Improved Clinical Documentation for Improved Communication

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Aim:

An improvement in centralised electronic documentation for cancer services will be evidenced by 50% of diagnosed cases having staging information recorded and 75% having their Eastern Cooperative Oncology Group performance score (ECOG) documented in ARIA

Background:

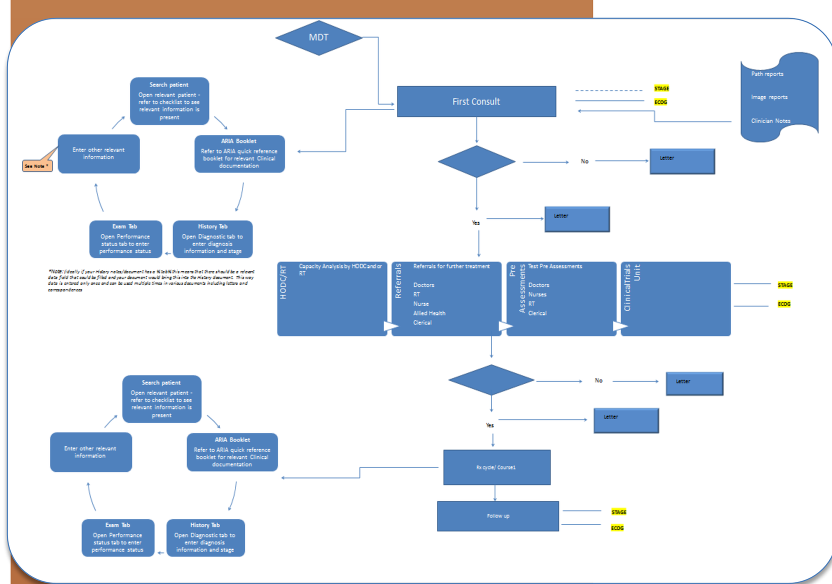
Indicators such as the performance status as defined by the Eastern Cooperative Oncology Group (ECOG), TNM staging as recommended by the American Joint Commission on Cancer (AJCC) and treatment protocols as recommended by the Cancer Institute of NSW (eviQ, CINSW) are used by all Cancer professionals to make routine planning, scheduling and treating of patients.

Despite having suitable functionalities within the existing clinical support system ARIA®, the vital clinical indicators are being collected using analogous methods such as letters, free text questionnaires and schedule notes.

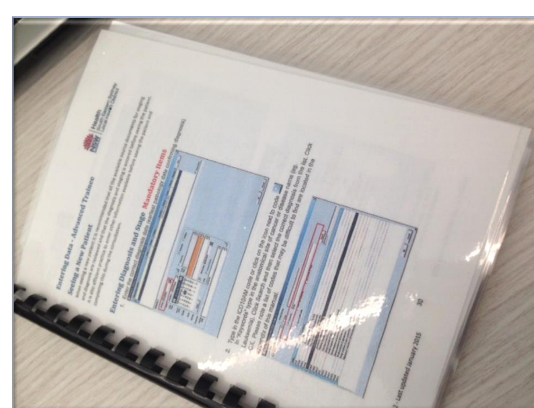
This is not helpful in the long run if one is intending to monitor the indicators.

Method:

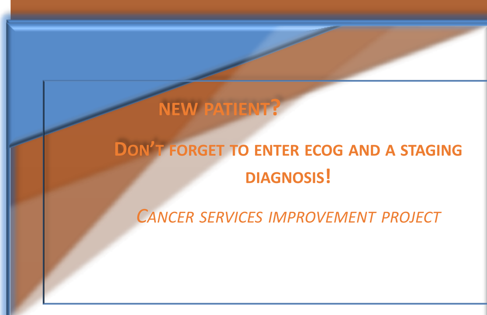
- Driver-diagram technique was used to identify issues and solutions. Information sessions, reminder cards, regular feedback on documentation.
- A team of interdisciplinary members increased enhanced collaboration and improved team work.
- Customized reports were generated to provide constant feedback to the working group about their progress.
- Training documents were updated including cheat sheets and quick referral booklets for the clinic desks helping keep the changes sustainable



