



AGENDA ITEM

4.4

DIGITAL & DATA COMMITTEE

Medical Records Assurance Report

Date of meeting	19 December 2022	
FOI Status	Open/Public	
If closed please indicate reason	Not Applicable - Public Report	
Prepared by	Stuart Morris, Director of Digital	
Presented by	Stuart Morris, Director of Digital	
Approving Executive Sponsor	Stuart Morris, Director of Digital	
Report purpose	FOR NOTING	
Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)		
Committee/Group/Individuals	Date	Outcome
N/A		

ACRONYMS

CTMUHB – Cwm Taf Morgannwg University Health Board
GBS - Gateway Bureau Services - commercial scanning partner

1. SITUATION/BACKGROUND

1.1 The purpose of this report is to update the Committee on the progress of the Medical Records progress, with particular focus on the Digital Patient Notes Programmes.

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 2.1 As previously reported to the Committee, there is a backlog of scanning patient records into the Digital Patient Notes - Cito application, for reference by clinicians providing care. As a result, there are clinical safety and financial implications due to the lack of progress in the commercial scanning programme of legacy records (pre-existing paper). There are also clinical safety concerns resulting from a backlog of in-house scanning of day-forward records (additional paper created for patients with digital legacy records).
- 2.2 Legacy scanning is provided by Gateway Bureau Services (GBS) on behalf of Civica, the lead supplier for a 5-year contract to supply the Cito software application from April 2019 to March 2024, and within this period a 2-year programme to scan @314,000 records into the Cito application, by January 2023.
- 2.3 Day forward scanning is done by the CTM Scanning Bureau at Williamstown. The agreed target is for the Medical Records team at the Hub to scan material within 48 working hours of the folders' receipt.
- 2.4 **Legacy record contract progress.** GBS have been unable to progress with scanning at the rate agreed in January 2021, when a revised go-live plan was agreed following a pause due to Covid-19. This is attributed to the fallout of the Covid-19 pandemic, including social distancing affecting staff retention and staff accommodation to perform at the required level of throughput. The result is that they have currently scanned 31% of the expected records, equating to 55.7% of the contracted images at the end of July 2022. The plan was to have scanned 64% of the material by this point. Progress is being closely monitored.
- 2.5 **Day forward scanning backlog.** Due to a combination of factors, including staff-resourcing, extra clinical activity and poor record keeping, the in-house team have struggled to achieve the 48-hour target to prepare and scan day-forward material for digital patients into Cito. Slippage against this target began in late 2021 and has consistently deteriorated.
- 2.6 **Day forward contingency measures.** There is a process to fast-track specific patients if it's known they are expected back soon but this, due to high volumes of activity, is subject to some delays. There is also a process to expedite scanning if a patient returns sooner than expected. All day-

forward material is tracked in the same way as paper notes, so the records can be located, subject to user compliance with tracking procedures.

2.7 As a result of the above – an options appraisal will be presented to the Executive Leadership Group on Monday 12 December 2022.

2.8 During November 2022, a specialist team conducted a peer review of the Medical Records function. A draft report will be provided in December and it is anticipated that the findings of this report will be presented to the next Digital & Data Committee.

3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1 Continued delay in scanning patient records and potential impact on delivery of care

3.2 Potential for project to not deliver its original planned savings plan

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)
	Delay in patient records being provided
Related Health and Care standard(s)	Governance, Leadership and Accountability
Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.	No (Include further detail below)
	Equality Impact Assessment to be completed as part of each project
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.
Resource (Capital/Revenue £/Workforce) implications / Impact	Yes (Include further detail below)
	Extension of contract / Additional Resources
Link to Strategic Goals	Improving Care

5. RECOMMENDATION

5.1 The Committee is asked to **NOTE** the report