

#### CHI Learning & Development (CHILD) System

#### **Project Title**

Multi-Disciplinary Meeting (MDM) Note Review for Medical Social Workers (MSWS)

#### **Project Lead and Members**

Project Lead: Mark Kee

Project Members: Koh Li Lian

#### **Organisation(s) Involved**

**Jurong Community Hospital** 

#### Healthcare Family Group(s) Involved in this Project

Allied Health

#### **Applicable Specialty or Discipline**

Medical social healthcare

#### **Aims**

The project team hopes to reduce the overall time spent on documenting MDM notes on a weekly basis from a median of 82 minutes to a median of 15 minutes in ward C3. This is expected to be completed by August 2023. The key findings and learnings will be spread to all JCH MSWs who utilize MDM on a weekly basis.

#### **Background**

See poster appended/below

#### Methods

See poster appended/ below

#### **Results**

See poster appended/ below



#### CHI Learning & Development (CHILD) System

#### **Lessons Learnt**

(1) Innovation and use of existing functionality in NGEMR was vital to improve efficiency. (2) Leveraging empirical data from NGEMR effectively spurs transformative change. (3) Engaging in open feedback and discussion among MDT members proved to be invaluable in shaping the change process quickly.

#### Conclusion

See poster appended/ below

#### **Project Category**

Care & Process Redesign

Value Based Care (Time Saving)

#### **Keywords**

MSWS, MDM, Note, MDT, Documentation Ward C3

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# MULTI-DISCIPLINARY MEETING (MDM) NOTE REVIEW FOR MEDICAL SOCIAL WORKERS (MSWS)

MEMBERS: MARK KEE, KOH LI LIAN

☑ SAFETY☑ QUALITY☑ PATIENTEXPERIENCE

☑ PRODUCTIVITY☑ COST

## Define Problem, Set Aim

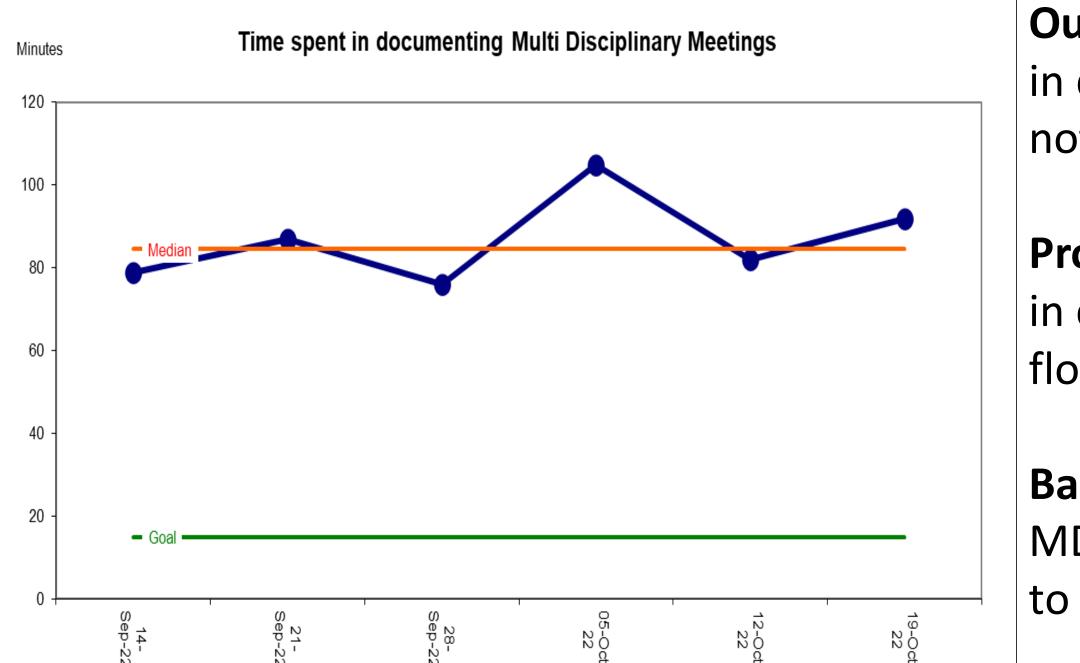
#### **Problem/Opportunity for Improvement**

Every week, JCH Medical Social Workers (MSW) are taking a median time of 82 minutes per week to document MDM notes as a pre-work requirement prior to the weekly MDM meeting. This manual documentation process is susceptible to human errors during updates, consuming precious time that could otherwise be allocated to fulfilling other essential responsibilities. Ensuring the accuracy of this data is crucial to keeping every Multidisciplinary team (MDT) member well-informed about the latest developments in patient care plans. Furthermore, the timely execution of patient care and discharge care plans can be hindered by subpar communication stemming from data inaccuracies, underscoring the urgency to rectify this issue.

