

## Clinical Coding – Opportunity Knocks



**Dr Adrian Hopper – Deputy Medical Director** 

Carolyn Cooper – Head of Clinical Coding

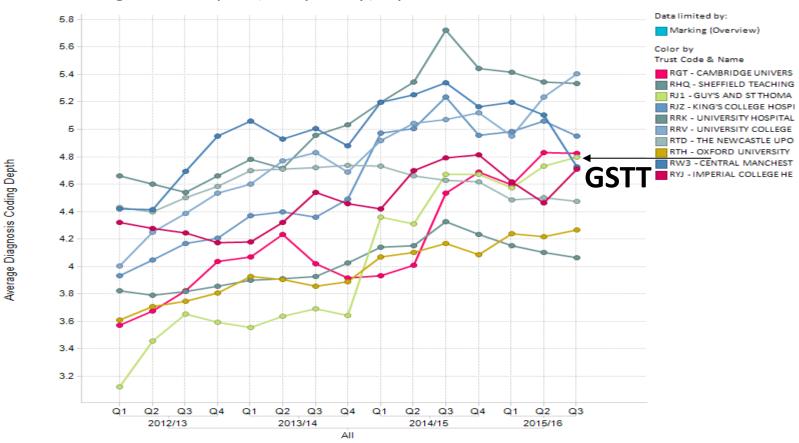
**Dr Caroline Spencer – Project** nurse

#### How have we achieved this improvement

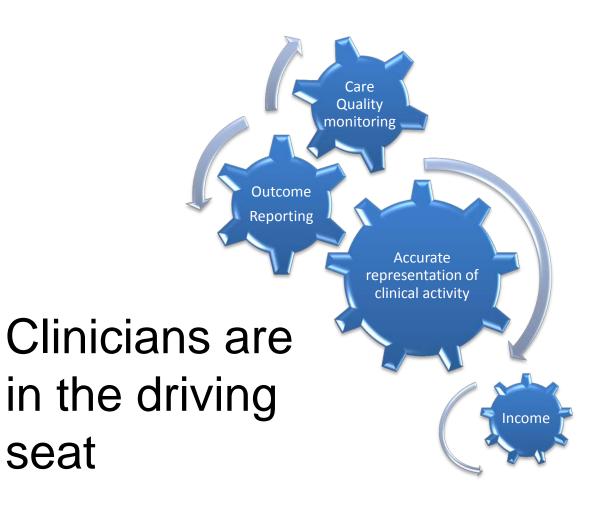
- Clinical involvement.
- Focus on Mortality
- Identification of alternative information sources
  - Use of data bases
- Unlocking information from all staff Groups
  - Nursing staff
  - Allied Health Professionals
- Audit and Validation
- Training
- Restructure of the coding department



#### Diagnostic Depth (complexity) Updated



Period (Fiscal Quarter)



