*Please note that anything that is highlighted is not poster content – just thoughts/ideas about the content in that section.*

**Title: Better Notes: an electronic interdisciplinary documentation system for patient admissions and care planning.**

**Authors:**

Amelia Crabtree**,** Bee Cochran, PeterHunter

**Background: the problems with paper needed a solution.**

An audit of Caulfield Hospital’s inpatient, paper-based documentation revealed:

* inconsistency in documentation practices
* duplication of information
* variable contributions to care planning and goal setting from team members, and
* failure to meet documentation related targets

The aim of the Better Notes project was to develop and integrate the use of an interdisciplinary electronic documentation system for all admissions, care planning, team meetings and handovers to address these problems

**Our Strategy for Change: develop and deploy an electronic package to improve patient care**

*This table captures the when, who, and what of our project, (outlines time periods and each of the participants/people involved, processes and measures completed during each) – This does not have to be displayed as a table, it is really just like this currently to categorise the information.* ***It represents a timeline and the more this can be represented as a diagram/graphically (rather than text) the better.*** *The idea would be to give the viewer and overview of what we did – the actual focus of the poster is better placed on the outcomes and lessons learned*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | July 2011 – project commissioned | November 2012 – Pilot Commenced | June 2013 – Preparation for site-wide roll-out | February 2014 – Better Notes implemented | April 2014 – Better Notes roll-out completed |
| People | Multidisciplinary Working Group   * Clinicians, project management, IT | Pilot Ward Staff | Steering Committee   * Executive, project management, HIS, clinician leaders, IT representatives, | All staff across 6 remaining subacute wards |  |
| Processes | Review of paper based documentation – areas to streamline and auto-populate identified  Design and testing of electronic versions | Pilot of Better Notes  On ward training  Change requests to improve documents and fix bugs based on feedback | Refine Better Notes based on feedback  Marketing and staff engagement:  Flyers, videos, forum presentations,  Training:   * Champion users * All staff | Staged roll-out to consecutive wards |  |
| Measures | All wards:  Documentation Audit  Survey - Attitudes  Documentation Time – self report (individuals) and teams (time-motion) | Feedback Surveys, verbal log,  On site forms  Pilot ward: 3 month repeat all measures plus user satisfaction | Pilot Ward: 9 month - repeat all measures  Site:  Documentation time – Work Sampling (individuals) | Feedback via champions and ward management  Change requests logged for review at end implementation | Site: 3 month repeat documentation audit, survey plus user satifaction |

**Outcomes: improvements already occurring after three months of Better Notes**

Early medical record audit has shown improvements for patients.

*I have also included the excel spreadsheet that contains the data and graph in a different attachment. Please modify the graph to suit your design.*

The positive impact of Better Notes is also demonstrated through themes in qualitative measures

* Increased accessibility and legibility
* Improved communication between team members
* Increased accountability for goal setting

*These last three things are the themes of the feedback – if you think quotes would be more impactful, let me know and I can provide them*

**Lessons learned: What worked for Better Notes?**

**Clinician engagement**

Buy-in from clinician groups at both ward and management level was crucial to smooth transition during the change implementation process

**Dedicated project support and collaboration with representatives of all stakeholders**

Both the Working Group and Steering Committee combined the expertise of our business unit with stakeholder delegates to develop and deploy the product.

**Training and support within the clinical environment**

Our project achieved this through up-skilling of designated champions, who continue to act as ward-based educational support for other staff and who promote Better Notes within their own ward and departments.

**IT resourcing and understanding of the business requirement**

Communication between the technical and clinical contributors to Better Notes allowed a collaborative approach and improved delivery of the product

**Harnessing motivation**

Good will and enthusiasm generated by Better Notes has been used to initiate and support related quality improvements

**Next Steps: Working towards more streamlined documentation and improved efficiency**

* Increases the scope of Better Notes to include other documents and progress notes
* Provision of faster speed of technology
* Extra-training for specific clinician subgroups and up-skilling to establish a second group of champions
* Review documents to improve flow through documentation to the discharge summary, clinical decision support, quality of care delivery and goal setting, data usage for research and audit efficiency

**Acknowledgements**

The Better Notes Steering Committee and Working Group

Caulfield Hospital Staff

The Alfred Health Information Technology Department

**Contact**

ameliajcrabtree@gmail.com