



## **BRIEF GUIDANCE FOR ENHANCING FEEDBACK REPORTS FOLLOWING AN AUDIT**

**July 2015**

(1) **Short, Relevant, Punchy:** Ensure feedback delivered is clearly related to an audit standard, and place supplementary findings in an appendix report

Brief Description and Rationale	How to apply	Consensus Rating (1 low – 5 high)	Quotes from Acceptability and Feasibility interviews
<p><b>Control Theory applied to transfusion</b></p> <ul style="list-style-type: none"> <li>• Closely linked, continuous cycle. Requires clear link between what is fed back and the original goal that is set (i.e. audit standards). Any additional information (i.e. on clinical context) may interrupt or dilute this cycle</li> <li>• Consistent comments in interviews with clinical staff that current NCA reports are 'too long'</li> </ul>	<ul style="list-style-type: none"> <li>• The main feedback report(s) should only contain information that is clearly linked to the audit standards</li> <li>• Minimal information on clinical context may be included to support interpretation of feedback</li> <li>• Remaining information on clinical context should be placed in a supplementary file/ appendix</li> <li>• Graded entry approach: <ul style="list-style-type: none"> <li>- <b>Level 1: Key findings report-</b> 1 page results, 1 page recommendations, 1 page action plan. Intended for wider dissemination throughout hospital (i.e. consultants, nurses, junior doctors)</li> <li>- <b>Level 2: Full report-</b> contains detailed feedback related to only the main audit standards, recommendations + action plan (intended for hospital transfusion team – i.e. nurses, consultant haematologists, lab managers)</li> <li>- <b>Level 3: Supplementary findings-</b> reference resource intended for those with an interest the additional information on clinical context</li> <li>- <b>PowerPoint:</b> focused on key findings, intended for presentation within HTC meetings/ more widely within hospital</li> <li>- <b>See pp. 13-19 Full Enhancement Guidance Report.</b></li> </ul> </li> </ul>	<p>4.85</p>	<p>'Perfect. Absolutely perfect. Perfect for me...I mean I'm a big believer in <b>simplicity</b> to be honest. I think people make things far, far, far too complicated and nowadays people just <b>haven't got the time to sit down for three hours trying to work out what something's saying.</b> You need to be <b>clear, concise and direct'</b> [Consultant Haematologist re. Level 1 report]</p>

Example: See prototype enhanced reports (Appendices 1-4) and blank templates for each level of enhanced report (Appendices 5-8).

Example feedback not related to audit standards:

\* The median age was 64 years, IQR 49 to 68 years, range 0-95 years

\* 59% (1948) were men and 41% (1347) were women

**(2) Who should do what, to whom, when and where:** *Ensure audit standards, feedback, recommendations and action plans are behaviourally specific*

