



# QuADRANT Workshop

Wednesday 16th December 14.30- 17.00 CET

## National Experience of Clinical Audit: The Luxembourg Experience

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DU GRAND-DUCHÉ DE LUXEMBOURG  
*Ministère de la Santé*

Direction de la santé



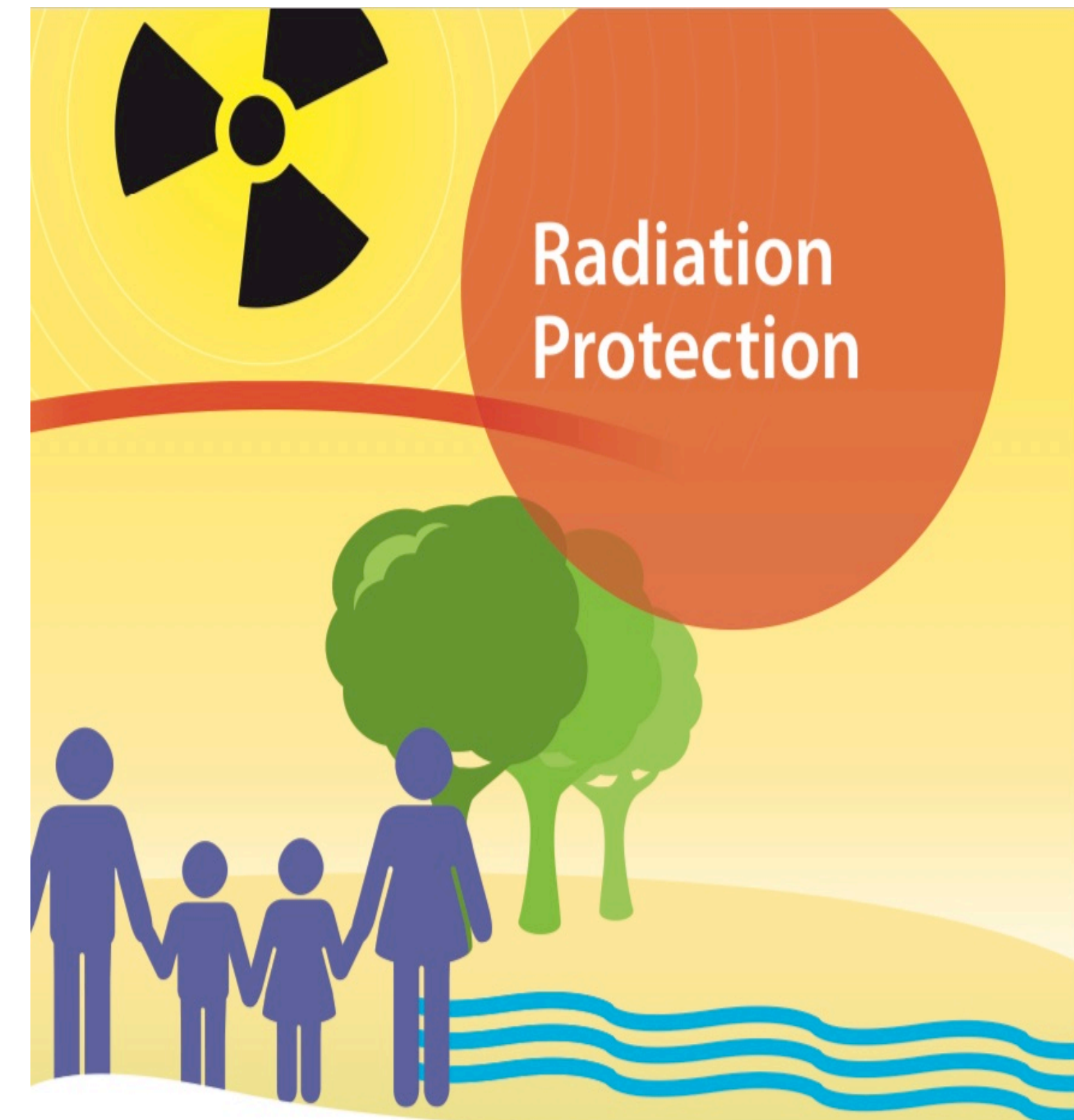
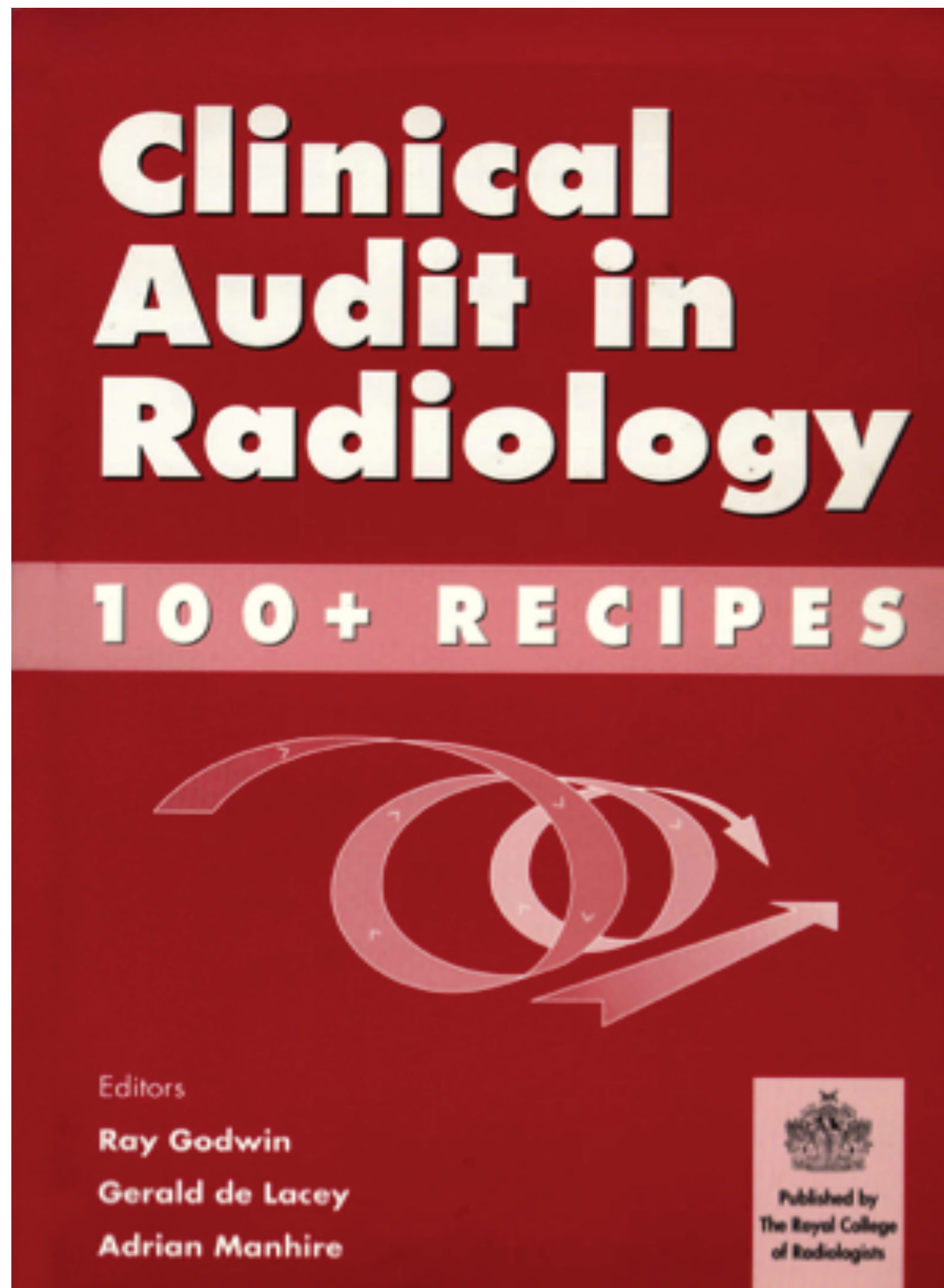
- Transposition of the Council Directive 97/43 Euratom into Legislation in 2001
- Internal and external clinical audits have to be carried out in all the establishments where medical radiological procedures take place
- External Clinical Audits are to be carried out under the request and with the instruction of the Ministry of Health
- A guide on clinical audit with examples was included in the legislation as an Annex

# Clinical Audit in Luxembourg



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- Active Promotion of the documents published in 1996 and 2009



