Quality Improvement Projects

**Project Title:** Improving Incident Data Quality and Staff Experience

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Problem/Background:

100% of incidents coded as 'Inappropriate behaviour' were miscoded by incident reporters between Jan 20 and Apr 21. Incidents miscoded won't be addressed by the necessary Subject experts and won't follow legal frameworks. It makes BHFT untransparent as an organisation, could lead to litigation/fines, we identified many areas of missed learning and could impact our CQC

Current State:

Out of 382 incidents categorised as behaviour all of them were not correctly coded. One member of the Datix team spent 6 months in 2020 at 7.5 hours a day quality checking incident coding due to miscoded incidents


Pareto chart tool

- - Datix data quality improvement drive
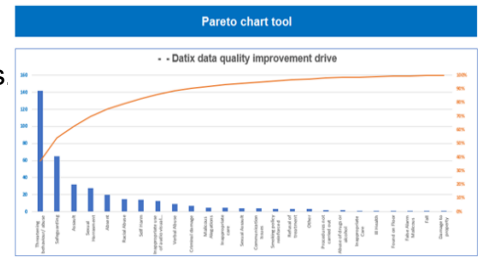
Vision & Goals:

Vision: For 100% of incidents coded as 'inappropriate behaviour' to be accurately coded.

Goals: To have data that better reflects the experiences staff and patients have had to deal with so thy receive support, learning is gained and ultimately incidents are prevented in the future.
'Inappropriate behaviour' incidents to be reduced to 0% by Sept 2021.

Analysis, Root Causes and Countermeasures:

Fishbone Diagram
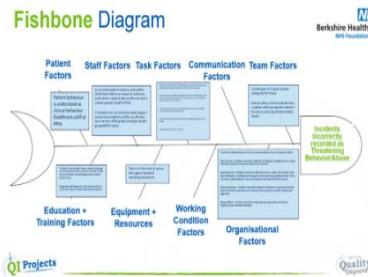
A member of the DATIX or Patient safety team review and amend all inappropriate behaviour incidents which is time consuming

- Why? Data is often miscoded as 'Inappropriate Behaviour'
– Why? Clinical staff code incidents differently to their intended meaning
– Why? Clinically a patient self-harming or assaulting staff is thought of as Inappropriate behaviour, so the code inappropriate behaviour appears correct
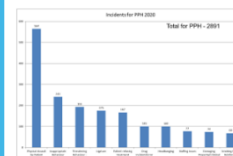– Why? Inappropriate behaviour is an available option

Task Factor: The PST amend all IB coded incidents, this is time consuming. Due to the volume of incidents and unaware of the consequences, they were being left.

PDSA Cycles:

Outcomes

Outcome

As the project started moving there were feelings shared from some stakeholders where workload was an issue and a concern at the increase in the figures. To reduce this, I created processes repeating the QI methodology to reduce this burden/concern on other teams.

Insights/Learning:

I think because of the amount of stakeholders and guidance there was little that could be done differently.
I think a challenge for me was getting stakeholders to do more administration and understand the legal complexities involved, so using QI methodology to create processes increased the time burden on my team as they always resulted in my team doing more. With the increase in workload we were able to demonstrate and secure an additional staff member as it was recognised, through data, this was an issue.