

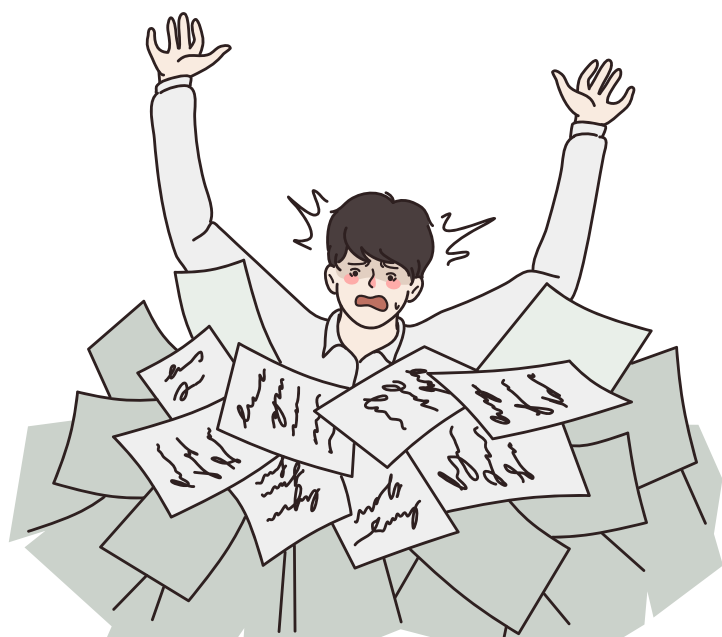
# Implementation of electronic software to reduce auditing and reporting times and improve patient outcomes

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## Introduction

The IP&C team were frustrated about the existing manual auditing process. The issues which caused them frustration were:

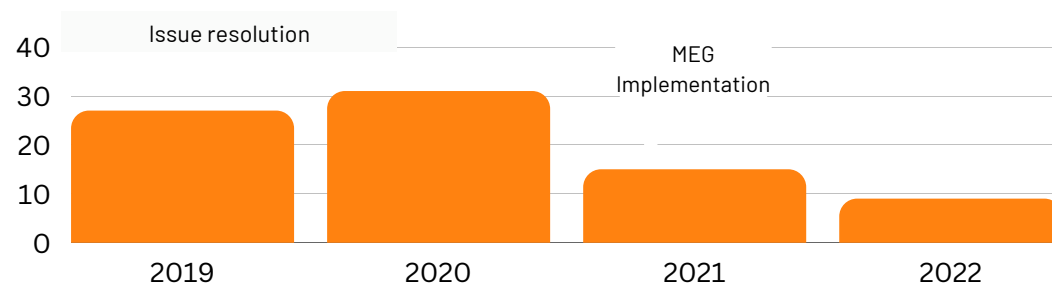
- Lack of cross-site coordination of audits
- No tracking of issue identification
- Double handling of data - written notes then typed in Excel or Word > 2hr task
- Data was time-consuming to collect
- Attachments were often too big to be emailed
- Incomplete audit cycles
- Low prioritisation of report finalisation leading to delays in result dissemination
- More than 50% of issues unresolved from one audit to another
- Creation and storage of 'dark data'
- Inability to easily compare wards/depts



By proactively managing compliance audits using a digital audit management system, the Waitemata team were able to reduce data collection times and reporting times. Real-time reporting enabled significant issues to be addressed immediately and common issues identified for further project work.

### Issue Resolution

- Issues such as peripheral lines remaining in place longer than recommended have dropped by 2/3rds in 2022. The rapidity of issue notification to senior staff has helped to reduce the risks to pts
- Ensuring accessibility of the quality improvement dashboard to all senior staff provides an instant visual guide for how long issues have remained unresolved



### Performance monitoring

- Results can now be generated for one ward/dept over time or specific wards/depts

### Rapid scaling up

- Initially, the software was only used by the IP&C team however during the COVID surges we rapidly created new users for every ward and dept and uploaded COVID-specific audits as required by the Exec team
- Number of users went from 10 to >100 in 1 week

### Increase in surveillance topics

- Pre-electronic audits the only topics surveyed were environmental audits and vascular access devices
- Post implementation there are 19 audits loaded onto MEG

### Improvement in time to issue report

- Pre-electronic auditing it took on average 10 days to send a report out post-audit
- Post-implementation it takes a maximum of 1 hr