- NO 159 — EUROPEAN COMMISSION GUIDELINES ON CLINICAL AUDIT FOR MEDICAL RADIOLOGICAL PRACTICES (DIAGNOSTIC RADIOLOGY, NUCLEAR MEDICINE AND RADIOTHERAPY)

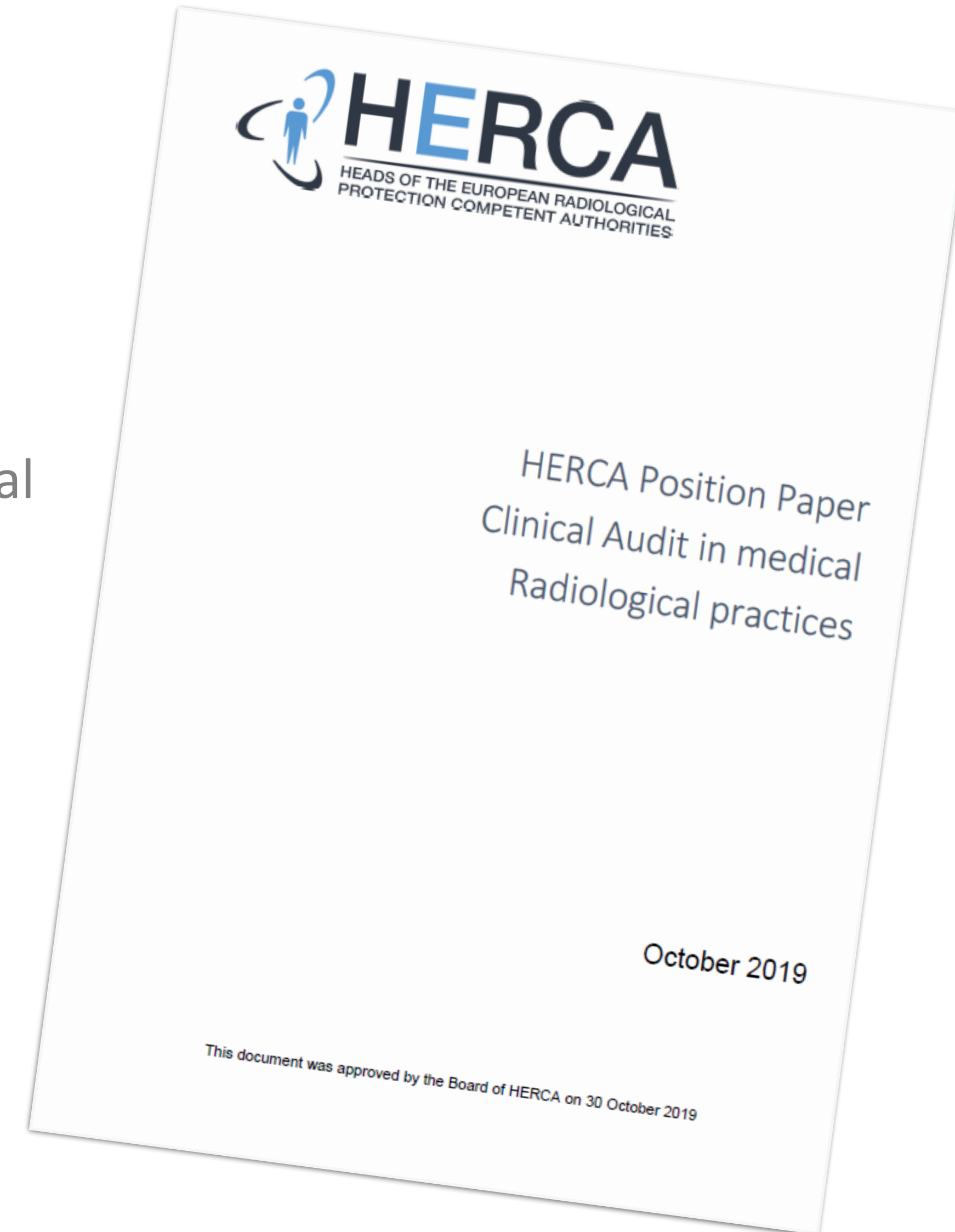


- Transposition of BSS Directive 2013/59 Euratom into legislation in 2019
- Internal Clinical audits:
  - The establishment where medical radiological practices take place has to carry out internal clinical audits at least once a year
  - The subject and the objective of the clinical audit have to be documented as well as any actions for improvement put into place
  - The procedure for internal clinical audit is defined in the legislation
- External Clinical Audits:
  - External clinical audits are carried out following the request and instruction of the Minister of health
  - The establishment is obliged to provide all relevant information concerning the external clinical audit to the Minister





- An up to date guide on the implementation of clinical audit was published on the Ministrys website in 2020 and distributed to all concerned establishments.
- The guide apart from explaining clinical audit for medical radiological practices contains concrete examples of clinical audits as well as number of helpful references.

