Audits and QIPs: Please submit your 2 best closed loop audits and your best other audit/QIP. Please only submit audits/QIPs which have been presented as you will need to provide evidence of presentation. In order to be eligible for this section, the presentation of all elements must have occurred by the **time of the evidence upload window closing**. For each loop of the closed loop audits and for the additional audit/QIP you must provide evidence of your involvement in the design, execution and presentation of the audit/QIP. **Only closed loop audits where you have been involved in both loops are eligible for points for this section. (other than the 3rd audit or QIP).**

Points will be awarded for candidate involvement, reference standard, study design, importance of clinical question and impact of work.

TITLE OF CLOSED-LOOP AUDIT 1:

DESCRIPTION OF APPLICANT ROLE FOR FIRST AUDIT CYCLE:

STANDARD AGAINST WHICH AUDIT CONDUCTED (with references where applicable):

DETAILS OF WHERE FIRST CYCLE OF AUDIT WAS PRESENTED (include date):

…………………………………… ………………………………… ……………………

SUMMARY OF KEY FINDINGS INCLUDING CLINICAL IMPACT (word limit 350):

DESCRIPTION OF APPLICANT ROLE FOR SECOND AUDIT CYCLE (include your role in design and implementation of intervention).

INTERVENTION:

…………………………………… ………………………………… …………………

DETAILS OF WHERE SECOND CYCLE OF AUDIT WAS PRESENTED (include date):

SUMMARY OF KEY FINDINGS OF SECOND CYCLE INCLUDING CLINICAL IMPACT (word limit 350):

**In addition to this template countersigned by your Educational Supervisor (or equivalent):**

* Please provide a copy of the presentation (6 slides per page).
* Please provide a letter from the head of department/clinical lead for audit clearly stating your contribution. **Simple certificates are not sufficient evidence.**

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TITLE OF CLOSED-LOOP AUDIT 2:

DESCRIPTION OF APPLICANT ROLE FOR FIRST AUDIT CYCLE:

STANDARD AGAINST WHICH AUDIT CONDUCTED (with references where applicable):

DETAILS OF WHERE FIRST CYCLE OF AUDIT WAS PRESENTED (include date):

SUMMARY OF KEY FINDINGS INCLUDING CLINICAL IMPACT (word limit 350):

…………………………………… ………………………………… ……………………

DESCRIPTION OF APPLICANT ROLE FOR SECOND AUDIT CYCLE (include your role in design and implementation of intervention).

INTERVENTION:

DETAILS OF WHERE SECOND CYCLE OF AUDIT WAS PRESENTED (include date):

SUMMARY OF KEY FINDINGS FROM SECOND CYCLE OF AUDIT INCLUDING CLINICAL IMPACT (word limit 350):

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TITLE OF AUDIT 3 OR QIP:

DESCRIPTION OF APPLICANT ROLE:

STANDARDS AGAINST WHICH AUDIT CONDUCTED (FOR AUDITS ONLY):

DETAILS OF WHERE AUDIT/QIP WAS PRESENTED (include date):

…………………………………… ………………………………… ……………………

SUMMARY OF KEY FINDINGS INCLUDING CLINICAL IMPACT (word limit 350):

**In addition to this template countersigned by your Educational Supervisor (or equivalent):**

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