

## MoHaWK Round 14: Briefing note for participants

The data entry period for Round 14 is the month of January 2019. If you manually collect data then you will need to collect cases for the majority of the indicators in December. (NB if this is a difficult month for your service – consider using another month as your data set.)

**Don't worry if you cannot enter data for every indicator – please enter what you can.**

Please use the  by each indicator to read more about it.

**Enter all the data for Round 14 in the column indicated.**

### Long Term Absence Case Management

**1. No of Workers absent for > 4 weeks where OH professional has attempted to assess for depression (irrespective of original reason for absence) / Total no of workers absent for > 4 weeks**

Identify how many workers were assessed between 1 – 31st December 2018 who had been absent for >4 weeks. Identify those where the OH professional had attempted to assess for depression (irrespective of the reason for absence).

**NB:** The term 'depression' does not necessarily need to appear in the notes but there should be some reference that the employee's mood / emotional distress has been considered (it could be, for example, that employee is reported as being happy / positive or to reporting having symptoms of low mood). If there is no evidence of depression / mood / mental health state being considered in the assessment then this would be considered that the OH professional has not attempted to assess.

Enter the data in the Round 14 column.

**2. Number of workers who were questioned about specific aspects of depression as part of the assessment / Total no of workers who were assessed for depression**

- a) Loss of interest
- b) Lack of energy / fatigue
- c) Loss of appetite / weight
- d) Sleep disturbance
- e) Depressed mood / sadness
- f) Difficulty concentrating

Identify how many workers were assessed for depression between 1 – 31st December 2018. Identify those where the OH professional had questioned about the specific areas listed.

Enter against each specific area in the Round 14 column.

### **3. Number of workers absent for > 4 weeks with adjustments / Total number of workers absent for > 4 weeks**

Identify how many workers were assessed between 1 – 31st December 2018 who had been absent for >4 weeks. Identify how many of these in their assessment had work adjustments **considered and or recommended** (*it is acknowledged that some workers may not be in a position to have adjustments recommended at that point – but the assessment should demonstrate that the OH practitioner has considered elements of RTW in the assessment – e.g. starting those early RTW discussions*). Enter the data in the Round 14 column.

### **4. Communicating with treating doctor - Number of workers who are assessed by OH who have been absent for > 4 weeks and the occupational health practitioner has liaised with the treating doctor / Total number of workers who have been absent for > 4 weeks**

Identify how many workers have been assessed by your OH unit within the data collection period (1 – 31st December 2018) that have been absent for > 4 weeks. In these cases identify if the OH practitioner **has had some liaison** (*e.g. copy of OH report to GP / treating specialist or gaining a report from them*) with the treating doctor. Enter the data in the Round 14 column

Documentation of liaison with treating doctor could be

- Ask for medical report to assist in the management of a case
- OR
- Copy of manager report to GP / treating physician

## Back Pain

### **1. Number of workers whose initial assessment for back pain have had yellow flags considered by the practitioner as part of the assessment / Total number of workers who have initial assessment for back pain**

Identify how many workers have been assessed by your OH unit between 1<sup>st</sup> – 31st December 2018 with a new case / new referral of back pain. Of these assessments, review how many have had yellow flags considered. Enter data into the Round 14 Column.

## Protection of Infection

### **1. Number of workers having their response to Hepatitis B confirmed / Number of workers completing a first course of hepatitis B immunisation**

Identify how many workers completed a FIRST hepatitis B immunisation course in the date period (1<sup>st</sup> August – 30th September 2018). Identify how many of these have since had their response to immunisation checked (confirmed by hep B surface antibody titre >10 IU/L. Where the antibody titre <10 IU/L but follow up has been instigated to investigate the cause or improve the response please include these in the 'confirmed' group). Enter the data in the Round 14 column.

### **2. Number of healthcare workers that are tested for VZV antibodies if indicated a negative or uncertain history of chickenpox and shingles / Number of healthcare workers who present with a negative or uncertain history of chickenpox and shingles**

Identify how many new healthcare workers between 1<sup>st</sup> October – 30<sup>th</sup> November 2018 were tested for VZV antibodies if they indicated on their immunisation assessment that they had a negative or uncertain history of chickenpox and shingles, against the total number who indicated a negative or uncertain history of chickenpox and shingles. Enter the data in the Round 14 column.