Aim

The project team hopes to reduce the overall time spent on documenting MDM notes on a weekly basis from a median of 82 minutes to a median of 15 minutes in ward C3. This is expected to be completed by August 2023. The key findings and learnings will be spread to all JCH MSWs who utilize MDM on a weekly basis.

# Establish Measures



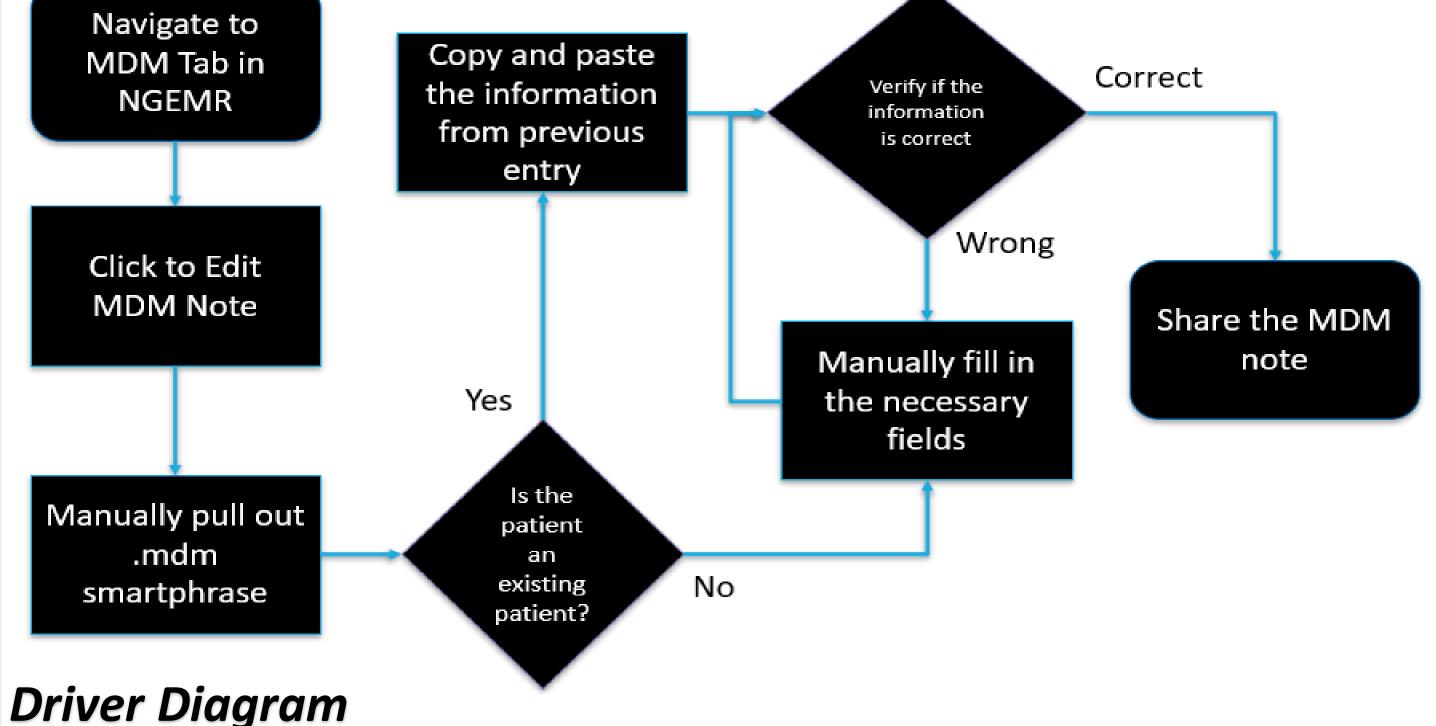
Outcome: Time spent in documenting MDM notes.

