conferenceseries.com

2nd World Congress on

Psychiatry and Psychological Syndromes

November 11-12, 2019 | Madrid, Spain

Evaluating the use of multi-disciplinary team meeting sheets in older adult & adult mental health in a tertiary psychiatric hospital in NHS Grampian, North Scotland 2019- A completed audit cycle

Sanah Ghafoor

Royal Cornhill Hospital, United Kingdom

fultidisciplinary care is common practice, although not uniform, throughout the country according to NICE. Practical implementation of multi-disciplinary care is variable across different wards and is vital for effective communication and planning of patient care. Multi-disciplinary team meeting sheets were implemented in the Mental Health Service in NHS Grampian following recommendations from an adverse event report involving a suicide in 2012. After the initial audit, a further cycle was completed and the loop closed in 2019. Aims were to evaluate whether attendance at the meeting was multi-disciplinary, evaluate the level of completion of paperwork and to evaluate whether errors are documented appropriately. Method employed included utilising a data collection tool created by the Clinical Effectiveness Team on the Older Adult and Adult Mental Health wards over the course of one week in 2019.Results showed an improvement in the use of MDT sheets across both Older Adult and Adult Mental Health from n=18 to n=78 (a 77% increase), improved written documentation of changes (89% in previous audit vs 99% in 2019), who was responsible for making those changes (61% vs 69%), an improvement in patient identifiable information (67% vs 99%) and written evidence of staff members and designation present at the meeting (89% vs 96%). Areas requiring improvement identified include legibility (94% vs 81%), accuracy of recording errors and signature/designation (94% vs 90%/78% vs 76%) of staff on MDT sheet. The recommendations were discussed at the Audit & Clinical Effectiveness Meeting in the Mental Health Service in NHS Grampian. These included typing/ writing in capital letters to improve legibility, providing education via email/at handover on accuracy of recording errors and finally promoting joint medical & nursing responsibility for signing and completing paperwork. Further re-auditing once changes are implemented may be required.