

EDITORIAL



Audit has become a part of our daily activity for many years. The monthly half day programme has become well established and to the majority of clinicians it's a useful opportunity to look closely at activity and results and to test performance against a standard. It is, however, easy to forget that the activity is supposed to have a defined purpose, that standards have been described and that

changes can only be made if the subject of an audit is revisited on a regular basis. It is clear from my own experience that the monthly audit process can easily become an extended departmental meeting, time to catch up with clinical and managerial colleagues over a range of topics with a bit of gentle clinical discussion thrown in. All very useful of course, but not the purpose for which a suspension of clinical activity was originally intended. The point was reinforced by one of my colleagues during a recent 'audit meeting', and I was pleased to be able to explain that the subject which I was struggling to communicate had, three years previously, been the subject of considerable discussion. The 'organisation with a memory', to recall the famous phrase from recent reforms of the NHS, must not be allowed to develop amnesia.

The series of audits reported in these pages show two things. Firstly, that the process is alive and delivering clinical information that is useful to change practice. Secondly, that the latest generation of student and qualified doctors appears to be thoroughly committed to it and able to deliver results and opinions with a degree of conviction. Thus we report on adequacy, or rather inadequacy, of pain relief in children and the possible failure of secondary prevention of fragility fractures, of self-help with leprosy and monitoring of patients maintained on toxic drugs. We are pleased to continue to accept audit papers in addition to case reports, original research and articles of a general interest nature. If you are worried about personal exposure we will even publish anonymously!

Andrew Severn
Editor

The Morecambe Bay Medical Journal Prize *for the best article by a junior doctor*

A prize of £200 is awarded each year to the author of what is judged to be the best article published in the *Journal*.

The prize is open to all junior doctors and the winner of the 2008 prize will be announced in the Summer 2009 issue of the *Journal*.