Identified clinical information flow and Improved recordings



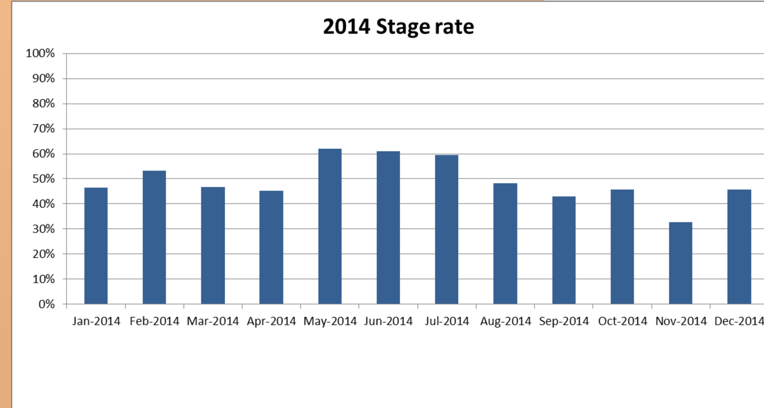
System user-guide and training documentation improved



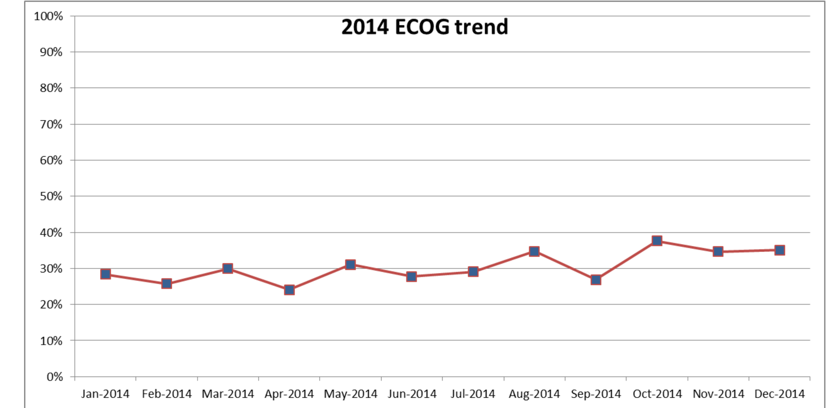
Introduced Reminder Cards

Results:

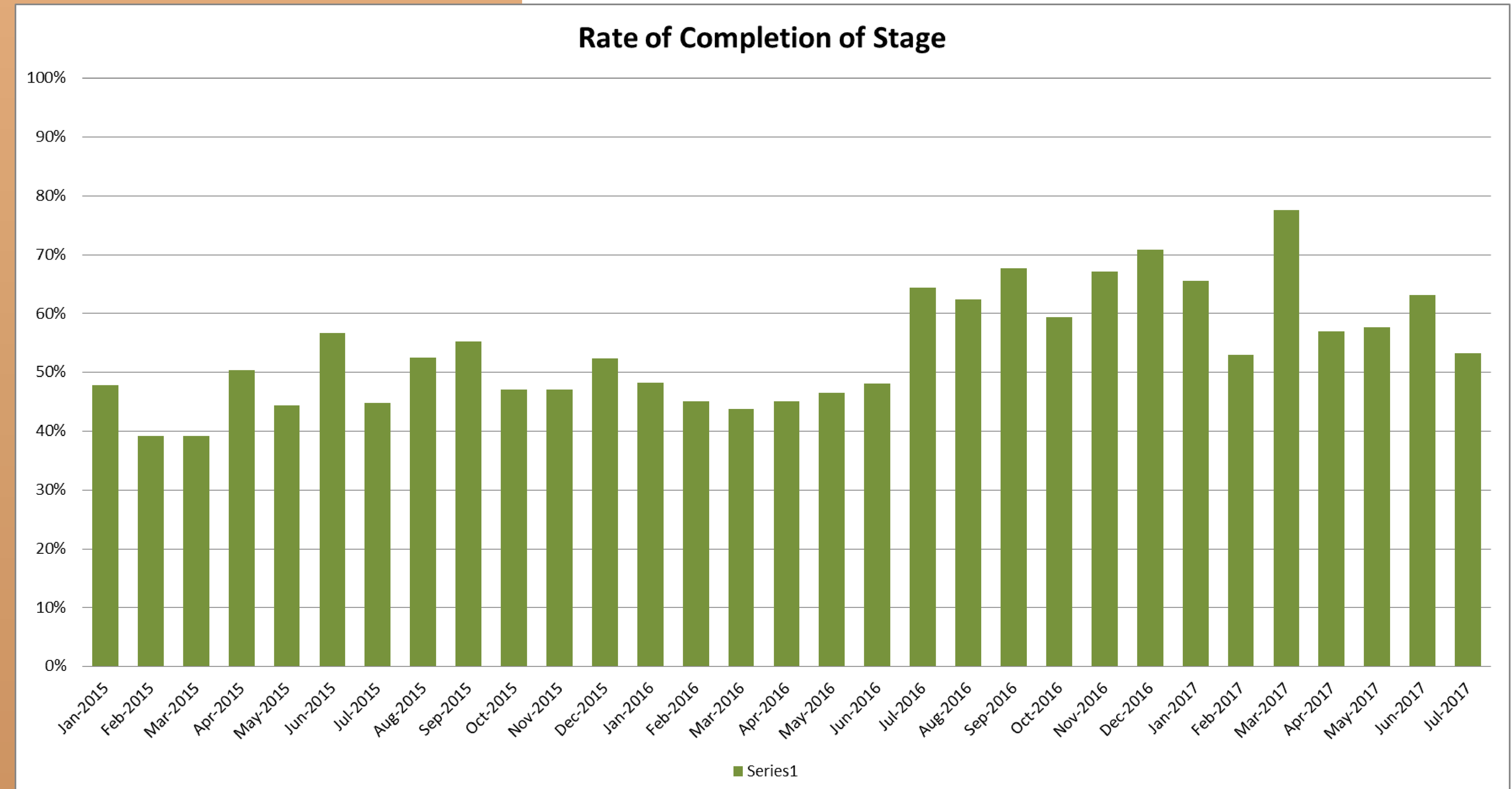
Monthly rate trend for 2014 for Stage



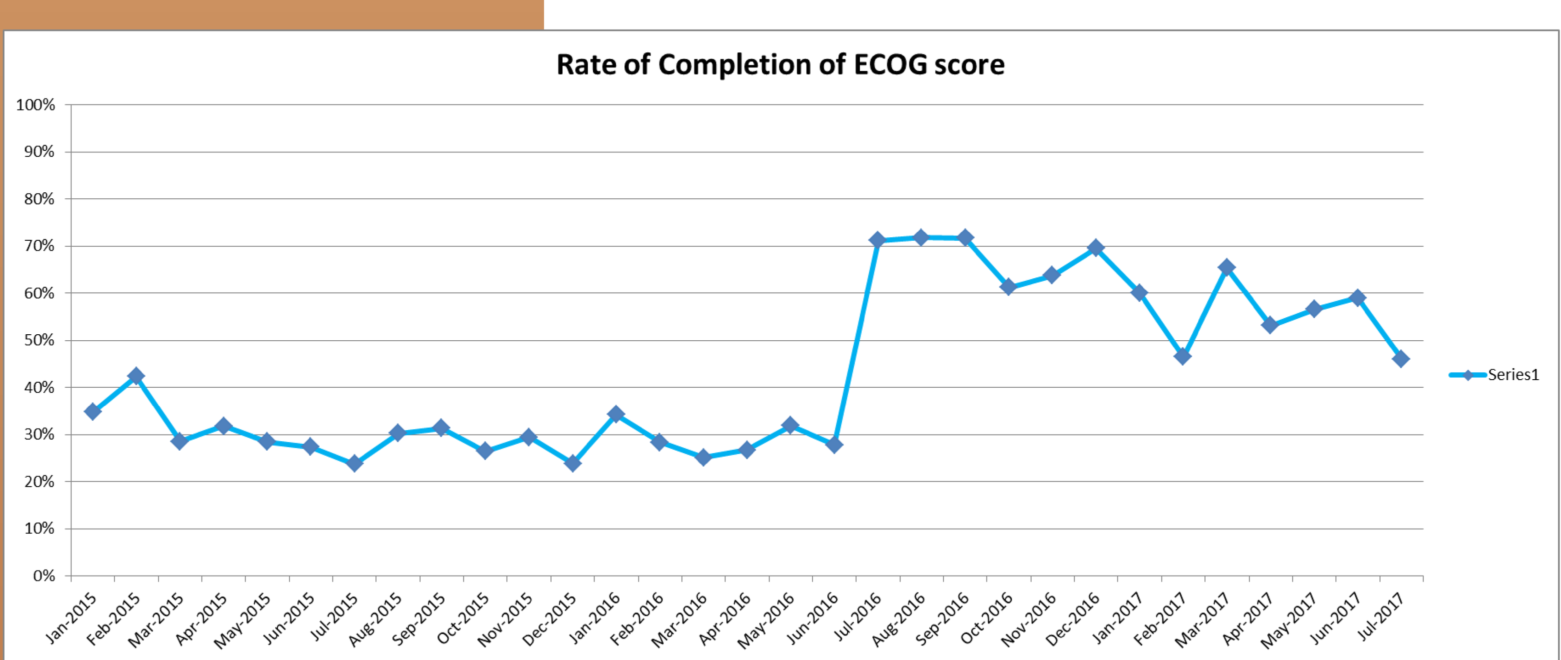
Monthly rate trend for 2014 for ECOG Score



