

## To Improve The Information Governance Processes Of Fact-Finding Assessments Stored On The Therapy Z Drive

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The Therapy team were writing Fact Finding Assessment's (discharge documents) and storing them on the Therapy Z drive. After consideration of information governance issues it was decided that there needed to be a change in the process. The team utilised the 5S process to sort the current folders on the Z drive and enable a new process to be formed.

**Aim:** To have improved the information governance process of the FFA folder on the Z drive by the end of September 2022 as evidenced by improved governance in the naming and storage of files and the access to files.

### Plan

Current practice was for the therapy team to start the FFA document and save it into a folder on the Z drive before it was sent onto the discharge hub. This allowed staff to start the form and come back to it. There was a process whereby the storage was split into folders for discharge pathways 1 and 2 (care packages or short- term rehabilitation beds) and therapy only referrals (to receive therapy after discharge). Each of these folders has a folder for being completed and finally completed. However, there were also lots of files that were not stored in the right place, some loose in the overall file. Files were also stored using a patients name, and access to the folder was open to all therapy staff, thereby causing the information governance issue. The plan was to sort out the folders so an updated process could be introduced.



### Do

In order to sort the folders the inpatient admin support team moved all the completed forms into a folder for themselves and started to upload them onto clinical portal (this involved changing word documents into a PDF which they involved the IT team for), and then delete them from the Z drive folder (this process alone was approximately 50 hours work). The teams were asked to move or delete any files that were loose or stored incorrectly and given two weeks to complete that. After that period of quarantine, the therapy quality improvement lead helped further sort the folder by comparing the two folders and deleting duplicates and then checking on portal if FFA's had been completed and moving them into the correct folder. This process was initially time consuming but allowed the team to get to a phase whereby the new process could be implemented. The new process then allowed the team to simplify the process as well as standardise it. Where files were to be stored and how they were to be named were part of the new process. The quality improvement lead continued to provide support in order to help with the "Sweep" part of the 5S process. This work included a monthly review of the folders and sending emails to team members who had stored things incorrectly .

### Study

New file names to increase compliance with information governance were now clearly being used, with no files having patient names on them. The Admin team also took control over who could and could not have access to the overall folder. The number of files in the folder was reduced going from hundreds of individual files waiting to be uploaded to only have the previous months work wating to be uploaded. This reduced the information governance risk or storing unnecessary information on the Z drive.

Name	Date modified	Type	Size
Completed and sent	13/09/2022 09:42	File folder	
Partially completed - not yet sent	13/09/2022 09:42	File folder	

New referral forms can be located on the intranet, on the 'Discharge' page. [SaTH Intranet - Discharge](#)  
Name the saved document using: Patient initials- hospital number- PW choice. E.g.: GS-12345-PW2

Complete referral form, the therapy specific section is highlighted in green. Fill in the demographics section (top of form) and remember to include your own details (bottom of form).

**Process for sending your referral form:**  
Please add a delivery receipt to this email. (Go to options bar, choose, and tick delivery receipt).  
Include your details and contact bleep on the email.

### Act

The final S of self discipline is to maintain the folders and continue to input the FFA documents onto clinical portal, reducing the information governance risk. Parts of the new process are now well embedded (such as the way to label the files) and although the loss of one of the admin team has led to some delays in continuing to upload the FFA's to clinical portal the process is now in place. The team need to continue to perform a regular sweep of the folders in order to maintain the changes. Overall the access to the folder is now limited and the files labeled in a better way. Completed files are deleted after being uploaded onto portal and the overall risk of an information governance breach is lower. The team have moved from level 1 to level 3 on the 5S levels of achievement grid so there is still ongoing work to do.