 12	Case 13	Case 14	Case 15	Case 16	Case 17	Case 18	Case 19	Case 20	Total
General Items (page 1)																					
1a) ID labels stuck on each page																					
1b) Procedure Completed																					
1c) Consultant Completed																					
1d) Admission Date Completed																					
1e) Time Completed																					
OVERALL COMPLIANCE	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Signature Log (page 1)																					
2a) Initials																					
2b) Signature																					
2c) Print Name																					
2d) Role																					
OVERALL COMPLIANCE	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
1. Admission																					
1.1 Pre-admission screen completed																					
1.2 Discharge destination completed																					
1.3 Planned transport home completed																					
1.4 Patient requires section completed																					
OVERALL COMPLIANCE	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
2. Intra-operative																					
2.1 Perioperative patient record attached																					
2.2 Surgical Safety Checklist attached																					
2.3 Intra-operative documentation attached																					
OVERALL COMPLIANCE	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
3. 1st Stage Recovery																					
3.1 Clinical hand over completed																					
3.2 Prior to discharge from 1st stage recovery completed																					
3.3 Anaesthetic record completed																					
3.4 ORMIS or Operative Report completed																					
3.5 Pain relief ordered and administered as required completed																					
3.6 PONV medications ordered and administered as required completed																					
3.7 IV Fluids ordered and administered as required completed																					
3.8 Post operative orders written completed																					
3.9 Patient belongings with patient completed																					
3.10 Patient meets criteria for discharge completed																					
3.11 Patient details completed and signed in ORMIS and / or AARK section completed																					
3.12 Patient discharged from 1st stage recovery completed																					
3.13 Patient discharged from recovery within 30 minutes of meeting discharge criteria section completed																					
OVERALL COMPLIANCE	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
4. 2nd Stage Recovery																					
4.1 Clinical hand over section completed																					
4.2 Observations completed																					
4.3 Dressing intact completed																					
4.4 Minimal wound ooze completed																					
4.5 IVT / IVC insitu and patent completed																					
4.6 IDC draining completed																					

4.7 Drain(s) insitu and patent completed																					
4.8 As per unit protocol completed																					
4.9 Patient meets criteria for transfer OR Patient meets Modified PADSS for discharge completed																					
OVERALL COMPLIANCE	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
5. 3rd stage Recovery / Ward																					
5.1 Clinical handover completed																					
5.2 Observations completed																					
5.3 Dressing intact completed																					
5.4 Minimal wound ooze completed																					
5.5 IVT / IVC insitu and patent completed																					
5.6 IDC draining completed																					
5.7 Drain(s) insitu and patent completed																					
5.8 As per unit protocol completed																					
5.9 Patient meets Modified PADSS for discharge completed																					
OVERALL COMPLIANCE	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
6. Care Plan																					
6.1 Post-op section completed																					
6.2 Encourage mobility and self cares																					
6.3 Operation area reviewed completed																					
6.4 Dressing intact completed																					
6.5 Minimal ooze completed																					
6.6 Dressing changed / reinforced completed																					
6.7 Drains patent completed																					
6.8 Drains removed completed																					
6.9 Trial / Post-op void completed																					
6.10 IDC removed completed																					
6.11 Tolerating diet as ordered completed																					
6.12 IVT / IVC insitu and patent completed																					
6.13 IVC removed completed																					
6.14 Observation/BGL completed																					
6.15 Skin assessment prior to discharge completed																					
OVERALL COMPLIANCE	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
7. Modified PADSS (post Anaesthetic Discharge Scoring System)																					
7a) Assessment 1 completed																					
7b) Assessment 2 completed																					
OVERALL COMPLIANCE	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
8. Discharge Plan																					
8.1 Wound care completed																					
8.2 Discharge medications completed																					
8.3 Discharge summary																					
8.4 Follow up appointment section completed																					
8.5 Certificates section completed																					
8.6 Referrals completed																					
8.7 Support person section completed																					
8.8-8.11 Patient belongs section completed																					
8.12 Patient/carer section completed																					
8.13 Written and verbal information completed																					
8.14 Patient discharged section completed																					
OVERALL COMPLIANCE	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
9. Post Operative Phone Questionnaire																					
9.1 Permission to leave message completed																					
9.2 Log of follow up calls completed																					
9.3 Wound completed																					
9.4 Pain measurement completed																					
9.5 Pain control completed																					
9.6 Nausea/vomiting completed																					
9.7 Mobility completed																					
9.8 Required treatment completed																					
OVERALL COMPLIANCE	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
10. Clinical events/variances																					
10.1 Clinical events/variance section completed																					
OVERALL COMPLIANCE	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%

n/a

0

1

2