

To be completed by audit's Clinical Lead (or other appropriate person in audit team). Content should be factual, objective and evidence based. No anecdotal statements or opinion should be included.

Report Key Messages	
Audit: National Clinical Audit of Specialist Rehabilitation following major Injury (NCASRI)	
Report Name: Second Year Audit Report Overcoming the challenges of NCASRI	
Date of Publication: 12/10/2017	
Key message 1:	Participation of teams in the Major Trauma Centres (MTCs) was challenged by the shortage of consultants in RM to provide local leadership for the audit, and by the lack of existing data collection - the standard Rehabilitation Prescription (RP) comprised just 4 data fields relating to rehabilitation.
Key message 2:	16/22 MTCs are currently participating in the first round of prospective audit. The data collected so far demonstrate considerable variation between MTCs in both data quality and recruitment, as expected from the variations in clinical practice identified in the first year report.
Key message 3:	The full Specialist Rehabilitation Prescription dataset collected in this first round will provide a critical body of information on access to and outcomes from rehabilitation. However, the data burden is not sustainable going forward, and the current timescale for data linkage is anticipated to capture only a small proportion of the patients receiving specialist rehabilitation following trauma.
Key message 4:	Working with the MTCs and other stakeholders a reduced core dataset has been identified for future rounds of the audit. Time points for data collection in the MTCs have been agreed and the optimal time for data linkage. Future rounds of audit should be conducted on a 2-year cycle to allow 12 months for patients to complete specialist rehabilitation and so maximise capture of eligible patients.
Key message 5:	Patients, members of the public and clinicians emphasised that rehabilitation needs of all trauma patients, not just category A and B should be considered. Integrating aspects of the audit into the Standard Rehabilitation prescription would ensure less duplication in data collection and reduce clinician burden but requires further work in the next stages of NCASRI.
100 word summary or abstract of the report:	
It was anticipated that NCASRI would face significant challenges due to the lack of infrastructure and existing data collection highlighted in our first report. This second year has been an important formative stage of NCASRI. Preliminary analysis of MTC data has shown wide variation in clinical practice, and important lessons have been learned with respect to feasibility and timing of data collection and linkage. This report describes how we have addressed the various challenges to develop an audit process that is sustainable for collection in routine clinical practice going forward, and makes recommendations for the next stages of the audit.	