seat



#### The road ahead

Increased focus on coding as a tool for clinical improvement

Clinical investment in coded data

Digital coding – Coding utilising digital sources of information

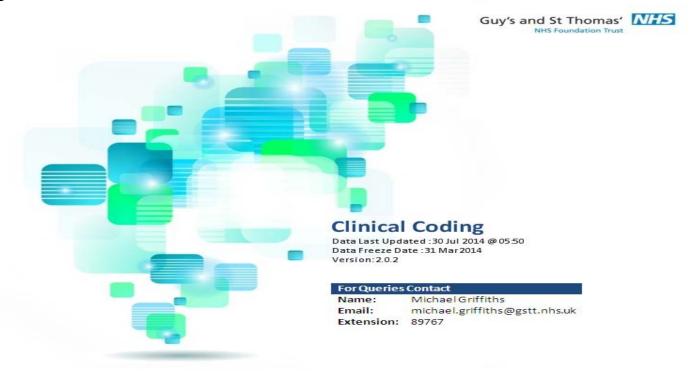
#### Clinical investment in Coded data



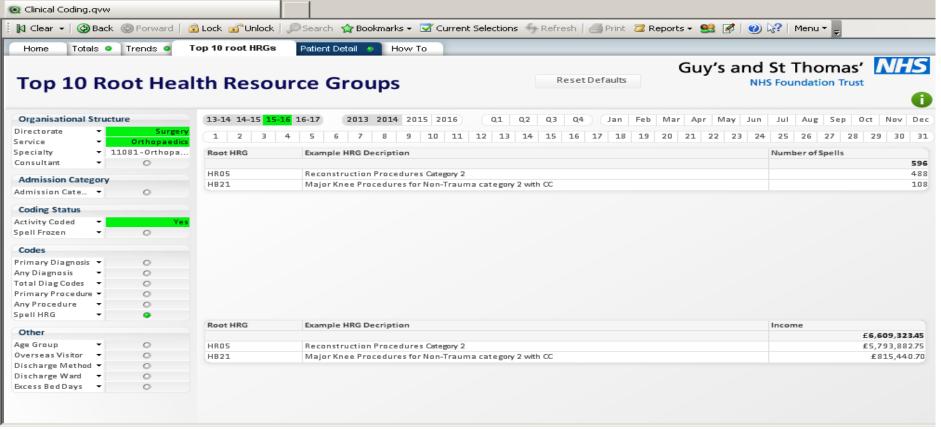
- Ownership of data Qlikview
- Named coding lead in every specialty
- Validation meetings
- Trust and local inductions
- Regular attendance at specialty audit meetings
- Coding champion awards

#### Clinical ownership of Coded data

#### Coding at a click of a button



A snapshot of activity...



#### ...Includes Patient level detail

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# Increased focus on coding as a tool for clinical improvement

Use of the coded database to identify patients:

- Notification of specific groups of patients with upcoming admissions, eg learning disabilities
- High risk patient flags

More reflection and learning from better recording:

- Sepsis
- Adverse incidents

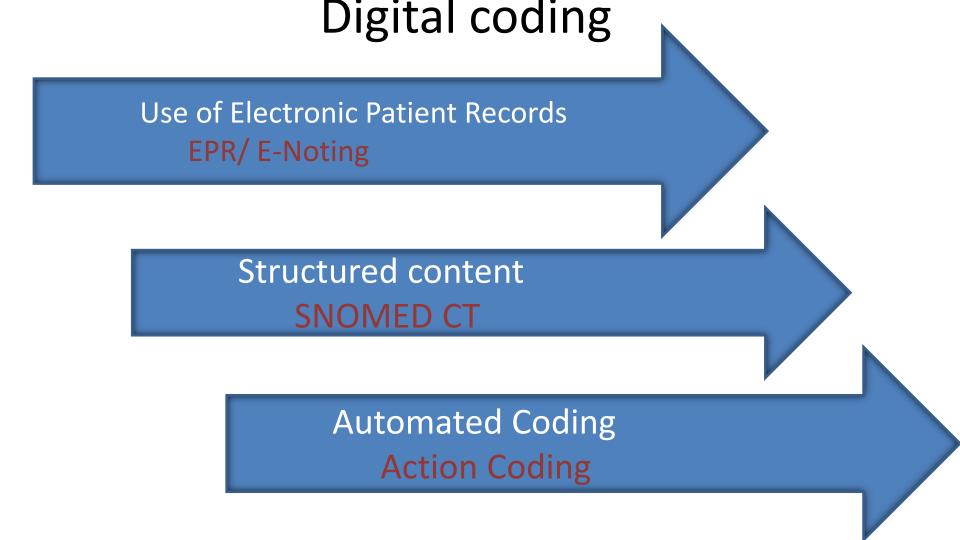


If you do what you always did, you will get what you've always got

#### **Henry Ford**







## Daily decisions recorded on EPR



# A new approach to coding Action Coding Background diagnostic codes based on actions in EPR

- Orders Sepsis bundles
- Diagnosis specific clinics Falls clinic



Alerts

#### Automated coding

• Retrospective



# The Future of Health Documentation?

Systematised Nomenclature of Medicine – Clinical terms

Over 2.5 million terms including:

