

Urology Casenotes QIP

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Casenotes provide a written record of all treatment that a patient receives during their hospital admission. Vitally important for several reasons, including providing ongoing patient care, clinic audit, litigation evidence and payment for clinical activity. Regular audit of the Casenotes is required for the NHS Litigation Authority (NHSLA).

Aim: Following an audit of medical documentation, it was found that the level of completion had declined from a previous audit. The aim of this QIP was to improve documentation standards within the Urology department in RSH, as measured by an improved audit score.

Plan

This is the second QIP cycle and we planned to build on the success of last year’s intervention. On review on last years data, we identified new areas of focus for this years intervention, which included documentation in the following areas:

- Past medical history
- Medical history
- Time
- GMC number

The plan was to engage with stakeholders, including the urology consultants and importantly the junior doctors who are likely to be completing this documentation.

Study

A retrospective audit was completed of case notes for patients admitted to RSH for elective surgery or emergency admissions in November/December 2022. There were 50 patients that were randomly selected and reviewed. The results were collated and compared to the previous audit in November 2021.

Results: There was improvement in all areas identified improved from the previous audit, which can be seen in Figure Two.

Figure Two:

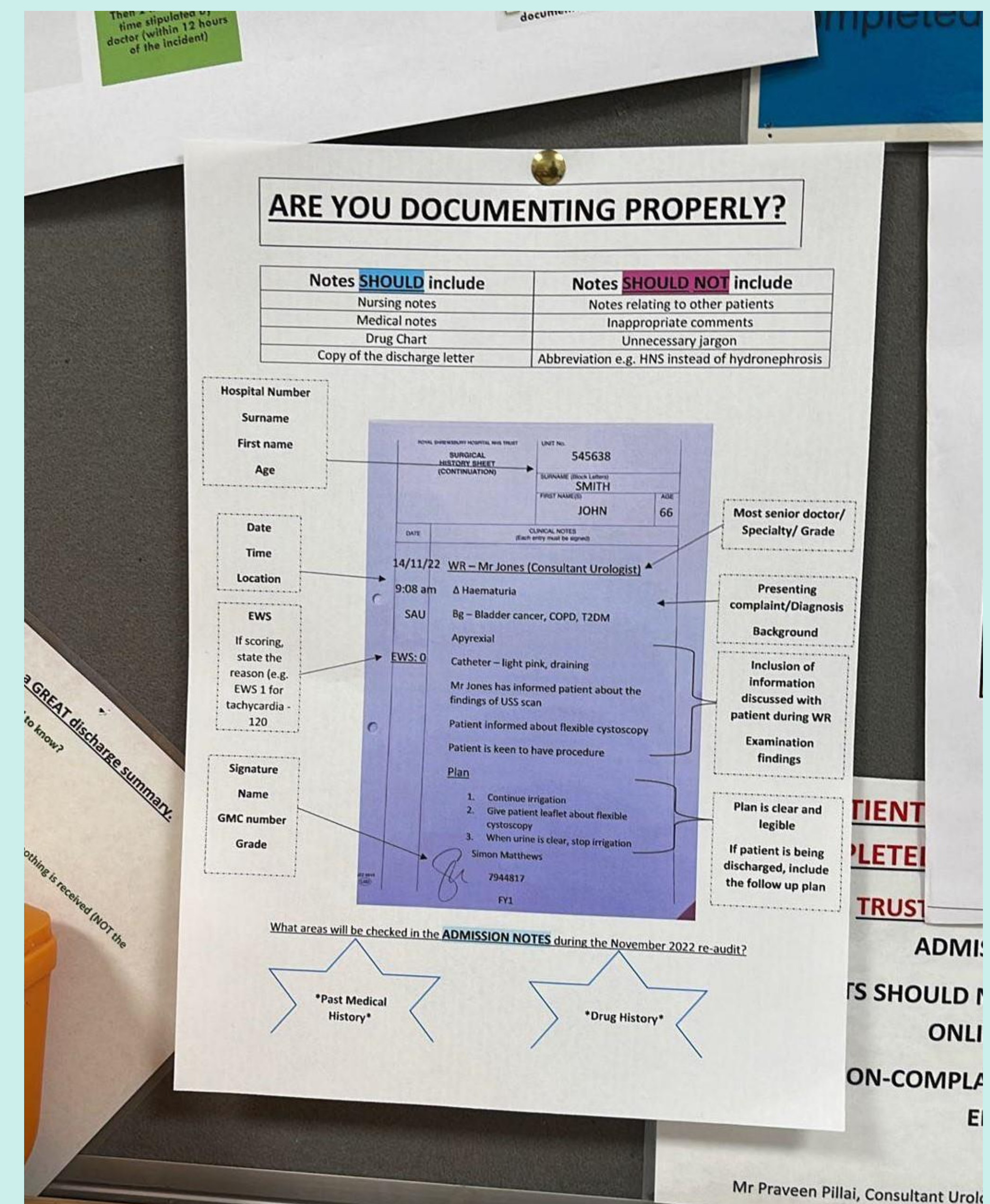
Area	Nov 2021	Nov 2022
Past medical history	88.5%	95.7%
Medication history	73.1%	95.7%
Time	58.5%	88%
GMC Number	25%	82%

Do

The urology FY1s were identified as a key part of the change cycle, and they were consulted in the development of the intervention and helped create the poster and identified areas where it would have the most impact. The main change to the intervention this year was a clear example of good documentation, with an example ward round documentation included.

The QIP was also introduced at the Urology Governance meeting, and the consultant team were engaged with the ongoing project.

Figure One: The poster in the surgical doctors’ office



Act

There was improvement in all areas identified in this QIP, with significant success in GMC number documentation. The success of this years’ audit will have been influenced by the engagement of stakeholders, specifically the urology FY1s who are responsible for much of this documentation and their influence of the design and implementation of the intervention poster. The ongoing support from the urology consultant team has also been beneficial. Posters can be a powerful intervention, as they serve as a visual guide and a simple reminder on good documentation.