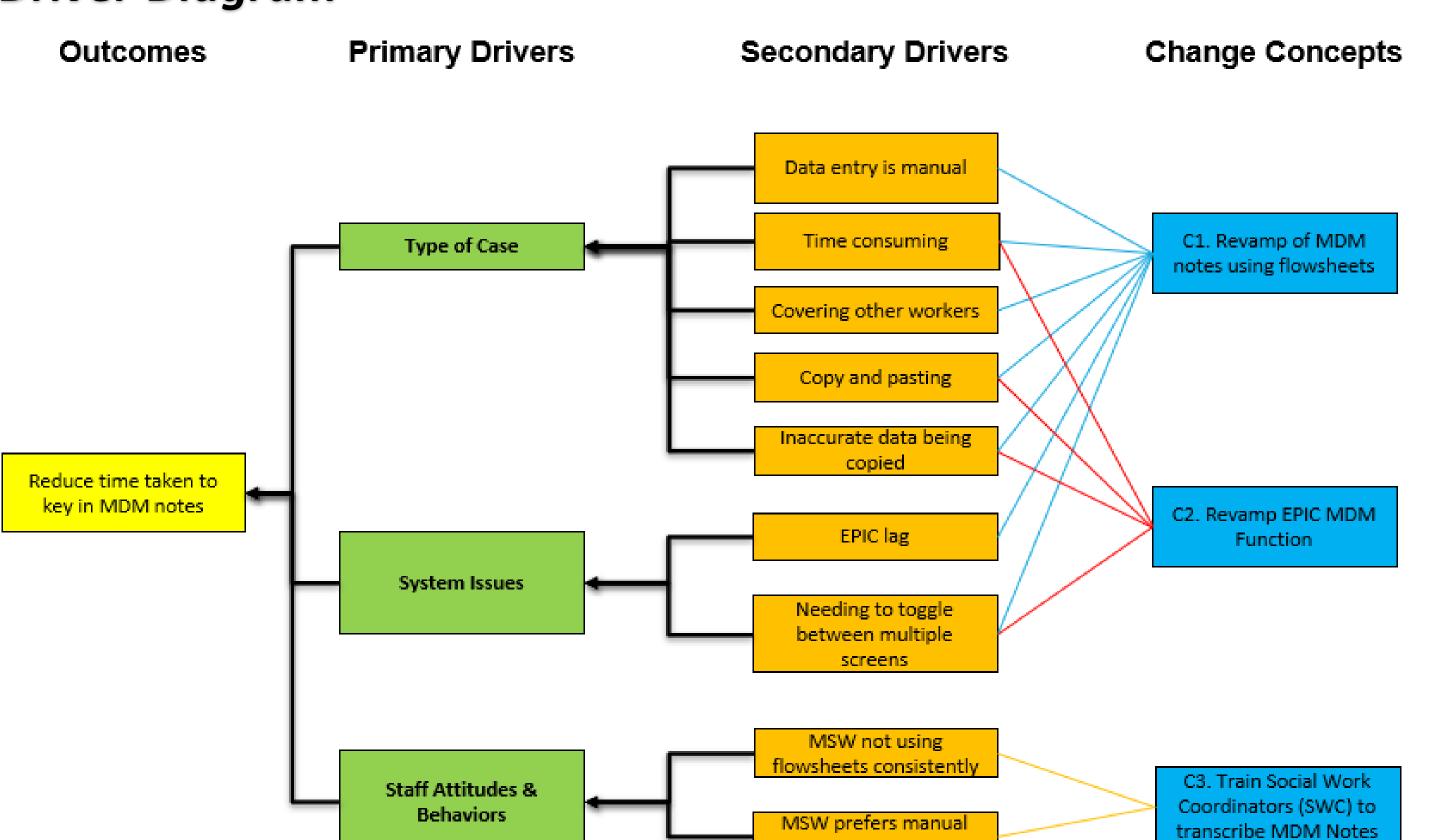
**Process:** Compliance in completion of flowsheet data.

**Balancing:** Clarity of MDM note according to stakeholders.

# **Analyse Problem**

# Process Map before intervention Navigate to





Ng Teng Fong General Hospital

# Jurong Community Hospital

#### Select Changes Root **Potential Solutions C2** Cause **Do First Do Last** Type of Revamp of MDM notes **C3** using flowsheets Cases **Do Next Never Do** Revamp MDM System **Implementation** Functionality in NGEMR Issues C2 Option was not chosen due to the complexity of the change process as it will involve many more stakeholders that are not part of existing project team. C3 Option was not chosen as SWCs are not the main members User Training SWC to of the MDT team and would not be aware of any important