87 entries returned



rch of "Cow"

Spangled Perched Birds (in case of allergy to this Australian bird)

# **GSTT** terminology listing

- Offers a first phase to SNOMED CT adoption
- Produces a baseline from which a SNOMED CT subset can be created, using ICD-10 cross maps
- Naturally evolves
- Developed in conjunction with clinical teams
- Managed by "Data Managers"

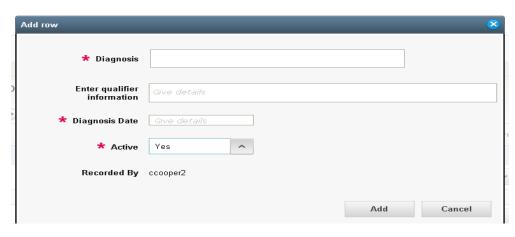
# Sample GSTT terminology list

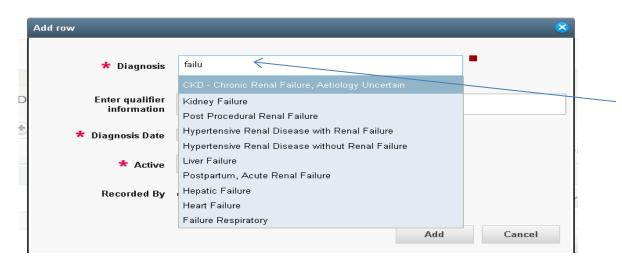
τουος μπετικά (εγρα, οπα)				priagnosis		
10368 Hernia Diaphragmatic (+/- obstruction, gangrene)				Diagnosis		
10369 Hernia Femoral (+/- obstruction, gangrene)		K41.9		Diagnosis		
10370 Hernia Inquinal (+/- obstruction, gangrene)	K40.9					
10371 Hernia Ventral [spigelian] (type, site, +/- obstruction, g	K43.9					
10372 Hernia Incisional (type, site, +/- obstruction, gangrene)	K43.2					
10373 Colitis [diarrhoea] (focal) (type, site)	A09.9	A09.9				
10374 Cirrhosis (type, site)	/\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	K74.6		Diagnosis Diagnosis		
10375 Liver Cirrhosis (type) (cryptogenic)	() contain	K74.6		Diagnosis		
10376 Portal Hypertension	(/ contain	K76.6		Diagnosis		
10377 Biliary Obstruction (type, site, cause)	instructions to	K83.1		Diagnosis		
10378 Haematemesis (cause)	instructions to	K92.0	Crocc mane have	Diagnosis		
10379 Bronchitis (type, cause)		J40X	Cross maps have	Diagnosis		
10380 Cellulitis (site, +/- infection)	fully qualify a			Diagnosis		
10381 Psoriasis (type site)	rully quality a	L40.9	been provided to	Diagnosis		
10382 Decubitus Ulcer [pressure sore] (grade)			been provided to	Diagnosis		
10383 Leg Ulcer (chronic) (+/- infection, gangrene, diabetes)	term	L97X	11 C 11 1 1 1 1	Diagnosis		
10384 Chondrocalcinosis (type, site)	term		all fully specified	Diagnosis		
10385 Scoliosis (type, site)		M41.9	an rany specifica	Diagnosis		
10386 Spinal Stenosis (site)		M48.0	A comment	Diagnosis		
10387 Osteomyelitis (type, site +/-infection)			terms	Diagnosis		
10388 Myocardial Infarction (type, site) [MI] [thrombosis]		121.9		Diagnosis		
10389 Dyspnoea (cause)				Diagnosis		
10390 Pain (type, site)		R52.9		Diagnosis		
10391 Chest pain (type) (site) [troponin negative]		R07.4		Diagnosis		
10392 Abdominal pain (type) (site)	Synonyms/	R10.4		Diagnosis		
10393 Nausea + vomiting (chronic)	Symonymis/	R11X		Diagnosis		
10394 Dysphagia (cause)		R13X		Diagnosis		
10395 Jaundice (cause)	Acronyms in [] can	R17X		Diagnosis		
10396 Jaundice Neonatal (cause)	/ teronymis in [] can	P59.9		Diagnosis		
10397 Ascites (cause)		R18X		Diagnosis		
10398 Ascites malignant	be used as			Diagnosis		
10399 Polyuria (cause)				Diagnosis		
10400 Amnesia (type, cause)	altarrative coerch			Diagnosis		
10401 Pyrexia (cause)	alternative search	R59.0		Diagnosis		
10402 Chronic fatigue syndrome		F48.0		Diagnosis		
10403 Syncope [collapse]	torms	R55X		Diagnosis		
10404 Convulsions [seizure] (type, cause)	terms			Diagnosis		
10405 Weight loss, abnormal (cause)				Diagnosis		
10406 Complications of Procedure (specify)				Diagnosis		
10407 Mitral valve disease (type)		105.9		Diagnosis		
10408 Valve disease, mixed (type)		108.9		Diagnosis		
10409 Tricuspid valve disease (type)		107.9		Diagnosis		
10410 Fibroids (type, site +/- excessive menstruation)		D21.9		Diagnosis		
10411 Endometriosis (site)				Diagnosis		
10412 Pelvic Inflammatory Disease (type)				Diagnosis		
10413 Oedema (site)		R60.9		Diagnosis		
10414 Foot ulcer (+/- infection, gangrene, diabetes)		L97X		Diagnosis		

