



Quality Improvement Projects

Project Title: Improving Incident Data Quality and Staff Experience

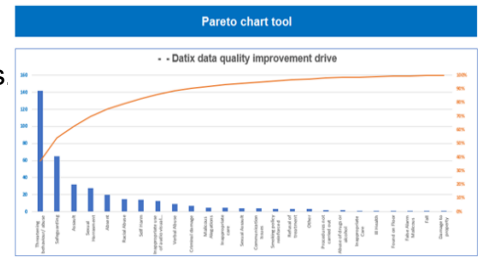
Team Members: Anthony Sellwood, Matt Wylam and Sandra Moore

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.

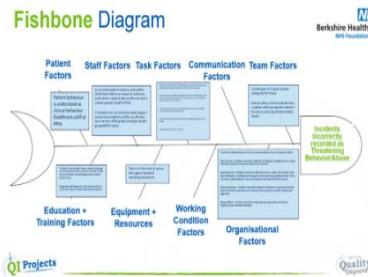


Vision & Goals:

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 they 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:



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

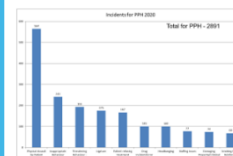
Task Factor: The PST amend all IB coded incidents, this is time consuming. Due to the volume of incidents and unaware of the consequences, they were being left.

PDSA Cycles:

Plan	Do	Check	Act
<p>What is the countermeasure being tested?</p> <p>To remove the subcategory 'Inappropriate behaviour' from the Datix reporting tool and instead use the more specific coding for these incidents. We have found these incidents are now coded as 'Self-harm' or 'Assaulting staff'.</p>	<p>What are we trying to improve?</p> <p>Improve Data Quality within DATIX and reduce waste on quality checking. Improve the quality of data to support the Trust North Goals: Harm Free Care, Supporting Staff, Good Patient Experience and Money Matters</p>	<p>What data will you capture to measure this?</p> <p>All incidents coded as 'Inappropriate Behaviour'</p>	<p>How will the data be captured?</p> <p>Datix</p>
<p>Who will capture it?</p> <p>Datix Team</p>	<p>What do we need to do to make the test happen?</p> <p>Spend time reviewing the data</p>	<p>Who is doing the testing?</p> <p>Datix and Patient safety team</p>	<p>How long will the test be for? (insert date from and to)</p> <p>1 month</p>
<p>What have you learnt from your first?</p> <p>By removing the 'Inappropriate Behaviour' from the Datix reporting tool we have found that these incidents are now coded as 'Self-harm' or 'Assaulting staff'.</p>	<p>What does your data tell you?</p> <p>There has been an increase in incidents coded as 'Self-harm' or 'Assaulting staff'.</p>	<p>Have you achieved the desired improvement?</p> <p>Yes</p>	<p>What happened? What was the outcome?</p> <p>Code was removed and extra support provided by DATIX team to support the transition. The outcome has found that there is an increase in patient safety, trust and staff related incidents.</p>
<p>What is the countermeasure?</p> <p>Remove 'Inappropriate Behaviour' from the Datix reporting tool and use the more specific coding for these incidents.</p>	<p>What are the countermeasures?</p> <p>Support countermeasures that are already in place and make changes.</p>	<p>What is the countermeasure?</p> <p>Remove 'Inappropriate Behaviour' from the Datix reporting tool and use the more specific coding for these incidents.</p>	<p>What is the countermeasure?</p> <p>Remove 'Inappropriate Behaviour' from the Datix reporting tool and use the more specific coding for these incidents.</p>

Outcomes

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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.

