Healthcare Improvement Scotland



Document Management Common Sense Audit Instructions

1. Collect a week's worth of all workflow (electronic and paper)

   Tip – this can be done by setting up groups in Docman, so that duplicates of all documents are collected in an account. This will collect results too, which you will then have to exclude. Alternatively, you can create an additional account to be added manually to every appropriate workflow

2. Manually count the number of documents that were filed each day (this can help plan capacity required over the week).

3. Order Docman by document details. This allows you to count the number of documents by type, e.g. A&E, Out Of Hours, Clinical letter, etc.

4. Work through a sample (50-100 documents), applying document management processes (option 1 or 2 below). All these documents will already have been actioned, and have their "real" comment on them. Initially ignore this, but after making your own decision compare to the actual decision:

   Option 1: Use a purely common-sense approach, and your own judgment
   Option 2: Use a protocol from the Toolkit

   Tip – screenshot the list of documents you are sampling, so that you can make a note next to each one of the outcomes

Outcome Options

No Action: Nothing needs done and admin can file.

No Action/Aware: Nothing needs done but admin feels clinician should be aware and forward.

Action: An action needs taken but can be completed by admin then filed.

Action/Aware: An action is taken by admin but still feel the clinician should be aware.

Dr Action: Document needs action by clinician and is forwarded to them. Highlights can be added before sending.

?: No idea what to do with this - indicates discussion/training is required, or protocol amended.

There is also a column to count how many documents that the document management decision did not agree with the actual decision taken. This is in green, because experience from the pilot sites showed that this was often because a more robust decision was taken; e.g. admin would code or follow up when clinician did not.

By entering figures in the yellow cells, the audit will automatically calculate percentages. Advise to interpret this is on the audit template.

Published July 2019



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