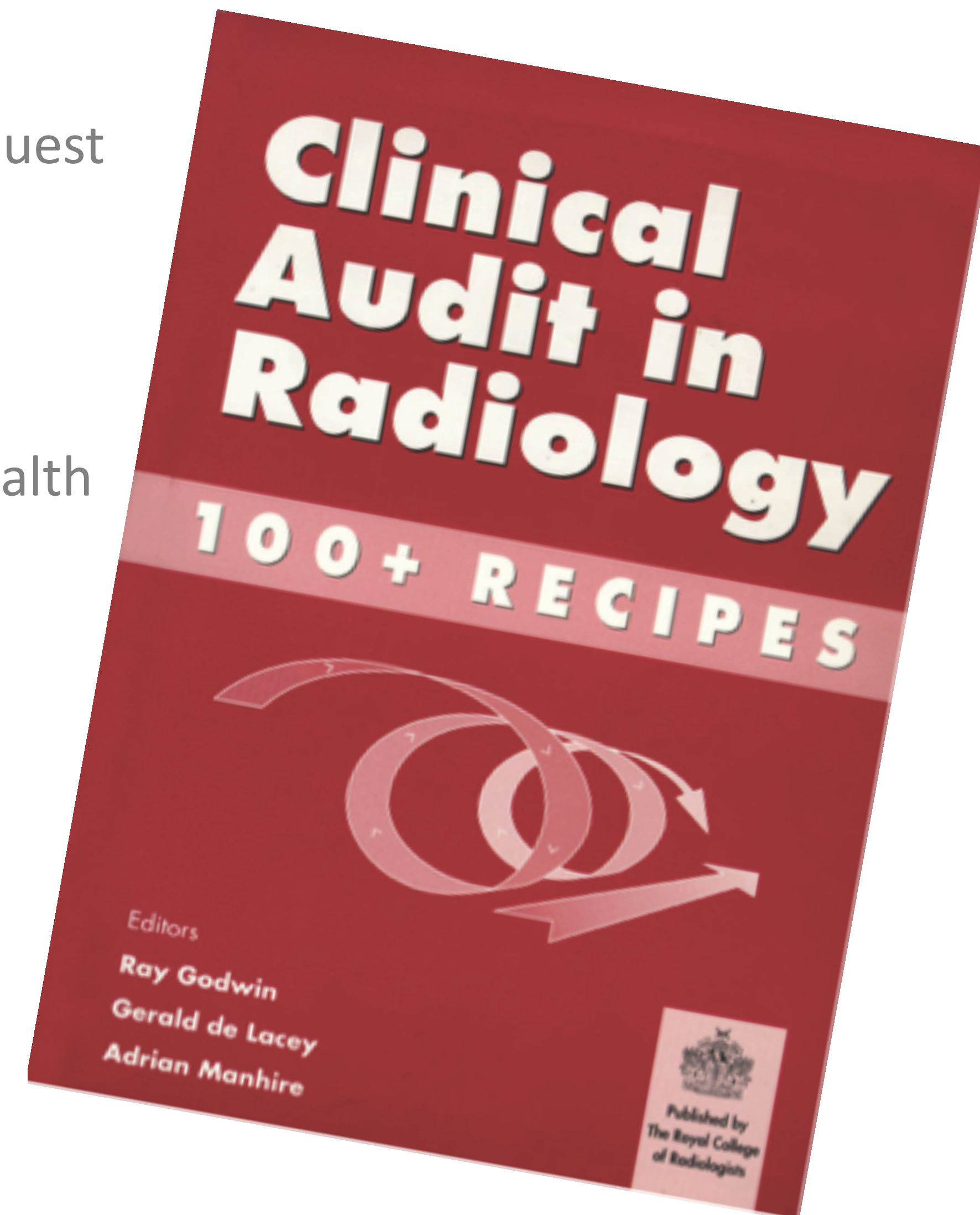


# Example of a national Clinical Audit



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- National Clinical Audit on the Adequate Completion of Radiology Request Forms in Luxembourg 2016
- External Clinical audit requested and instructed by the Ministry of Health
- Recipe N° 2





