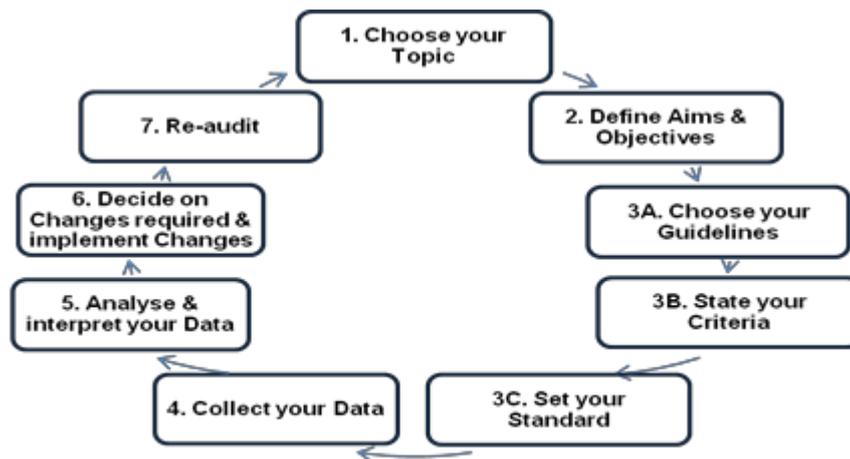




Childhood Overweight & Obesity Sample Audit



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Purpose of ICGP sample audits on specific topics

The purpose of the ICGP sample audit for each topic area is to provide practitioners with audit topic proposals and related tools in order to aid them in carrying out a clinical audit in this topic area. For each topic, a specific guideline is chosen which identifies best practice for the relevant topic. Following this, examples of the elements of care or activity that could be measured are provided – these are referred to as “criteria”. Finally, a “data collection tool” is provided, which contains examples of the types of data that are required in order to audit each sample criterion. A separate document, the ICGP Audit Toolkit, provides more detailed generic instructions on how to carry out and report your audit.

Sample audit topic: Childhood overweight and obesity

Disclaimer

In all instances where ‘your patients’ are referred to, this can be taken to mean the patients you see. Where ‘your practice’ is mentioned, this refers to the work you do, not necessarily that you need to be based in one particular practice.

Best Practice Guideline

ICGP Quick Reference Guide - Weight Management Treatment Algorithm for Overweight Children: A Quick Reference Guide for Primary Care.
Adapted from the National Institute for Clinical Health and Clinical Excellence (NICE), 2006. Authored by the HSE and ICGP.

[<http://www.icgp.ie/go/library/catalogue/item/7858CA75-D4E4-48A4-8F6F9C845CDABAA2>]

Professional Competence Domains: Clinical Skills
Management
Patient Safety and Quality of Care

Sample Criteria:

1. Consider checking the weight of all children aged 5-10 years attending for routine care.
2. If a child is diagnosed as overweight with a BMI at 91st centile or above, consider a full tailored clinical assessment.
3. Consider assessing for comorbidities if a child is diagnosed as obese with a BMI at 98th centile or above.
4. For children who are overweight/obese: Assess lifestyle and willingness to change with parent/guardian and child.
5. For children who are overweight/obese: Management plan for a healthy lifestyle should be discussed with parent/guardian, taking a family based approach.
6. For children who are overweight/obese: Monitor progress and review

- child within 3 – 6 months.
7. For children who are overweight/obese: Management plan for a healthy lifestyle should be discussed in the context of the whole family.

DRAFT

Choose a single criterion or several criteria from the above examples on which to conduct your audit. If you are auditing a very small number of paediatric patients who are overweight or obese, you may need to examine a greater number of criteria. By contrast, should you decide to check the weight of all children aged 5-10 years, you will be working with a larger number of children and parents, and it may only be necessary to examine one criterion. There is no minimum or maximum number of patients stipulated, however your sample should include current/recent patients.

Once you have chosen your criterion/criteria then set your standard (sometimes known as your target). This is your desired level of performance and is usually stated as a percentage. Beware of setting standards of 100%; standards should be realistic for your practice (perfection may not be possible).

The aim of a Data Collection tool is to provide examples of the types of data that are required in order to audit each sample criterion.

Criterion 1: "Children aged 5-10 years attending for routine care will be objectively measured to calculate BMI."

Data Collection Tool:

- Number of paediatric patients reviewed for this audit.
- Number of the above cases who have had a BMI entered on their medical record.

Criterion 2: "If a child is diagnosed as overweight with a BMI at 91st centile or above, consider a full tailored clinical assessment."

Data Collection Tool:

- Number of paediatric patients reviewed for this audit.
- Number of these patients diagnosed as overweight with a BMI in 91st centile or above.
- Number of these patients documented as having completed a full clinical assessment.

Criterion 3: "Consider assessing for comorbidities if a child is diagnosed as obese with a BMI at 98th centile or above."

Data Collection Tool:

- Number of paediatric patients reviewed for this audit.
- Number of these patients diagnosed as obese with a BMI in 98th centile or above.
- Number of these patients documented as having completed a full clinical assessment and screened for possible comorbidities; for

example how many assessed/screened for:

- Hypertension
- Type 2 diabetes
- Hyperinsulinaemia
- Dyslipidaemia
- Exacerbation of asthma
- Number of these patients documented as referred onto paediatric obesity services; for example how many referred to each of:
 - Dietitian
 - Physiotherapist
 - Paediatrician

Criterion 4: For children who are overweight/obese: "Assess lifestyle and willingness to change with parent/guardian and child."

Data Collection Tool:

- Number of overweight and obese paediatric patients reviewed for this audit.
- Number of these patients where the clinical record clearly documents discussion with parent/guardian and paediatric patient about lifestyle, signs and symptoms of overweight and obesity, and willingness to change.

Criterion 5: For children who are overweight/obese: "Management plan for a healthy lifestyle should be discussed with parent/guardian."

Data Collection Tool:

- Number of overweight/obese paediatric patients reviewed for this audit.
- Number of these patients where the clinical record documents the existence of a management plan.

Criterion 6: For children who are overweight/obese: "Monitor progress and review child within 3 – 6 months."

Data Collection Tool:

- Number of overweight/obese paediatric patients reviewed for this audit.
- Number of these patients documented as having had weight maintenance/weight loss assessed at three to six months.

Criterion 7: For children who are overweight/obese: "Management plan for a healthy lifestyle should be discussed in the context of the whole family."

Data Collection Tool:

- Number of overweight/obese paediatric patients reviewed for this audit.
- Number of these patients where the clinical record documents the existence of a management plan, which explicitly advises a family based approach. This would include any or some of the following: checking parental weights, sibling weights, engaging with main home makes around healthy eating and evidence of provision of high quality eating information (e.g. [Safefood](#) website or Safefood leaflets/booklets).

The next steps are to:

- Analyse and interpret your data via comparison with your target
- Reflect on your initial findings with your Practice Team
- Decide on what changes need to be made and to implement these changes
- Re-audit your practice

A detailed explanation of all of these steps can be found in the ICGP Audit Toolkit, which is available on the ICGP Website at the following location:

www.icgp.ie/audit