Brief Description and Rationale	How to apply	Consensus Rating (1 low – 5 high)	Quotes from Acceptability and Feasibility interviews																								
<ul style="list-style-type: none"> <li>Evidence that guidelines are more likely to be implemented if they are behaviourally specific (Michie et al. 2005)</li> <li>Evidence A&amp;F more effective when it includes explicit action plans and goals (Ivers 2012)</li> </ul> <table border="1" data-bbox="174 635 763 1007"> <thead> <tr> <th>A&amp;F Cycle</th> <th>Who responsible Specified</th> <th>Doing What Specified</th> <th>Where Specified</th> <th>When Specified</th> <th>To Whom Specified</th> </tr> </thead> <tbody> <tr> <td>Medical Use of Blood</td> <td>4%</td> <td>67%</td> <td>0%</td> <td>45%</td> <td>97%</td> </tr> <tr> <td>Platelets II</td> <td>34%</td> <td>96%</td> <td>0%</td> <td>30%</td> <td>55%</td> </tr> <tr> <td>Neonates &amp; Children</td> <td>12%</td> <td>87%</td> <td>4%</td> <td>20%</td> <td>60%</td> </tr> </tbody> </table>	A&F Cycle	Who responsible Specified	Doing What Specified	Where Specified	When Specified	To Whom Specified	Medical Use of Blood	4%	67%	0%	45%	97%	Platelets II	34%	96%	0%	30%	55%	Neonates & Children	12%	87%	4%	20%	60%	<p><b>Behavioural specificity = Who should do what, to whom, when, where?</b></p> <ul style="list-style-type: none"> <li><b>Who</b> is responsible for performing behaviour (e.g. Nurses)</li> <li><b>What</b> action is performed (e.g. Check wristband)</li> <li><b>Who</b> is the recipient of the behaviour (Patient group)</li> <li><b>When</b> behaviour is performed (e.g. Immediately pre-transfusion)</li> <li><b>Where</b> behaviour is performed (e.g. At the bedside)</li> </ul> <p>Specified behaviour = <i>Nurses should check patients' wristbands at the bedside immediately pre-transfusion.</i></p> <p>* To the extent that is appropriate/feasible, phrase audit standards, feedback, recommendations and action plans so that they are behaviourally specific.</p> <p>* <b>See pp. 20-24 Full Enhancement Guidance Report.</b></p>	<p>4.42</p>	<p>'This action plan...we can <b>set timeframes</b> within it and we can <b>task people with it</b> so I think that sort of thing trusts would love because it gives you a very concrete thing, "<b>This is what we're doing, this is who is doing it, this is when we will do it by</b>, and check that we do"...we need this practical stuff.' [Regional TP re. Action Plan template]</p>
A&F Cycle	Who responsible Specified	Doing What Specified	Where Specified	When Specified	To Whom Specified																						
Medical Use of Blood	4%	67%	0%	45%	97%																						
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Neonates & Children	12%	87%	4%	20%	60%																						

Example of behaviourally specified.....

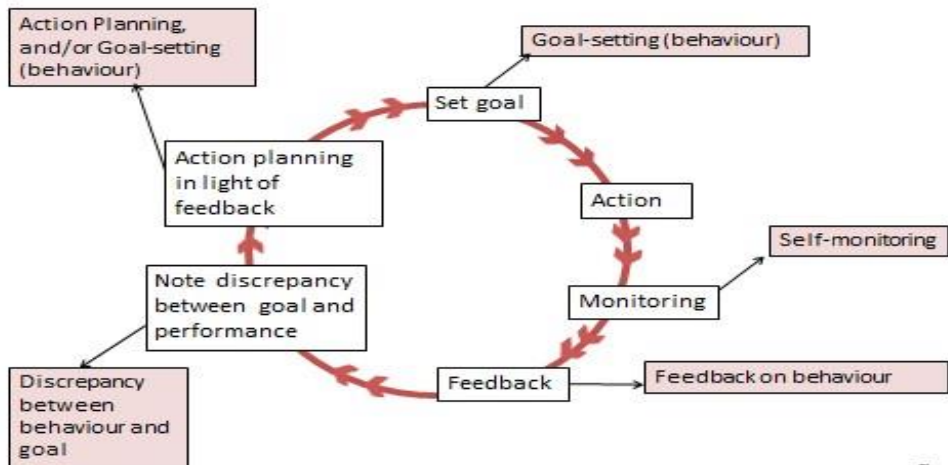
AUDIT STANDARD	FEEDBACK	RECOMMENDATION	ACTION PLAN
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<p>'A post-transfusion Hb concentration is taken [what] by clinical staff [who] in 100% of adult medical patients [whom] within 3 days following transfusion [when], preferably the same day' *where' not specified</p>	<p>'Clinical staff [who] took a posttransfusion Hb concentration [what] in 100% of adult medical patients [whom] within 3 days following transfusion [when]'</p>	<p>Clinical staff [who] should take a post-transfusion [when] Hb concentration [what] in 100% of adult medical patients [whom]. If there are good clinical justifications for not taking a post-transfusion Hb concentration (e.g. chronically transfused patients), alternative outcome measures should be assessed and recorded (e.g. checking symptoms of anaemia) [what]</p>	<p>See action planning template in prototype enhanced reports.</p>
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**(3) Complete each step of the loop:** *Include behaviour change techniques (BCTs) consistent with Control Theory in each feedback report*

