

# Differences between Audit, Research & Service Evaluation

*“Research is concerned with discovering the right thing to do: Audit is ensuring it is done right”* (Smith, R. 1992, Audit & Research, BMJ, 305:905-6)

The table below outlines the differences between research, audit and service evaluation.

Research	Clinical Audit	Service Evaluation
Aims to establish what best practice is or should be?	Aims to evaluate how close practice is to best practice	Designed and conducted solely to define or judge current care
Is often a one off study	Is an on-going process which aims to improve services	Service evaluations define and judge existing service delivery, where research may trial a new approach
Is designed so that it can be replicated and so that its results can be generalised to other similar groups	An audit assesses care currently being provided against a predetermined standard (e.g. NICE guidelines)	Measures current service without reference to a standard
Aims to generate new knowledge/ increase the sum of knowledge	Is usually specific & local to one particular patient/staff group – results are in most cases not transferable to other settings	Is usually specific & local to one particular patient/staff group – results are in most cases not transferable to other settings
Usually involves collecting data that are additional to those for routine care but may include data collected routinely. May involve treatments, samples or investigations additional to routine care.	Usually involves analysis of existing data but may include administration of simple interview or questionnaire.	Usually involves analysis of existing data but may include administration of simple interview or questionnaire
Is theory driven	Is practice based	Asks what are the current practices? Evaluation of cost & effectiveness.

Research	Clinical Audit	Service Evaluation
Is usually testing a hypothesis and following a protocol	Does not affect the normal treatment of patients.	Does not affect the normal treatment of patients.
Usually involves more complex (inferential) statistical analysis	Basic (descriptive) statistical analysis usually suffices.	Service evaluations can use number of qualitative and/or quantitative research methods
Research uses randomisation – allocation to groups	No randomisation	No randomisation
Quantitative research - involves comparing interventions, particularly new treatments that differ from the normal standard. Qualitative research – usually involves studying how interventions and relationships are experienced.	Involves an intervention in use ONLY. (The choice of treatment is that of the clinician and patient according to guidance, professional standards and/or patient preference.)	Involves an intervention in use ONLY. (The choice of treatment is that of the clinician and patient according to guidance, professional standards and/or patient preference.)
No built-in mechanism to act on findings.	Clear responsibility to act on findings through development of an action plan.	Normally leads to research and / or the development of guidelines
Do you want to investigate the effect of a new or existing treatment or technique on patients/carers? If the answer is yes its ' <b>Research</b> '	Do you want to measure current practice against evidence based clinical standards? If the answer is yes its ' <b>audit</b> '	Do you want to evaluate the effectiveness and or efficiency of current practice or service? If the answer is yes its ' <b>Service Evaluation</b> '
<b>Always requires ethics committee approval.</b>	<b>Does not usually require ethical approval.</b>	<b>Does not usually require ethical approval.</b>
<b>Research projects must be registered with the RD&amp;I Dept: <a href="mailto:plh-tr.rd-office@nhs.net">plh-tr.rd-office@nhs.net</a></b>	<b>Audits must be registered with the Trusts Clinical Audit Dept: <a href="mailto:clinical.audit1@nhs.net">clinical.audit1@nhs.net</a></b>	<b>Service evaluations must be registered with the Trusts Clinical Audit Dept: <a href="mailto:clinical.audit1@nhs.net">clinical.audit1@nhs.net</a></b>