

Compliance of multidisciplinary team meeting entries on paperless record

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Aims and hypothesis

To audit compliance with the Multidisciplinary Team meeting entries on electronic casenotes (Midis). We hypothesise less than 100% compliance given complaints from nursing and medical staff regarding this new system. We are auditing this against a gold standard of 100% compliance.

Background

NHS Lanarkshire has been moving towards paperless medical records. It is one of the five health boards across Scotland that use the 'Multidisciplinary Information System' - Midis - package. Our health board recently developed a form on Midis in order to standardise the recording of inpatient multidisciplinary ward rounds.

Methods

This audit is a snapshot of all 24 inpatients in Ward 19, Hairmyres Hospital. The first cycle was done for week beginning 31.12.2018. This was presented at the local consultant's and the ward quality (governance) group meetings. The ward manager was also involved with looking at increasing compliance in nursing staff. This was then re-audited for the week beginning 11.02.2019.

Patients electronic records were accessed and compliance with the MDT form was recorded based on whether particular sections were completed. Results were broken down based on Nursing and Medical sections.

Results

Compliance was 17/24 for the Nursing section and 22/24 for the Medical section. We looked at trends in individual sections of each form and commented on them.

When re-audited compliance fell to 6/23 for the Nursing section and to 13/23 for the Medical section, despite measures put in place.

The second re-audit, done in February 2020, showed compliance of 19/19 for the Nursing section and 16/19 for the Medical section, which showed a greater proportion of forms being completed. 19 was the total number of patients in the ward at the time of reaudit; no patient was excluded from the audit.

Conclusions

Multiple reasons were identified for the fall in compliance in the first re-audit. December was changeover for medical staff, including a new consultant who had many inpatients but did not have access to Midis (thus used paper records). The ward was also facing a bed crisis during this period. Another possible reason would be that teams were informed of the initial audit but not of the re-audit so this may have caused an increase in compliance initially.

The audit repeated in February 2020. Compliance was still not 100% with medical forms even though nursing forms are 100%.

These results have been submitted in the consultants meeting and ward quality group meeting which involves all staff who use these forms. Plan is to consistently encourage staff to complete these forms.

We plan to re-audit every 4 months to monitor compliance with this new system until we achieve 100% compliance.