Brief Description and Rationale	How to apply	Consensus Rating (1 low – 5 high)	Quotes from Acceptability and Feasibility interviews
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**Example of BCTs consistent with Control Theory:**



BCT	% Documents featured in (n=12)
Goal-setting (behaviour)	92%
Goal-setting (outcome)	8%
Review behavioural goal	0%
Review outcome goal	0%
Self-monitoring of behaviour	42%
Self-monitoring of outcome of behaviour	8%
Feedback on behaviour	58%
Feedback on outcome of behaviour	42%
Discrepancy behaviour/goal	58%
Problem solving	42%
Action planning	58%

In each feedback report, include at least one BCT from each cluster of BCTs associated with CT:

- (1) Goal-setting**
- Goal-setting (Beh)
  - Goal-setting (Outcome)
  - Review Beh. Goal
  - Review Outcome Goal

- (2) Monitoring**
- Self-monitoring (Beh.)
  - Self-monitoring (Outcome)

- (3) Feedback**
- Feedback (Beh)
  - Feedback (Outcome)
  - Discrepancy between Beh/Goal

- (4) Action Planning**
- Problem Solving
  - Action Planning

**See pp. 25-36 Full Enhancement Guidance Report.**

4.85

'I quite like the fact that the template seems to be the same throughout the document, **so you've got your standard [Goal-setting], you've got, you know, "Why is it important? What are your recommendations?" You've got your results [Feedback], then straight away your recommendations and action plan [goal-setting/ Action Planning ]**, so that's quite nice, it's **all there on one page** so you don't have to flick around to find the information.' [TP re. Level 2 report ]

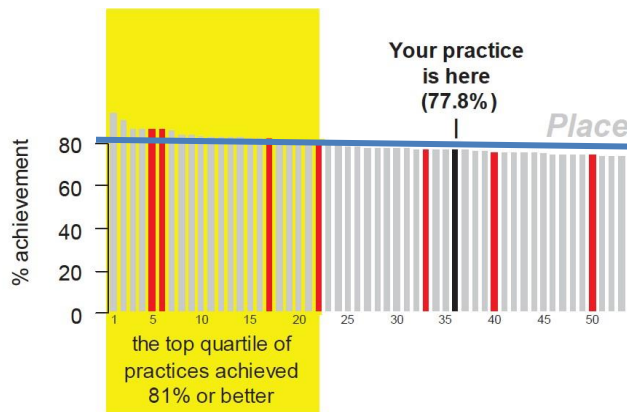
Example:

BCT	Example in A&F reports
Goal-setting (Behaviour)	<b>Audit standards:</b> 'a pre-transfusion Hb is taken in 100% of patients within three days of the transfusion, preferably the same day'
Self-monitoring of the behaviour	<b>Audit data collection</b> (i.e. audit tool)
Feedback on behaviour + Discrepancy between behaviour and goal	<p><b>Feedback on performance in relation to the audit standards:</b></p> <ul style="list-style-type: none"> <li>• A pre-transfusion Hb concentration was taken by clinical staff in <b>91% (29/32)</b> of our patients.</li> <li>• For <b>50% (16/32)</b> the pre-transfusion Hb was taken on the <b>same day</b> as the red cell transfusion, and in <b>85% (27/32)</b> within <b>three days</b> prior to transfusion.</li> </ul>
Action Planning	<b>Action Planning template</b> (see prototype enhanced reports)
Goal-setting (behaviour) <i>in light of feedback</i>	<b>Recommendations:</b> 'Our hospital's performance did not reach the audit standard and is lower than the national average. We should <b>formulate an action plan to increase performance towards 100%</b> '