## Blood exposure incident

- 1. Number of high risk needlestick incidents where the worker has received PEP within 60 minutes / Total number of high risk needlestick incidents where PEP was indicated in the same time period**

Identify how many workers who required post-exposure prophylaxis for HIV in the past 6 months ( 1<sup>st</sup> July – 31<sup>st</sup> December 2018 ) received it (or if they declined to take it were at least offered it) within 60 minutes, against the number that have been managed in the past six months (**NB: following several comments from services around ability to complete this indicator please only include those who have been treated by YOUR department. Do NOT include those who have been treated by colleagues on your behalf e.g. A&E, GUM clinic. If you do not administer PEP as a department then you do not need to enter data for this indicator.**) Enter the data in the Round 14 column.

## Experience / Timely Intervention

- 1. Number of new referrals seen within ten days / Total number referred**

Identify how many new management referral workers were assessed between 1 – 31<sup>st</sup> December 2018 (i.e. not reviews arranged by OH). Identify how many of these were offered an appointment to be assessed within ten working days of receipt of the referral. Enter the data in the Round 14 column.

- 2. Number of reports on new referrals issues within two days / Total number referred**

How many of the new referrals (in 1) had their report from OH issued within two working days of the assessment. Enter the data in the Round 14 column.

**Note: Local KPIs may differ.** However, please enter the appointments within ten working days and number of reports issued within two working days (not any other longer period) so that all units can benchmark against the same.

- 3. The number of workers who have given a score of **23 or more** on their experience questionnaire**

Identify how many worker satisfaction questionnaires were returned between 1 – 31<sup>st</sup> December 2018 that received a total score of **23 or more** against the total number of questionnaires returned. Enter the data in the Round 14 column.

**Note:** The score to achieve was deliberately raised for Round 7 as services in the previous few rounds achieved 100% with the lower score....so it was agreed that it was time to raise the bar! Please only use the model satisfaction questionnaire even if the one used locally differs so that results are comparable between units. You will find a copy of the model questionnaire in the KMS. **The total score available is 28.**

- 3a. Average score on the worker experience questionnaire**

Input the average (mean) score of all questionnaires returned between 1 – 31<sup>st</sup> December 2018. Enter the data in the Round 14 column.

- 4. The number of managers who have given a score of **10 or more** on their satisfaction questionnaire**

Identify how many manager satisfaction questionnaires were returned between 1 – 31st December 2018 that received a total score of **10 or more**. Input this number against the total number of manager satisfaction questionnaires returned. Enter the data in the Round 14 column. Again we have raised the bar just slightly on this indicator!

You will find a copy of the model questionnaire in the KMS. **The total score available is 12.**

**Note:** Please only use the model satisfaction questionnaire even if the one used locally differs so that results are comparable between units.

#### **4a. Average score on the manager satisfaction questionnaire**

Input the average (mean) score of all manager satisfaction questionnaires returned between 1 – 31<sup>st</sup> December 2018. Enter the data in the Round 14 column.

#### **5. Worker Experience Telephone assessment - No of experience questionnaires received scoring 20+ / Total number of questionnaires received**

Identify how many Worker Experience telephone assessment questionnaires were returned between 1 – 31<sup>st</sup> December 2018 that received a total score of **20 or more**. Input this number against the total number of manager satisfaction questionnaires returned. Enter the data in the Round 14 column.

#### **5a. The average score of all telephone assessment experience forms returned during the collection period**

Input the average (mean) score of all worker experience telephone assessment questionnaires returned between 1 – 31<sup>st</sup> December 2018. Enter the data in the Round 14 column.

## Health Surveillance

### **3. Number of new workers who are exposed to causes of occupational asthma who were asked about pre-existing occupational asthma / Total number of new workers who are exposed to causes of occupational asthma**

Identify how many workers you have seen for baseline / initial respiratory surveillance between 1<sup>st</sup> – 31<sup>st</sup> December 2018. Of these assessments identify how many were asked about pre-existing occupational asthma. Enter the data into the Round 14 column.

