



## Audit of Medical Practice (CQI activity) Summary Sheet

Topic:

The activity was designed by  
(name of organisation if relevant):

Doctors Name:

### FIRST CYCLE

<b>DATA:</b>	Date of data collection:
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<b>CHECK:</b>	Describe any areas targeted for improvement as a result of analysing the data collected.

<b>ACTION:</b>	Describe how these improvements will be implemented.

<b>MONITOR:</b>	Describe how well the process is working. When will you undertake a second cycle?

## SECOND CYCLE

<b>DATA:</b>	Date of data collection:
<b>CHECK:</b>	Describe any areas targeted for improvement as a result of analysing the data collected.
<b>ACTION:</b>	Describe how these improvements will be implemented.
<b>MONITOR:</b>	Describe how well the process is working.
<b>COMMENTS:</b>	

Please retain this sheet for your records to provide evidence of participation in this audit.