(4) How do we compare? Consider multiple comparators

Brief Description and Rationale	How to apply	Consensus Rating (1 low – 5 high)	Quotes from Acceptability and Feasibility interviews
<ul style="list-style-type: none"> <li>• ‘There is a theoretical basis for including <b>comparison data in feedback as a means of motivating recipient</b> to change behaviour’ (Ivers et al 2014)</li> <li>• CT argues that current behaviour should be compared <b>against the set goal (i.e. audit standards)</b></li> <li>• Other potentially valuable comparators to consider:               <ul style="list-style-type: none"> <li>- Current NCA reports typically include <b>national median</b> and <b>regional performance</b> as comparators</li> <li>- Evidence that A&amp;F which includes ‘<b>achievable benchmarks of care</b>’ (i.e. <b>top 10% of peers</b>) leads to <b>greater improvements</b> in processes of care than those receiving comparisons to median performance of peers (Ivers et al 2014; Weissman et al. 1999)</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Consider including alternative comparators in addition to the audit standards, National median, and regional comparisons currently used</li> <li>• In particular, include achievable comparators (i.e. top 10%)</li> <li>• Graphs (see example below) can be an effective way of communicating multiple comparative data</li> <li>• Past performance is also a potential comparator</li> <li>• <b>See pp. 37-40 Full Enhancement Guidance Report.</b></li> </ul>	5.00	<p>‘See, I like that because actually <b>you’ve shown me what the national picture was</b> in this graph.’ (Consultant Obstetrician)</p> <p><b>‘It would be nice to compare with trusts of similar size</b>, I can’t compare us, for instance, with Hospital X because they’re a big centre that do thoracic surgery so their use of blood would be different than ours . <b>It would be quite nice to be able to look at our use within departments.</b> You don’t break it down that small so within oncology, for instance, what do we do compared to other oncology units, that would be quite helpful. But I think that’s probably asking a bit too much’ (TP)</p>

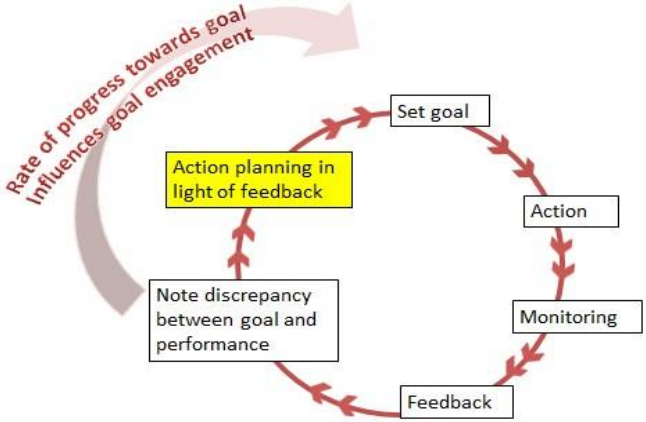
Example:



This example graph from the ASPIRE trial includes the following comparators:

- The audit standard (horizontal blue bar)
- Regional (i.e. red bars indicating other practices within the same district)
- Achievable benchmark (i.e. top quartile highlighted in yellow)

(5) Well done: If performance is high/achieving the standard, include a positive message of encouragement

Brief Description and Rationale	How to apply	Consensus Rating (1 low – 5 high)	Quotes from Acceptability and Feasibility interviews
 <ul style="list-style-type: none"> <li>Emphasising a positive rate of <b>progress towards goal achievement can be highly motivating</b></li> <li>It is therefore important not only to highlight discrepancies between behaviour and goal (i.e. 'bad practice') but to <b>also emphasize instances of 'good practice'</b> (i.e. achievement of audit standards)</li> <li>BCTs linked to the delivery of positive feedback are infrequently delivered in current feedback documents (i.e. social reward; reinforcement)</li> </ul>	<ul style="list-style-type: none"> <li>When hospitals achieve the standard/ achievable benchmark (or improve relative to past behaviour), include a recommendation outlining the importance of recognising, encouraging and maintaining this achievement</li> <li>Also note that it is important to emphasise this achievement as it <b>represents good patient care</b></li> <li><b>See pp. 41-43 Full Enhancement Guidance Report.</b></li> </ul>	4.75	<p>'I thought that the <b>recommendations, for example, we got 100% compliance</b> and it still said, "You should formulate an action plan to maintain compliance so if you have this <b>there is no way you can ever escape from the audit cycle !</b>" [Consultant Haematologist]</p>

