

IMPROVEMENT NAME: Improving Record Keeping through a QI approach to audit

TEAM NAME:

Emotional Health and WellBeing Service

DATE: December 2022 – March 2023

GOAL

What are we hoping to achieve?

Use a QI approach to Peer auditing to improve compliance against record keeping standards. Particularly anything with compliance under 60% aiming for 85% as minimum – 100% compliance is goal. Consistency across documentation entries. Reliability of Quality Assurance

PROBLEM

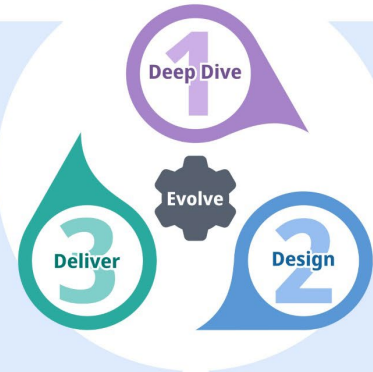
What is the problem we are trying to solve?

Trust wide ongoing issues with inconsistent Record Keeping in certain areas that are reflected in EHWS: Recording of Groups and Relationships; lack of consistency across documentation entries; assigning telephone numbers; recording appointments correctly in the ledger. Deep dive needed to better understand barriers to good record keeping

IMPACT MEASURES

How will we measure improvement?

- % improvement in compliance against standards
- Stakeholder acceptability including survey and unsolicited feedback
- Learning and transfer of knowledge



TEAM

Who is/was involved?

Led by Ella Howard. Emotional Health and WellBeing Service – initially 4 Mental Health Support Teams, 1 Psychology Team total = 40 Collaborating with CCS Quality team and Improvement and Transformation team Lead Coach for Quality Improvement.

RESULTS

What did we achieve?

Overall 7% increase in compliance (up to 80% from 73%)
 33% improvement in entries stating who had attended the session
 27% improvement Groups and Relationships
 26% improvements in acronyms being spelt out in full first time used
 22% improvement in correct language being used in documentation
 20% improvement on notes being entered on the system within 24 hours of contact
 High level of stakeholder satisfaction with the audit, positive feedback from practitioners about the value of the audit, with a small number of exceptions – there will be ongoing discussion about audit standards.
 Sharing of approach and learning during audit week with CCS and through HQIP

EVOLVE: NEXT STEPS

What further improvement can be made?

Top 5 improvement areas will be identified after every cycle
 Assigning telephone numbers; updating groups and relationships; CGAS scores being entered; formal letters being sent out within 10 days of contact; recording appointments correctly in the ledger
 Ongoing review of standards to match service offer more closely
 Continue to develop Audit Champion network to give further opportunities for Coproduction around record keeping and auditing
SystemOne Test Patients – Exemplary examples of outstanding record keeping will be added to Test patients.
 Creating a swim lane process map for clarity about the holistic recording of client information - expanding from the roles and responsibilities.

EHWS Audit March 2023 Newsletter

Our first Triannual Clinical Service Audit of 2023 was conducted through March on the EHWS (Emotional Health and Wellbeing Service) teams: The Mental Health Support Teams throughout Cambridge, Fenland, Huntingdon and Peterborough and the Trainee Clinical and Assistant Psychologists. Results, main themes and learning are below. Further learning support can be found on the EHWS shared drive, that include excellent (and short) refresher videos available here (that are being updated in May): X:EHWS Whole Service/Tip and Handy Guides/Recording Guidance - video guides in here/S1 Audit standards can be found on the EHWS shared drive X:EHWS Whole Service/Tip and Handy Guides/Audit, which will let you know what the question numbers below on the left relate to. We also want to hear your feedback, so please take the time to complete our quick EHWS Record Keeping survey that will be sent to you via email.

Compliance Colours Rating Scale - Red <59%, Yellow 60% to 84% and Green 85% to 100%.

Q#	DEC	MAR	DIFF
1	98%	99%	1%
2	46%	55%	8%
3	82%	84%	2%
4	29%	56%	27%
5	100%	100%	-
6	94%	89%	-5%
7	83%	89%	6%
8	88%	88%	-
9	55%	75%	20%
10	54%	61%	7%
11	40%	73%	33%
12	49%	71%	22%
13	86%	94%	8%
14	91%	92%	1%
15	97%	88%	-10%
16	29%	54%	26%
17	90%	84%	-6%
18	87%	99%	11%
19	75%	63%	-12%
20	96%	92%	-4%
21	87%	99%	12%
22	56%	65%	9%
23	95%	95%	-
24	47%	47%	-

EHWS Audit Compliance Comparison 2022/23

WELL DONE EVERYONE WE INCREASED OUR AVERAGE COMPLIANCE BY 7% SINCE DECEMBER 2022!

TOP 5 Audit need for improvement themes across the EHWS teams (highlighted in red from December 2022 improvement list).

1. Assigning telephone number (2).
2. Updating groups and relationships (4).
3. CGAS score being entered into SystemOne (17).
4. Formal letters being sent out within 10 days of contact (19).
5. Recording appointments correctly in the ledger (24).

EHWS Learning

1. For every telephone number it needs to be correct, matching the referral form and assigned on the SystemOne (S1) administrative tab in the comments section of record contact details. i.e. 212345678910 (mobile - Jane Smith, Mother).
2. Groups and relationships need to match the referral form/ assessment information and have been updated/amended on S1. End relationships that are out of date or mark in error incorrect or duplicate data.
3. There needs to be two CGAS scores at first then last contact. These are crucial statistics that contribute to our service access targets.
4. Formal letters need to be finalised and sent out within 10 working days from the last contact with a client. A note needs to be entered into S1 if this is not possible.
5. Assessments and intervention sessions should be recorded in the S1 ledger. The ledger should correspond with the number of sessions and the status been changed from booked to finished/Cancelled/ Was not brought. Detailing each appointment makes it easier to see what the appointment was for.

We will be auditing again in July 2023, to ensure all the hard work and improvements are documented. For July's audit Clinical leads from each team will be reviewing the audit questions to make them more applicable and streamlined. The Audit Guide will be updated to match any changes.

Keep up the good work!

We are creating a team of EHWS Audit Champions to help support each team around record keeping and our service audit process. We want to develop open discussion around how we can continue to improve as a service and support everyone to achieve outstanding record keeping! Please contact ella.bowdenhoward@nhs.net for more information.

Cambridgeshire Community Services NHS Trust: delivering excellence in children and young people's health services