



Welcome to the GSF QI Audit Tools Support

Use of GSF Audit tools to show change and evidence for QOF

There are different, specifically developed GSF audit tools available to support progress and demonstrate change in key areas related to end of life care. All Audit tools will support you to fulfil the aims of QOF, but at varying levels i.e., demonstrate change in the QOF requirements of;

- 1) **Early identification** and support for people with advanced progressive illness who might die within the next twelve months.
- 2) **Well-planned and coordinated care** that is responsive to the patient's changing needs with the aim of improving the experience of care.
- 3) **Identification and support for family/informal care-givers**, both as part of the core care team around the patient and as individuals facing impending bereavement.

The 2 GSF Audit tools are;

a) **Retrospective Death Audit – Practice team level** comparative audits.

There are three RDA audit tools for you to choose from, depending on your needs and current attainments, focussing on key QOF specified areas: -

- a) **Basic** - early identification, offering ACP discussions and identifying carers
- b) **Intermediate** - details of identified patients - frailty, from care homes, ACP etc.
- c) **Advanced** - all the above plus preferred place of care, anticipatory prescribing etc.

Once you have decided on the RDA audit tool of choice and registered, you can upload information onto the RDA page on the GSF website and an automated report will be produced showing your comparative before and after results, which can be used in evidence for your QOF submission.

b) **After Death Analysis – Individual Patient level** audit report and reflection of before and after comparative change eg, minimum of 5 patient deaths before you introduce a change and 5 afterwards

- Easy to use, on-line, well established GSF After Death Analysis tool, used extensively across the UK and with a Significant Event Analysis section at the end
- Comparative reports automatically produced following 'after' submissions, demonstrating patient level change.
- Useful for individual's appraisal and revalidation and for reflection of key barriers and successes amongst teams. Minimum use 5 before and 5 after – maximum TBC.

To register – complete our [Audit Registration Form](#)

For further information on the GSF Going for Gold primary care programmes – [see our Flyer](#)