### **4. Number of workers who have a skin assessment that are asked (and documented by the OH practitioner) about their access to soap substitutes and emollients / Total number of workers having a skin assessment**

Identify how many workers have been seen for skin assessments between 1<sup>st</sup> – 31<sup>st</sup> December 2018. Of these assessments, identify how many had documentary evidence that access to soap substitutes and emollients was considered as part of the assessment. Enter the data into the Round 14 column

## Health Promotion

### **1. The OH service supports the employer in delivering a multi-component obesity programme (activity, eating behaviour and weight reduction together)**

This is a structural quality indicator of a service of a service affecting the whole workforce. Whilst occupational health may not be responsible for running these programmes, this indicator measures the occupational health services' leadership on sustaining a healthy workforce.

The requirements of this indicator **do not require numerical data** but indication of involvement and details of relevant activity. Please do place in the text boxes that appear if activity is undertaken so these aspects can be shared with those services who still need to explore this area of work.

## Electronic Record Keeping

Take a sample of records for a one month period from a range of OH activities and range of your OH service professionals. Ensure that the sample number is reasonable % of your services activity so that it can be a representative sample.

- 1. Please indicate total number of records reviewed within this audit**
  
- 2. The number of case records where every word is legible / Total number of records reviewed**

All words must be legible. The reader should not have to guess or make assumptions about words based on the sentence / adjacent words

- 3. Number of records where authorised abbreviations used / Total number of records who used abbreviations**

If abbreviations are used, are these abbreviations defined in your local procedure / organisational policy as acceptable. Please note – if you do not have agreed abbreviations within your local procedures / organisational policy then abbreviations should not be used.

- 4. Does the IT system operate so that any entry is locked at its conclusion or provides a very clear audit trail of any edits (individual who edited / date and time of edit) Yes / No (if Yes do not answer question 5)**
  
- 5. Number of records that have been recorded in a way that they cannot be edited or deleted / Total number of records reviewed**

The accepted quality standard for electronic records is that it must not be possible for users to delete or alter clinical data without the permission of the system manager (usually lead nurse / physician)

- 6. Does the IT system display the workers name at all times on the screen & on each sheet of paper if printed? Yes / No (if yes do not answer question 7)**
  
- 7. Number of records where each screen for this case activity has workers first and last name visible / Total number of records reviewed**

When you go through the various screens relating to the activity/ assessment that was undertaken – can you see the workers name at all times on the screen. If elements of this activity were printed – would the workers name be visible on the paper?

**8. Number of records where each screen for this case activity has workers unique identifying number visible/ Total number of records reviewed**

A unique identifiable number – is a group of numbers, letters or both that is assigned to that worker's record. This may be their OH number / NHS number / NI number. A date of birth on its own is not considered as a unique identifier – name / date of birth and address together are accepted as a unique identifier (but all three items must be present).

**9. Number of records where the date has been recorded / Total number of records reviewed**

All assessments should record the date

**10. Number of records where the time of the OH assessment commenced has been recorded / Total number of records reviewed**

Assessments should record start and finish time

**11. Number of records where the time of the OH assessment concluded has been recorded / Total number of records reviewed**

Assessments should record start and finish time

**12. Does the IT system automatically record the name of the professional making the entry? Yes / No (if Yes do not answer question 13)**

**13. Number of records where the author undertaking the assessment has been recorded / Total number of records reviewed**

In the same way that a practitioner should record their signature in paper records, there should be the ability to record the practitioner undertaking the electronic record. If this is not automatically undertaken by the system a field should be present to record it and the practitioner should complete for each assessment.

**14. Does the IT system automatically record the job title or qualification of the professional making the entry? Yes / No – (if Yes do not answer question 15)**

**15. Number of records where the current job title or qualification of the author undertaking the assessment has been recorded / Total number of records reviewed.**

In the same way that a practitioner should record their job title as part of the signatory in paper records, there should be the ability to record the practitioner undertaking the electronic record. This may be undertaken automatically by the system from the user. If not a field should be present to record it and the practitioner should complete for each assessment