

AUDIT OF THE USE OF THE PHYSICAL HEALTH IMPROVEMENT TOOL (PHIT) TO DOCUMENT PHYSICAL HEALTH MONITORING ON ELECTRONIC HEALTH RECORDS AT A MENTAL HEALTH TRUST IN MANCHESTER.

Author, A. Baynham¹
1. Greater Manchester Mental Health

INTRODUCTION

“The Five Year Forward View for Mental Health NHS”
People with a severe mental illness die on average 15-20 years younger than those without. ⁽¹⁾

Physical health monitoring Identified as an area of concern. New Electronic Health Record (Paris) was introduced in December 2018. Different physical health support across trust.

Reaudit

AIM

To clarify if Initial Physical Examination (IPE), ECG and admission bloods are being completed and if they are being completed are they being documented appropriately on the PHIT.

To identify reasons for the IPE, ECG and Bloods not being completed and review if refusal is being appropriately documented.

RESULTS

Improvement in all 6 standards.

In re-audit

Initial physical Examination (IPE)

- 3 out of 25 had no physical and two of these had clear reasons why documented

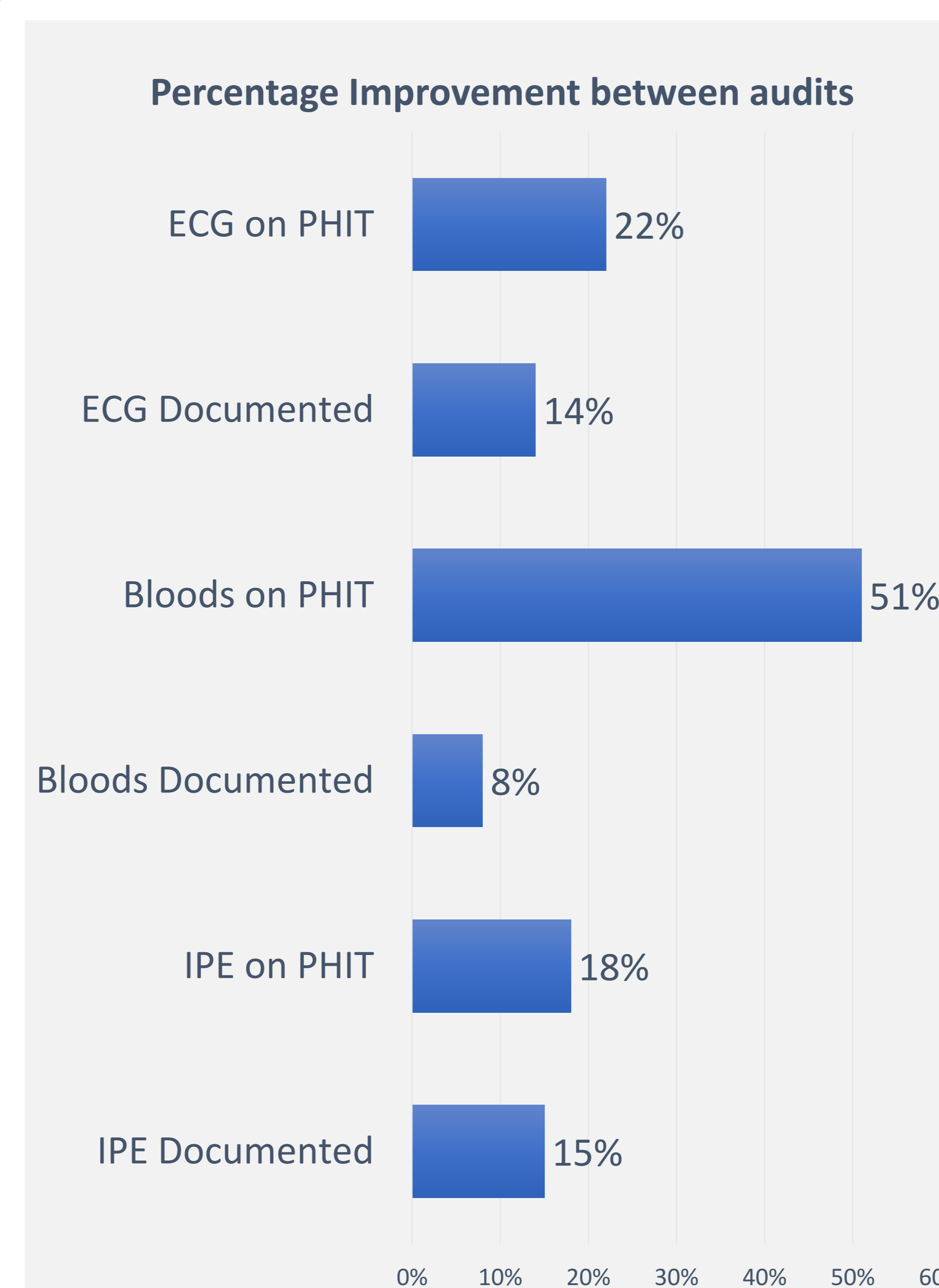
Admission Bloods

- 2 out of 25 had no bloods, one had a clear reason for refusal the other did not

ECG

- 3 out of 25 did not have an ECG and in each case the reason was documented.

Graph demonstrating the improvements on the 6 standards monitored.



		2019 Audit	2020 Reaudit
IPE	Documented	73%	88%
	On PHIT	34%	52%
Bloods	Documented	84%	92%
	On PHIT	33%	84%
ECG	Documented	74%	88%
	On PHIT	42%	64%

Table shows the differences in completion rates between the two audits.

METHOD

- Retrospective audit of patient electronic notes (PARIS) – Case notes and PHIT care document
- Patients were identified using a report prepared by Business Intelligence.
- Initial audit sample of 89 patients, all admitted in April 2019
- Interventions between the two audits including
 - Presented findings, Physical health monitoring covered in induction, PHIT box added to handover
- Reaudit random sample of 30 patients inpatients in Feb 2020.

CONCLUSIONS

- New Electronic Record has had some time to “bed in”
- The bloods result documentation is monitored by the Cardiometabolic Health Check report – perhaps why most likely to be documented in PHIT
- Limitations/differences – slightly different data set, previous was admissions in set time frame, this data was inpatients in a set time frame
- Needs to review if we can reduce duplication – currently document in case notes and PHIT care document
- Future audit to look an impact of Physical Health Team

REFERENCES

1. **A report from the independent Mental Health Taskforce to the NHS in England.** NHS England. [Online] February 2016. <https://www.england.nhs.uk/wp-content/uploads/2016/02/Mental-Health-Taskforce-FYFV-final.pdf>.

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CONTACT INFORMATION

Email: abaynham@doctors.org.uk

Twitter: @antongyan