**Example recommendations:**

- **IF hospital has achieved the standard (i.e. 100%):** 'Our hospital's performance reached the audit standard and was higher than the national average. This represents the high quality of patient care we are delivering, and should **be recognised and encouraged**. We should **formulate an action plan that aims to maintain this high level of performance**



(6) Mode of Delivery

Brief Description and Rationale	Formatting and Presentation Recommendation	Example	Quotes from Acceptability and Feasibility interviews												
<ul style="list-style-type: none"> <li>• Prototype enhanced reports (Appendices 1-4) were piloted in four hospitals. Clinical staff were asked for their opinions on these reports and suggestions as to how they may be improved.</li> <li>• As well as the five enhancements, the interviews identified other <b>general recommendations related</b></li> </ul>	<ul style="list-style-type: none"> <li>• Clinical staff consistently reported a <b>strong preference for feedback delivered in a visual format</b> (i.e. graphs, tables, charts) rather than text.</li> <li>• Where possible, consider presenting key findings in a visual format.</li> <li>• <b>See pp. 44-46 Full Enhancement Guidance Report.</b></li> </ul>	<p>Who made the decision to transfuse</p> <table border="1"> <caption>Who made the decision to transfuse</caption> <thead> <tr> <th>Role</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>Consultant</td> <td>37%</td> </tr> <tr> <td>SpR</td> <td>18%</td> </tr> <tr> <td>SHO</td> <td>9%</td> </tr> <tr> <td>Core Trainee</td> <td>9%</td> </tr> <tr> <td>Foundation Year</td> <td>9%</td> </tr> </tbody> </table>	Role	Percentage	Consultant	37%	SpR	18%	SHO	9%	Core Trainee	9%	Foundation Year	9%	<p>‘But I don’t know, you see all this text here? If maybe that could be displayed in a graph or a pie chart; something just a little bit more visually. So <b>rather than having to read from top to bottom, they can just glance at it and be able to know what the results actually state.</b>’ [TP]</p>
Role	Percentage														
Consultant	37%														
SpR	18%														
SHO	9%														
Core Trainee	9%														
Foundation Year	9%														

to formatting and presentation of the reports.

- **Font preferences included:**
- **Large, readable** font size
- In general, **red was not a valued font colour** (negative associations- i.e. danger)
- **Use of colour to emphasise key findings, discrepancies, and comparative data**
- **See pp. 47 Full Enhancement Guidance Report.**

% of patients with a pre-transfusion Hb concentration greater than 100g/l

	%
National 2014	4% (6/136)
<b>Our Hospital 2014</b>	<b>6% (2/32)</b>
Hospital A	0% (0/30)
Hospital B	10% (4/42)
Hospital C	6% 2/32

National Comparative Audit of Blood Transfusion 2014 Audit of Use of Blood in Adult Medical Patients

**'It's good that the data in this section on our hospital's current performance in 2014 has been highlighted yellow. ...That really draws your eye to it and it's what you look at for a while.'** [Consultant obstetrician]

- Clinical staff displayed consistent preference for a

- Layout of Level 2 Full Findings report:
- < Audit Standard>

**'I quite like the fact that the template seems to be**

- clear, consistent structure and layout to feedback report
- In particular, use of clear sub-headings phrased as questions **See pp. 48- Full Enhancement Guidance Report.**
- **Full Enhancement Guidance Report.**

