

APPENDIX C (May 2022)

Audit checklist

Name of organisation: 	Date: Audit checklist prepared by:
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Audit of safety indicators

Recommended indicator	Suggested evidence	Audit result	Comment/further action required
Safety indicators for patients starting oral anticoagulant treatment			
Number of patients prescribed warfarin for the prevention of stroke	Potential to take this from ?CDSS or Register and Treatment Plan Process as specified in service objectives	Audit results presented in comparison with recommended guidance.	Action progress to be monitored via Federated Quality Team
Number of patients prescribed warfarin for the prevention of VTE	Potential to take this from ?CDSS or Register and Treatment Plan Process as specified in service objectives	Audit results presented in comparison with recommended guidance.	Action progress to be monitored via Federated Quality Team
Number of patients prescribed warfarin for something other than VTE or Stroke prevention	Potential to take this from ?CDSS or Register and Treatment Plan Process as specified in service objectives	Audit results presented in comparison with recommended guidance.	Action progress to be monitored via Federated Quality Team
Number of patients with a CHA ₂ DS ₂ VASC score	Potential to take this from ?CDSS or Register and	Audit results presented in comparison with	Action progress to be monitored via Federated Quality Team

Recommended indicator	Suggested evidence	Audit result	Comment/further action required
	Treatment Plan Process as specified in service objectives	recommended guidance.	
Number of patients with a CHADs score only	Potential to take this from ?CDSS or Register and Treatment Plan Process as specified in service objectives	Audit results presented in comparison with recommended guidance.	Action progress to be monitored via Federated Quality Team
Number of patients with a CHA ₂ -DS ₂ VASC score ≥ 1	Potential to take this from ?CDSS or Register and Treatment Plan Process as specified in service objectives	Audit results presented in comparison with recommended guidance.	Action progress to be monitored via Federated Quality Team
Safety indicators for patients established on oral anticoagulant treatment			
Point Prevalence – measure of time in therapeutic range	From CDSS based on last 90 days	Audit results presented in comparison with recommended guidance.	Action progress to be monitored via Federated Quality Team
>74.9%	From CDSS based on last 90 days	Audit results presented in comparison with recommended guidance.	Action progress to be monitored via Federated Quality Team
50-74.9%	From CDSS based on last 90 days	Audit results presented in comparison with recommended guidance.	Action progress to be monitored via Federated Quality Team
25-49.9%	From CDSS based on last 90 days	Audit results presented in comparison with recommended guidance.	Action progress to be monitored via Federated Quality Team
<25%	From CDSS based on last 90 days	Audit results presented in comparison with recommended guidance.	Action progress to be monitored via Federated Quality Team
NPSA Audit – selected data	From CDSS 6 month data		

Recommended indicator	Suggested evidence	Audit result	Comment/further action required
for Primary Care setting			
% of PATIENTS with INR >5	From CDSS 6 month data	Audit results presented in comparison with recommended guidance.	Action progress to be monitored via Federated Quality Team
% of INRs >5	From CDSS 6 month data	Audit results presented in comparison with recommended guidance.	Action progress to be monitored via Federated Quality Team
% of INR >8	From CDSS 6 month data	Audit results presented in comparison with recommended guidance.	Action progress to be monitored via Federated Quality Team
% of INR <1 below target	From CDSS 6 month data	Audit results presented in comparison with recommended guidance.	Action progress to be monitored via Federated Quality Team
No of PATIENTS with major bleed in month 1 of treatment	From CDSS 6 month data	Audit results presented in comparison with recommended guidance.	Action progress to be monitored via Federated Quality Team
No of PATIENTS with major event	From CDSS 6 month data	Audit results presented in comparison with recommended guidance.	Action progress to be monitored via Federated Quality Team