Introduction
Oxygen therapy within a hospice environment varies according to the needs of individual patients and the nature of their problems. In general terms this is a safe treatment, however it has been recognised that there is a potential for serious harm if oxygen is not administered and handled properly. An internal audit of practices within Accord Hospice took place in April 2009 and six months later the National Patient Safety Agency published a rapid response report regarding the safe use of oxygen within hospitals. Taking both pieces of work into consideration it became apparent that procedures and practices relating to oxygen therapy within the hospice should be reviewed to ensure delivery of safe and effective care to our patients.

Methods
An audit tool produced by Help the Hospices (2009) to test the standards required for hospices to provide medical gases for patients requiring them was utilised to examine both practice and procedures. Seven sub-topics within the audit tool were utilised:-

- Standard Operating Procedures
- Personnel
- Ordering and Receipt
- Storage
- Prescribing
- Administration
- Decontamination

The audit tool allowed three responses - Yes, No or N/A and was supported by a set of Excel workbooks and worksheets, with the analytical formulae already incorporated. The initial audit was carried out in April 2009 and repeated in September 2009.

Results

<table>
<thead>
<tr>
<th>Sub Topic</th>
<th>Initial Audit (April 2009)</th>
<th>Repeat Audit (September 2009)</th>
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</thead>
</table>
| Standard Operating Procedures | 0% compliance  
No standard operating policy (SOP)                                                      | 100% compliance  
SOP based on current best practice now in place. May be adopted on an area wide basis. |
| Personnel                  | 0% compliance (80% N/A)  
No documented evidence of staff training                                                   | 100% compliance  
Nursing & medical staff have received training in all aspects of oxygen therapy          |
| Ordering and Receipt       | 85% compliance  
O2 cylinder dusty & rusty                                                                  | 100% compliance  
SOP                                                                      |
| Storage                    | 54% compliance (43% N/A)  
O2 cylinder stored in unventilated area near to combustible substances                    | 100% compliance  
Safe cylinder storage and labelling now in place                                        |
| Prescribing                | 0% compliance  
No evidence of prescription charts                                                         | 100% compliance  
Oxygen now prescribed in all situations                                                   |
| Administration             | 25% compliance  
No standard operating policy (SOP)  
No documented evidence to support oxygen therapy.                                          | 100% compliance  
SOP                                                                      |
| Decontamination            | 50% compliance  
Only decontamination policy for concentrator in place                                      | 100% compliance  
Full decontamination policy in in place with mostly single use items being utilised      |

Conclusion
In the initial audit several deficiencies in practice were highlighted including standard operating procedures, storage, staff training and prescribing. Actions were taken to address these issues and the second audit showed compliance with procedures had greatly improved. A standard operating policy based on current best practice is now in place and staff training issues have also been addressed. This relatively simple audit has resulted in improved safety and higher standards of care being delivered to patients requiring oxygen therapy within Accord Hospice. It has also been proposed that this policy be adopted by the local joint hospice medicine management committee.

References
Help the Hospices (2009) Medical Gas Audit Tool

http://www.npsa.nhs.uk/