- <How did our hospital perform?>
- <How do we compare to other hospitals?> <Why is this standard important?>
- <What should we do next? (Recommendations)>
- See Appendix 2

**the same throughout the document, so you've got your standard, you've got, you know, "Why is it important? What are your recommendations?" You've got your results, so that's quite nice, it is clear, and focused.'** [TP]

	<ul style="list-style-type: none"> <li>□ Clinical staff felt at times the NCA feedback reports were slightly impersonal</li> <li>□ Consider phrasing feedback in a personalised manner throughout by using terms such as 'we' or 'our' hospital instead of 'your' hospital.</li> </ul>	<ul style="list-style-type: none"> <li>□ A pre-transfusion Hb concentration was taken by <b>our clinical staff</b> in 91% (29/32) of our patients.</li> <li>□ <b>In our hospital</b>, the primary reason for red cell transfusion was anaemia in 88% (28/32) of adult medical patients <b>Our hospital did not achieve this standard</b></li> <li>□ We should formulate an action plan to increase performance towards 100%. <b>'Our hospital's performance</b> has</li> <li>□ achieved this standard. This achievement represents the <b>high standard of care that we are providing to our patients. We should recognise and encourage this,</b> and formulate an action plan to maintain <b>our</b> high standard of patient care'</li> </ul>	<p><i>'I thought that the recommendations given sometimes came across as a little bit impersonal. They felt a bit like standard comments that <b>might not apply to the situation or us in particular...</b>'</i>[Consultant Haematologist]</p>
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# SUMMARY: ENHANCEMENTS QUICK GUIDE

## Enhancements checklist

Enhancement	Checklist	✓				
<p>1. <b>Short, Relevant, Punchy: Ensure feedback delivered is</b> - pages results maximum (i.e. key finding for each standard) information on clinical context; just sample size <b>and place</b> - Recommended dissemination list <b>appendix report.</b></p>	<input type="checkbox"/> Graded Entry Approach applied using prototype reports+ templates provided	<input type="checkbox"/>				
	<input type="checkbox"/> Level 1: <i>Key Findings Report</i> Report kept as short as possible <b>clearly related to</b> - In total, 1-2 <b>an audit standard,</b> - No Recommendations for each standard <b>supplementary</b> - Recommended dissemination list <b>findings in an</b> - Action planning template	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
	<ul style="list-style-type: none"> <li>Level 2: <i>Full Audit Report</i></li> <li>- Statement emphasising importance of audit topic to patient care</li> <li>- Consistent format throughout for each standard (i.e. standard + key finding+ statement of why standard is important+ recommendation)</li> <li>- Minimal supporting information on clinical context essential to interpreting main findings related to audit standards</li> <li>- Action planning template</li> <li>- Recommended dissemination list</li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
	<input type="checkbox"/> Level 3: <i>Supplementary Information Report</i> - Detailed supporting information: * Information on clinical context * Audit details	<input type="checkbox"/> <input type="checkbox"/>				
	<ul style="list-style-type: none"> <li>PowerPoint (PPT)</li> <li>- PPT kept as short as possible (aim for 10-15 min presentation)</li> <li>- Statement emphasising importance of audit topic to patient care</li> <li>- Consistent format throughout for each standard (i.e. standard + key finding+ statement of why standard is important+ recommendation)</li> <li>- Minimal supporting information on clinical context essential to interpreting main findings related to audit standards</li> <li>- Action planning template</li> <li>- Recommended dissemination list</li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p>2. <b>Who should do</b> A&amp;F component <b>Who</b> <b>What</b> <b>To Whom</b> <b>When</b> <b>Where</b> <b>What, to Whom,</b> specified?  <b>When, and Where:</b> specified? specified? specified? specified?  <b>Ensure audit Standards</b>  <b>feedback, Feedback</b>  <b>and action plans</b> Action Plans</p>						
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Enhancement	Checklist		✓
<p><b>3. Complete each step of the loop: Include BCTs consistent with Control Theory in each feedback report</b></p>	<input type="checkbox"/> Each feedback report includes <u>at least one</u> BCT from each cluster of BCTs consistent with Control Theory:		
	Cluster	BCT label	
	1. Setting a goal	Goal-setting (Behaviour)	<input type="checkbox"/>
		Goal-setting (Outcome of behaviour)	<input type="checkbox"/>
	2. Monitoring current behaviour	Self-monitoring of behaviour	<input type="checkbox"/>
		Self-monitoring of outcome of behaviour	<input type="checkbox"/>
	3. Feedback	Feedback on behaviour	<input type="checkbox"/>
		Feedback on outcome of behaviour	<input type="checkbox"/>
	4. Discrepancy	Note discrepancy between behaviour and goal	<input type="checkbox"/>
	5. Adaptation in light of feedback	Action planning	<input type="checkbox"/>
		Problem solving	<input type="checkbox"/>
		Review behavioural goal	<input type="checkbox"/>
		Review outcome goal	<input type="checkbox"/>
<p><b>4. How do we compare? Consider multiple comparators</b></p>	<input type="checkbox"/> Multiple comparators included when providing feedback on current clinical practice:		
	- Current performance vs goal/target (i.e. audit standards)		<input type="checkbox"/>
	- Past performance (i.e. as part of a re-audit)		<input type="checkbox"/>
	- Achievable benchmarks (i.e. top 10% of peers; upper quartiles)		<input type="checkbox"/>
	- Like-for-Like comparisons (i.e. hospitals of same sizes, case mixes etc)		<input type="checkbox"/>
	- Different clinical specialities/departments (i.e. gastroenterology vs obstetrics)		<input type="checkbox"/>
	- Regional comparators		<input type="checkbox"/>
	- National median -		<input type="checkbox"/>
	If	Then	<input type="checkbox"/>