### ➤ **Purpose:**

- Clinical background and the specific question to be answered need to be provided with the request for the radiological examination to be useful and appropriate
- Inadequate patient information can lead to mistakes in patient identification

### ➤ **The standard:**

All request forms should contain the following information :

- The Clinical background
- The specific question to be answered
- Information concerning the identification of the patient
- Information concerning the referrer
- Information concerning the practitioner



- **Indicator** : The percentage of request forms with adequate information
- **Collected data** : The presence or absence of the items in the standard for each request form
- **Additional information retrieved**: the identification of the radiology department, the type of specialty of the referrer, the type of imaging modality for the requested examination
- **Number of requests audited**: The audit was carried out on 200 requests forms per radiology department in all 10 radiology departments of the Luxembourg hospitals

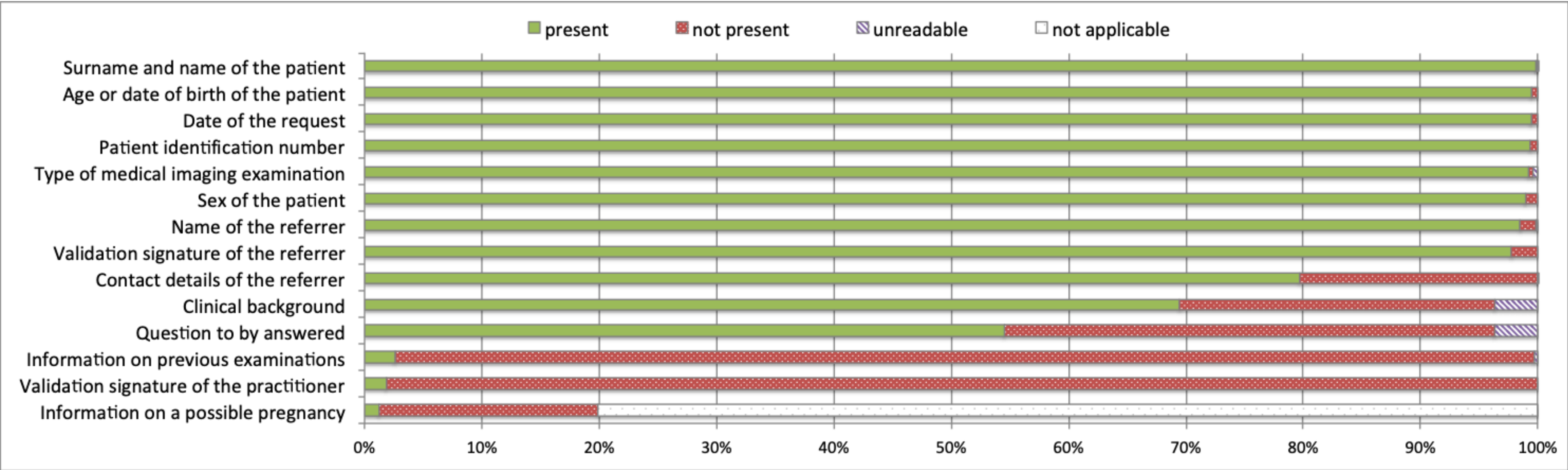


# Results for 1998 request forms



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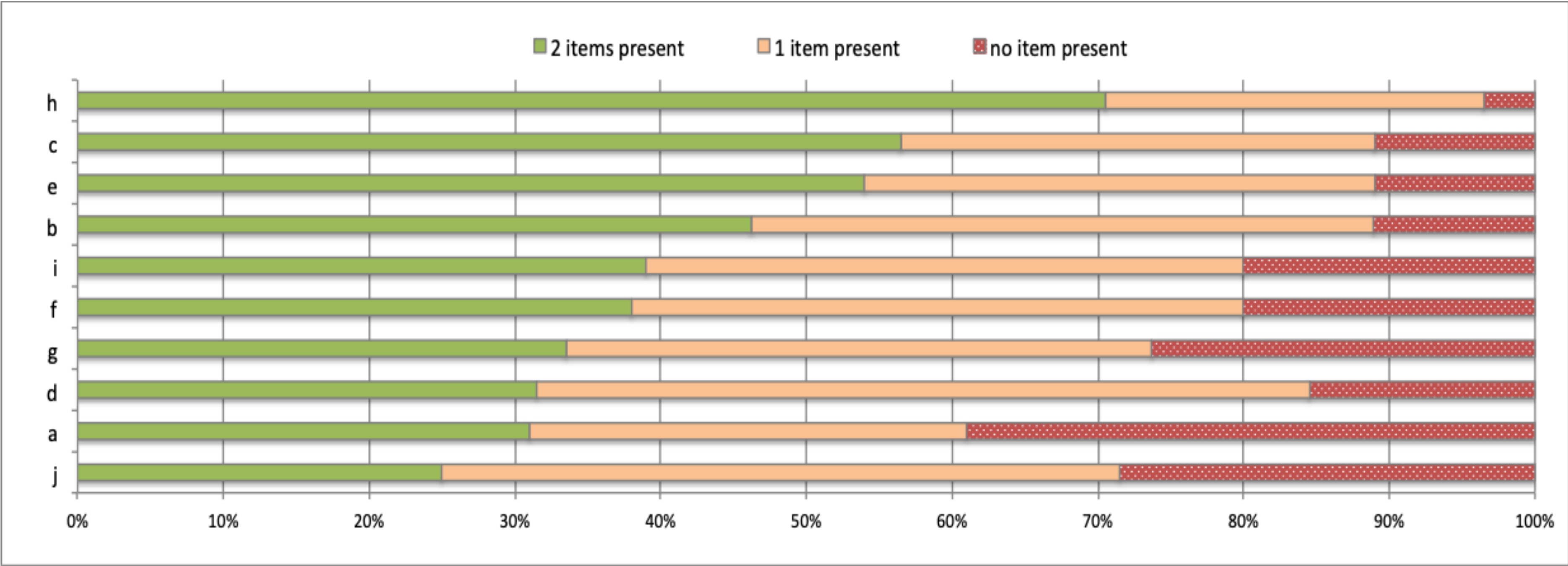
*Percentage of presence of each item on the request forms. “Not applicable” means that a request does not concern a female patient with age between 15 and 55 years old.*





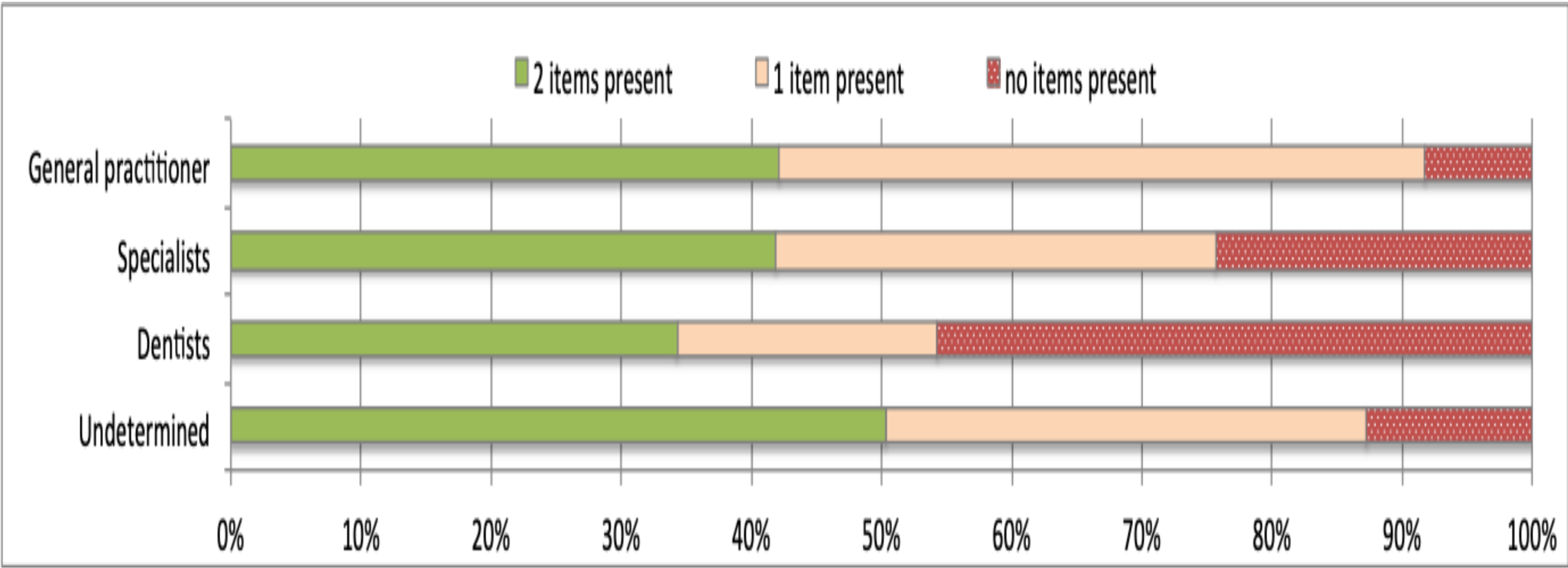
*Percentage of presence on the request forms for the items “clinical background” and “the question to be answered”, for each radiology department. Each radiology department is identified by a letter.*