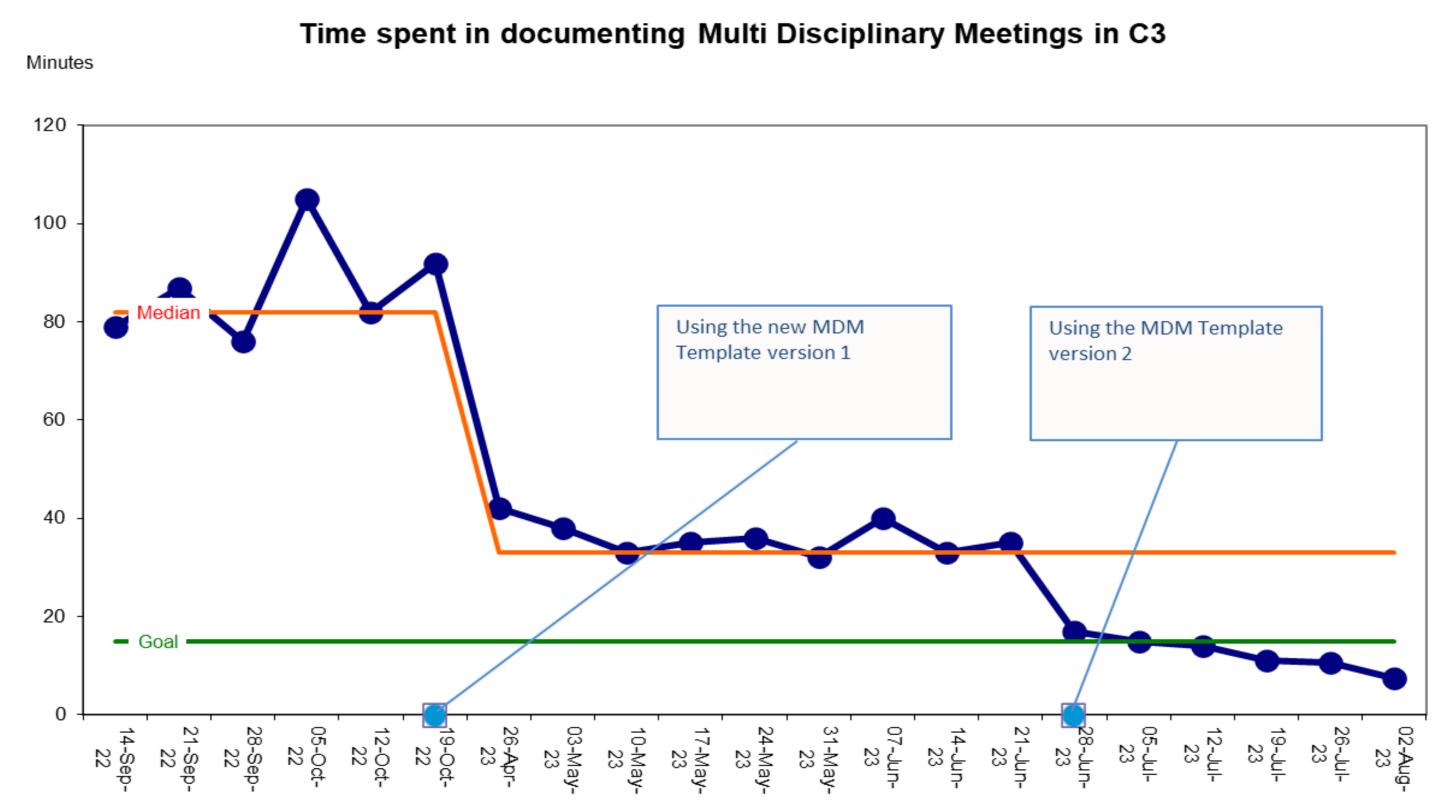
## Test & Implement Changes

changes/ intervention required to deliver patient's care.

transcribe MDM notes

issues

rest & implement changes				
CYCLE	PLAN	DO	STUDY	ACT
1	<ul> <li>Building the MDM template to pull data from MSW flowsheet</li> </ul>	<ul> <li>Amended the MDM template</li> <li>Flowsheet data fields are filled up</li> <li>Piloted the new MDM template in C3</li> </ul>	<ul> <li>There is reduction in time taken.</li> <li>However, MDT team feedback there is significant clutter of information that might not be relevant to the MDM discussion</li> <li>No stakeholders reported any missing flowsheet data</li> </ul>	• To revise the MDM note template
2	<ul> <li>Building the MDM         Template Version 2         with feedback         taken</li> </ul>	<ul> <li>Amended the MDM template</li> <li>Flowsheet data fields are filled up</li> <li>Piloted the new MDM template version 2 in C3</li> </ul>	<ul> <li>There was further reduction in time taken.</li> <li>Nil complaints from MDT team</li> <li>No stakeholders reported any missing flowsheet data</li> </ul>	<ul> <li>To         implement         in all 7 JCH         wards that         uses MDMs</li> </ul>
Time spent in documenting Multi Disciplinary Meetings in C3				



# Spread Changes, Learning Points

#### Strategies to spread change after implementation:

- 1. Having revised MDM note was effective in reducing total time spent on documenting (82 minutes to 12.5 minutes).
- 2. JCH MSWs agreed to adopt this change across all wards and to share with NTFGH MSWs who partake in MDMs as well. The change process will transition ward by ward from August 2023 till the December 2023 until every ward has fully adopted the change.

### Key learnings from this project:

- 1. Innovation and use of existing functionality in NGEMR was vital to improve efficiency.
- Leveraging empirical data from NGEMR effectively spurs transformative change.
- 3. Engaging in open feedback and discussion among MDT members proved to be invaluable in shaping the change process quickly.