162 A Closed Loop Audit Assessing and Improving the Quality of Electronic Discharge Documents in a Neurosurgical Ward for Patient Safety and Continuity of Care

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Aim: To assess the quality of neurosurgical electronic discharge documents (EDDs) as per the Scottish Intercollegiate Guidelines Network's (SIGN) discharge document guidelines, and to implement interventions to ensure patient safety and continuity of care.

Method: We performed a closed loop audit on the quality of EDDs at the neurosurgical unit at Ninewells Hospital. We collected six sets of two-weeks' worth of EDDs from the Tayside EDD system coinciding with foundation trainee changeover times for a representative sample of pre- and intra-COVID-19 EDDs. We analysed our findings and developed interventions in collaboration with the MDT. These included a copy-paste template, educational poster, and presentation, and more. We implemented the interventions and reassessed EDDs after three months.

Results: A total of 207 EDDs were included. Pre-interventions, 88% of the EDDs were inadequate in quality when compared to SIGN's guidelines. This had 33% reduction post-interventions. The percentage of EDDs adequate in quality doubled post-interventions, from 22% to 43%. The most commonly mistaken or missed criterion pre- and post-intervention was the neurological status on admission and discharge. Others were mistaking presenting complaint for diagnosis and vice versa, and not mentioning follow-up or new medications.

Conclusions: Accurate records of care, including discharge documents, are central to the principles of good medical practice outlined by the GMC. This study showed that EDD quality is compromised due to time pressures, lack of information and constant changeover due to COVID-19. We alleviated this by creating accessible interventions that assure safe patient care despite the challenges of changeover and COVID-19.