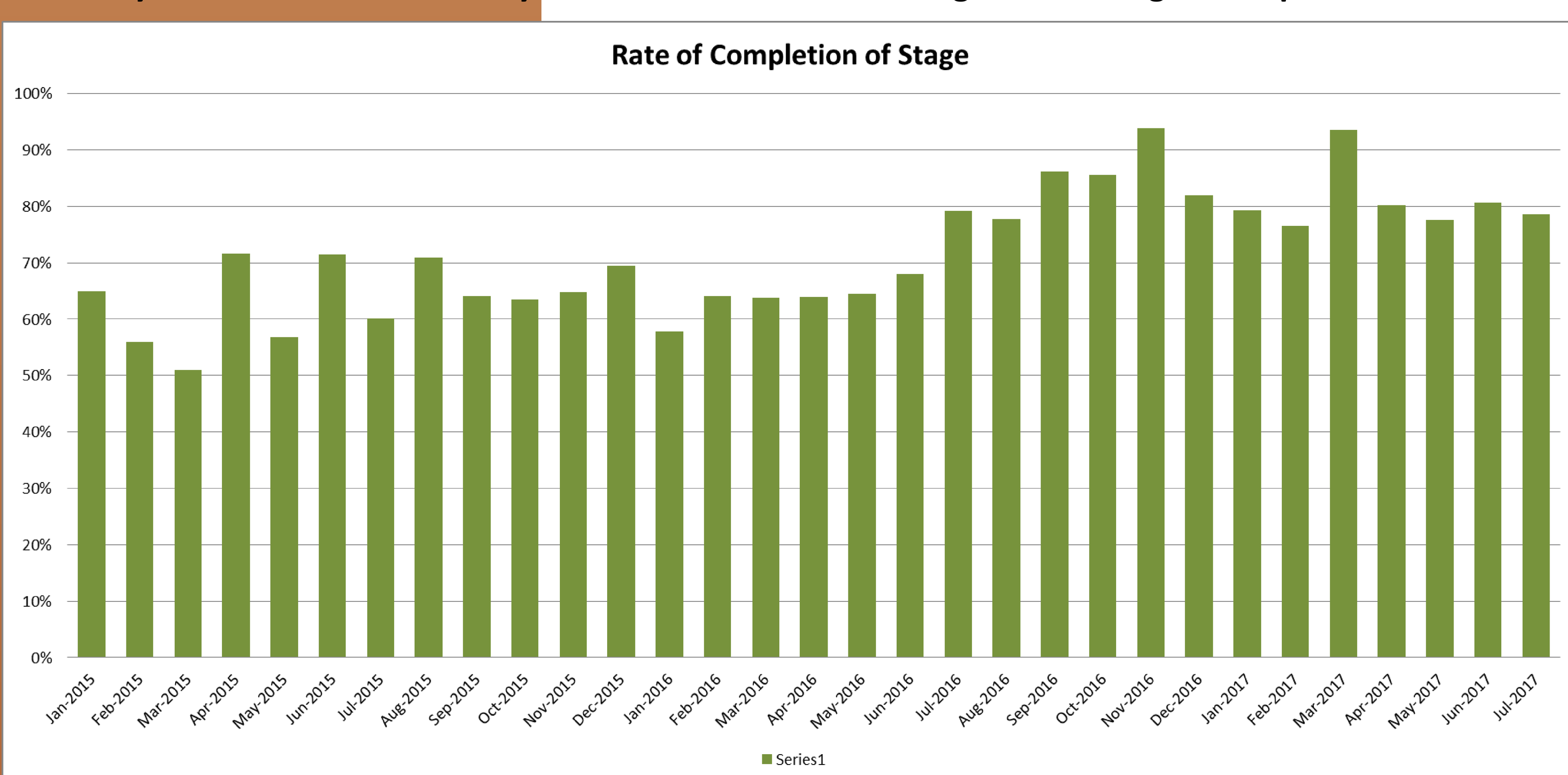
Monthly documentation rate for last years of 2015 till 2017 for Stage