## Conclusion

The use of electronic auditing software increased the efficiency of the IP&C team and ensured results were delivered to all levels of the organisational structure in a timely way

- Real-time reporting enabled significant issues to be addressed immediately and common issues identified for further project work - the IP&C team are now able to accurately target their quality improvement initiatives to real issues. At the same time the QI dashboard enables engaged managers to own issue resolution for their area ensuring pts are exposed to the risks of infection in a shorter time frame
- However buy-in from your IT dept is needed from the outset as you navigate IT support issues and privacy assessments - as they may not initially see the worth of the software

## Objectives

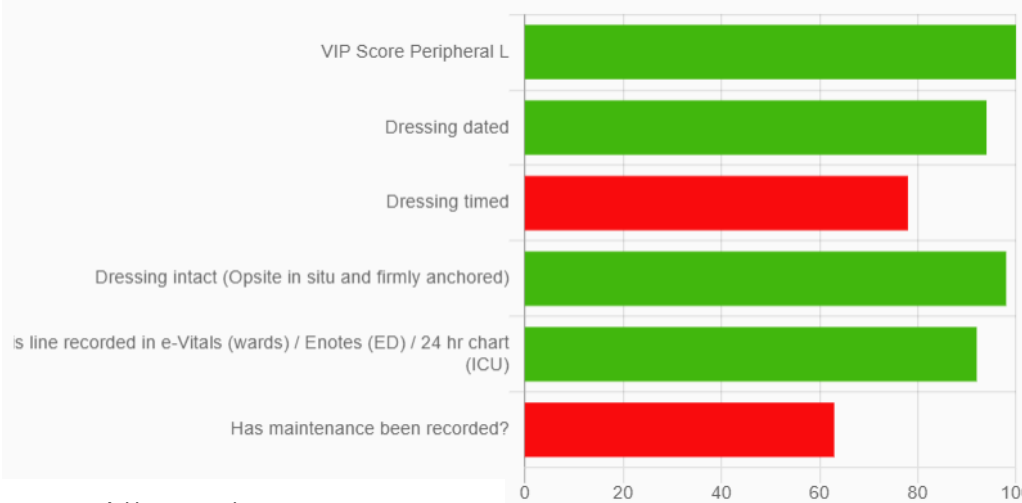
To find software with:

- A simple user interface
- Point of care access
- Software needed the ability to easily work with existing organisational QI software
- Automation of report generation
- Analytics
- Local ownership of forms for updating
- Local ownership of users
- Cloud storage for easy access across all sites and community
- Ability to scale up rapidly if required
- Automation of report distribution
- Usability across a variety of devices (CoWs, IPADs, android phones, apple phones, desktop)
- Reliable customer support

### Easy identification of hotspots by using analytics

All ward answers (graph)

#### Compliance by question



All ward answers (percentage)

#### Compliance table

Ward	Average Compliance
WTH Wards - SCBU WTH	97.1% (15)
WTH Wards - Rangitira WTH	94.0% (16)
WTH Wards - Waiaatarau Acute Mental Health	92.1% (16)
WTH Wards - Muriwai	91.9% (28)
WTH Wards - Haemodialysis-WTH	90.6% (44)
WTH Wards - Theatre	90.3% (30)
WTH Wards - Anawhata	89.7% (35)

### Issues Heatmap

Overall Compliance	91% (1528/1679)	67% (55/82)	69% (41/59)	96% (1272/1328)	74% (43/58)	77% (17/22)
VIP Score Peripheral L	100% (319/320)	100% (15/15)	100% (10/10)	100% (258/259)	100% (10/10)	100% (4/4)
Dressing dated	94% (301/320)	80% (12/15)	90% (9/10)	97% (250/259)	70% (7/10)	100% (4/4)
Dressing timed	78% (249/320)	13% (2/15)	30% (3/10)	90% (234/259)	10% (1/10)	25% (1/4)
Dressing intact (Opsite in situ and firmly anchored)	98% (314/320)	93% (14/15)	90% (9/10)	100% (258/259)	80% (8/10)	100% (4/4)
Is this line recorded in e-Vitals (wards) / Enotes (ED) / 24 hr chart (ICU)	92% (295/320)	47% (7/15)	90% (9/10)	95% (247/259)	90% (9/10)	75% (3/4)
Has maintenance been recorded?	63% (50/79)	71% (5/7)	11% (1/9)	76% (25/33)	100% (8/8)	50% (1/2)

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