Population data review

Standard operating procedure (SOP) | PHC-SOP-005

Document type	Standard operating procedure (SOP)
Title	Population data review
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Version and status	1.0 | Issued for use. Pending ASF Expert Committee ratification
Prepared by	{{roles.quality_lead.name}}, Quality lead
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Approver and signature	{{roles.clinical_director.name}}, Clinical director Signature: _____ Date: _____
Effective date	{{document.effective_date}}
Next review	{{document.review_date}} (12 months, or sooner after any incident or change)
Replaces	None (new document)
Standards and criteria supported	System S3 (Primary care practice), criterion S3.6
Evidence basis	E-006, E-009
Status of this document	Recommended best-practice model. A hospital may adopt, adapt or replace it with an equivalent that meets the same criteria.

At a glance: what to do

1. Review the register each quarter to find patients overdue for care.
2. Record each gap in care with its owner.
3. Act on each gap and check it closes.
4. Report the gaps to the practice meeting.

Stop and get help straight away if: gaps in care are found and not reviewed for six months.

1. Purpose

To use the practice's own list to find patients who need care and to show where care is missing (S3.6).

2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of {{facility.legal_name}}
When	Whenever the activity described is carried out
Does not apply to	Activities covered by another document listed in section 15

3. Definitions and abbreviations

Term	Meaning in this SOP
Clinical lead	The doctor or nurse in charge of the area at the time

4. Background and rationale

A practice that does not look at its own list cannot find the patients who are overdue for care. Simple data on the register shows where care is missing.

5. Responsibilities

Role	Duties in this SOP	Competence needed
Practice manager	Runs the quarterly review	Management
Clinical lead	Agrees actions for gaps	Clinician

6. Equipment, materials and resources

Item	Specification or standard	Check before use
Records and forms named in this document	Current version	Checked before use

7. Safety and infection prevention

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. Procedure

Follow the steps in order. Where a step says "If", take the action for the case that applies. Do not skip a step. If a step cannot be done, use section 11 and section 12.

Step	Action	How to do it	Key point
1	Run the review.	• Pull the list of patients overdue for each measure from the register.	Use the whole list, not a sample.
2	Record the gaps.	• Enter each gap on PHC-REG-004 with an owner and a date.	A gap needs a name.
3	Act and check.	• Contact the patients. • Check each gap closes by its date.	Closure is the measure.

Decision points

- No decision points in this procedure.

10. Special situations

Situation	What to do
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

11. Problems and escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

12. Monitoring and compliance

What is checked	Target	How often	Who	If the target is missed
Quarterly reviews done	100%	Quarterly	Practice manager	Escalate to chief executive
Gaps with owner and date	100%	Quarterly	Clinical lead	Escalate to clinical lead

13. Records

Record	Where it is kept	Kept for
Record named in this document	Patient record or the area file	{{facility.records_retention_years}} years

14. Training and competence

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

15. Related documents

ID	Title	Relationship
PHC-REG-004	Care gaps register	Register

16. Evidence

ID	Source and status
E-009	ASF Expert Committee consensus.
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

EC = ASF Expert Committee consensus. Items marked EC are reviewed by the Committee each year.

17. Change history

Version	Date	What changed	Approver and signature
1.0	{{document.effective_date}}	First version	Pending Expert Committee approval