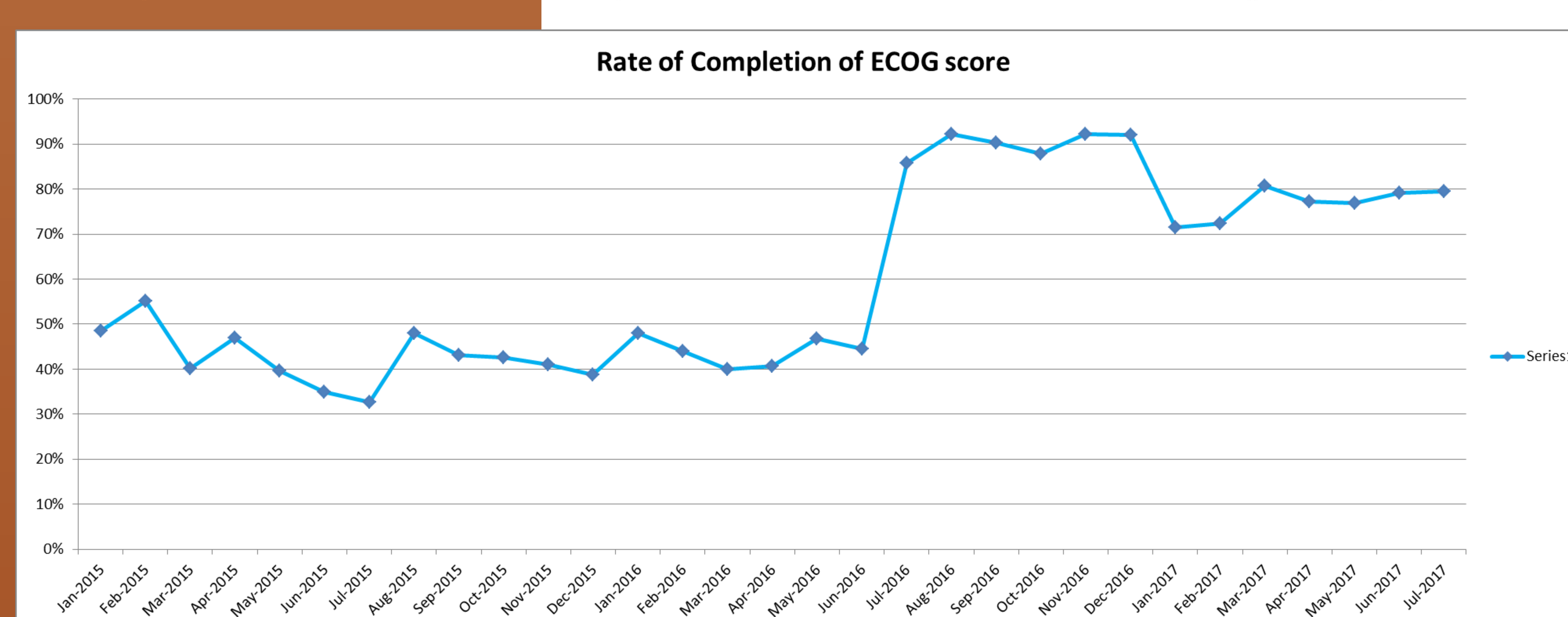
Monthly documentation rate trend for last years of 2015 till 2017 for ECOG score



Monthly documentation rate for years of 2015 till 2017 for Stage for the targeted departments



Monthly documentation rate trend for years of 2015 till 2017 for ECOG for the targeted departments



Conclusion:

The improvements helped increase in integration of care by providing complete and timely clinical information. The information generated could be used for further correspondence between the outpatient, inpatient and primary care. This in turn helped in improved reporting on patient outcomes, future researchers and service planners and in turn fulfilling the objectives of translational research and care.