*“2 items present” means both items are present.*



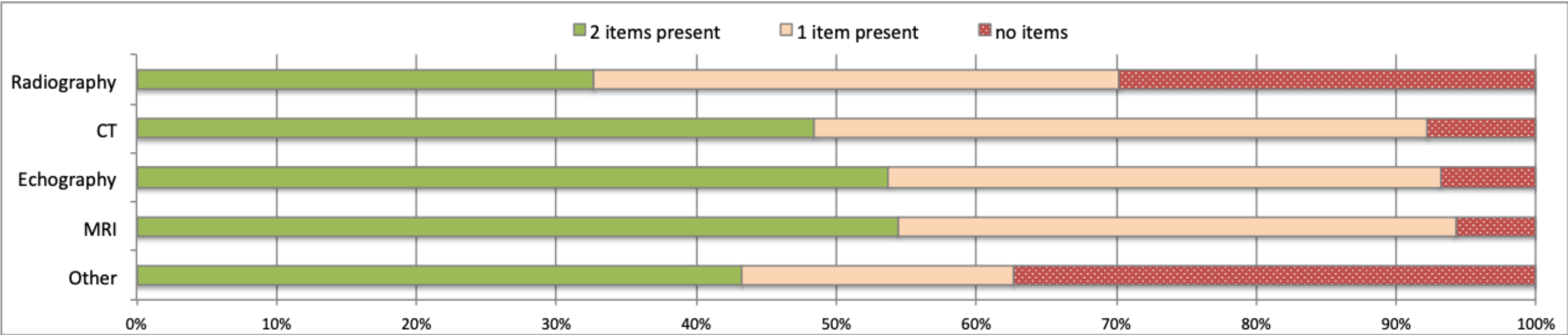


*Percentage of presence on the request forms for the items “clinical background” and “question to be answered” according to the specialty of the referrer.*





*Percentage of presence for the items “clinical background” and “question to be answered” according to the imaging modality. “other” includes mammography, dental imaging, and undetermined modality*







➤ The two items essential for justification were present:

Examined Item	% of requests
Clinical background	70 %
Clinical question to be answered	55 %
Both items were present	42 %
One of the items was present	39 %
No items for justification present	19 %



- Audit conducted without any constraint
- The percentage of conformity is not acceptable!
- Need to develop a new request form specific to medical imaging
- Need to develop an awareness campaign for referrers
- Easy access to previous examination needs to be made available
- Radiology departments and hospital management became aware of the results of the audit and the need to take actions to improve the situation
- Re-audit



- Internal Clinical audits are carried out but depend very much on the Department's staff
- External clinical audits can be coordinated by an external body
- Communication between stakeholders is very important
  
- A body has been put into place since 2015 called medical imaging technical group which comprises of representatives of:
  - the ministry of health,
  - the social security,
  - the professional societies
  - the radiation protection competent authority
  
- The group works on implementing aspects of the new legislation on radiation protection in the hospitals one of which is clinical audit
- Clinical Audit is still work in progress



*Thank you*

