

Olfactory Dysfunction Audit 2024: A prospective snapshot audit of practice

Clinical Audit Department Letter

Dear Caldicott Guardian,

ENT INTEGRATE Olfactory Dysfunction Audit 2024: A prospective snapshot audit of practice

I am requesting permission to collect data from this Trust for the ENT INTEGRATE Olfactory Dysfunction Audit 2024.

Overview of the Audit

Olfactory dysfunction has a prevalence of approximately 22% and post-infectious causes in particular have gained prominence following the COVID-19 pandemic. There is an urgent need for greater awareness and standardised pathways for routine testing and treatments for smell and taste disorders. A newly-formed strategic partnership between ENT UK and the Fifth Sense charity aims to enhance care for individuals with smell and taste disorders through improving education, awareness and encouraging routine smell testing.

INTEGRATE have proposed a national prospective observational audit of practice to understand the epidemiology, presentation, investigation and management of olfactory dysfunction within secondary and tertiary care ENT departments in the UK.

Primary objectives:

1. Collect and report data relating to the epidemiology of olfactory dysfunction i.e. patient demographics, comorbidities, aetiology
2. Report the diagnostic approaches currently used for patients presenting with olfactory dysfunction
3. Report the therapeutic approaches currently used for patients presenting with olfactory dysfunction

Time period for data required

Data will be collected for patients presenting between 1st May 2024 and 31st July 2024.

Receiving Organisation

Organisation Name: ENT INTEGRATE

ENT INTEGRATE is a UK Trainee Research Network aiming to support trainee engagement in ENT research and audit through the participation of multicentre collaborative audits.

Contact details: olfaction@entintegrate.co.uk

Data Collection

Collection of data will be recorded onto an Excel Data Tool. The completed Excel Data Tool allows data to be anonymised prior to secure submission to the project management team (PMT) at ENT INTEGRATE. No identifiable patient information will be submitted to PMT. This project will collect information about non-identifiable demographics, comorbidities, diagnoses, investigations, treatments, clinic outcomes. No patients will be identifiable in subsequent reports, presentations or publications. As such, consent from individual patients will not be required.

There will be no traceability from the PMT's database to local records. If any identifiable data is received, the files will be deleted and the site will be informed. There will be no impact on the management of patients following inclusion in the study.

This project has been determined to be an audit using the HRA decision tool available at <http://www.hra-decisiontools.org.uk/research/> and therefore does not require ethical approval.

At the end of the analysis period, data will be deleted from shared server space and all backups will be overwritten or destroyed in line with NHS approved information destruction/deletion standards. Files will be securely deleted from computer systems (including any copies held on backup or archive media).

All members of the project management team at ENT INTEGRATE are employed by the NHS will have completed Information Governance training in accordance with their own Trusts requirements.

Members of the Project Management Team are aware of their obligations and legal requirements regarding personal confidential data. It is a condition of employment that all employees abide by their organisation's Data Protection Policy and confidentiality clause within their contract of employment.

You can read more about ENT INTEGRATE here: <https://entintegrate.co.uk/>

If you require any further clarification, please contact the Olfactory Dysfunction Audit team at: olfaction@entintegrate.co.uk

Yours Sincerely,
ENT INTEGRATE Rhinology Subspecialty Committee