<p><b>5. Well done! If performance is high/achieving the standard, then include a positive message of encouragement</b></p>	<p>Hospital has <u>achieved the standard</u> (i.e. 100%)</p>	<p><input type="checkbox"/> Provide a positive message of encouragement</p> <p>e.g. <i>'Your hospital has achieved this standard. Well done. This achievement represents the high standard of patient care provided within your hospital, which should be recognised and encouraged. You should consider formulating an action plan to maintain this high standard of patient care.'</i></p> <p>Or</p> <p><i>'Our hospital's performance has achieved this standard. This achievement represents the high standard of care that we are providing to our patients. We should recognise and encourage this, and formulate an action plan to maintain our high standard of patient care'</i></p>	
<p><b>Enhancement</b></p>	<p><b>Checklist</b></p>		<p>✓</p>
<p><b>Mode of Delivery</b></p>	<p><input type="checkbox"/> Feedback primarily provided in visual format (i.e. graphs, charts,</p>		<p><input type="checkbox"/></p>
	<p>tables) rather than text</p>		<p><input type="checkbox"/></p>
	<p><input type="checkbox"/> Font is:</p> <ul style="list-style-type: none"> <li>- Large/readable size</li> <li>- Colour red is avoided</li> <li>- Colour is used to emphasise key findings</li> </ul>		<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>
	<p><input type="checkbox"/> A consistent layout/structure is adopted in the feedback reports, phrasing sub-headings as questions)</p> <p>[e.g. Level 2 Full Audit Report: for each audit standard,:</p> <ul style="list-style-type: none"> <li>- State standard</li> <li>- Key finding related to audit standard (How did our hospital perform?)</li> <li>- Comparative data (i.e. How do we compare to other hospitals?)</li> <li>- Statement as to why this standard is important (Why is this standard important?)</li> <li>- Recommendations related to this standard (What should we do next?)</li> <li>-</li> </ul>		<p><input type="checkbox"/></p>
	<p><input type="checkbox"/> Feedback and recommendations are personalised throughout using terms such as 'we' or 'our hospital/staff/patients' rather than 'your hospital'</p>		<p><input type="checkbox"/></p>