## Entering a structured diagnosis

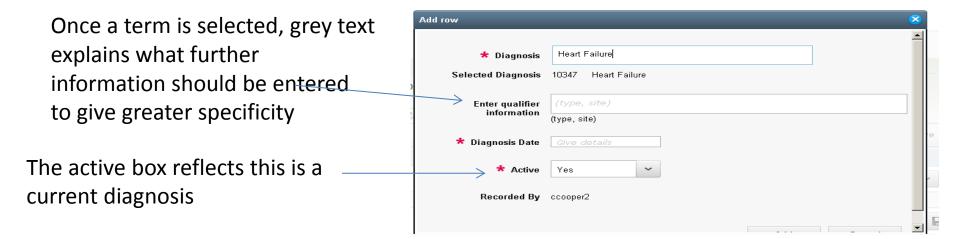


Press add to open new diagnosis entry window





Start to type a term.
Suggested terms will be displayed once 3 characters are entered



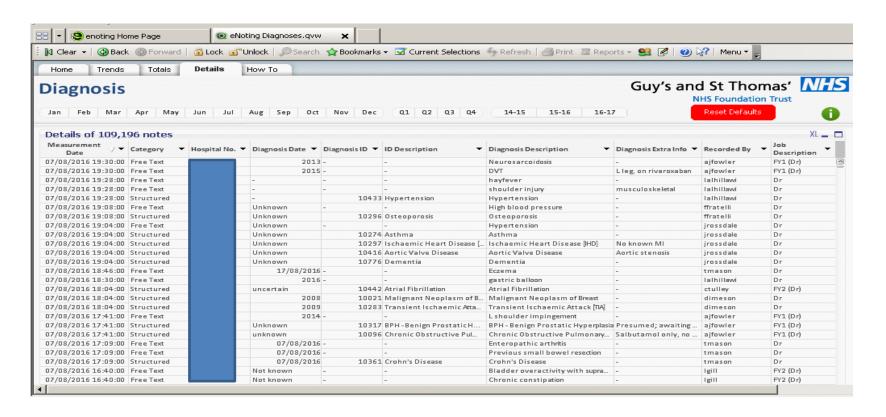
# Alternative entry to Increase data collection

Know conditions and risk factors	
Chronic Obstructive Pulmonary Disease (COPD)	Hypetension
Diabetes Mellitus Type II	Angina Pectoris
Chronic Renal Failure	Development Disorder of Scholastic Skills
History of Myocardial Infarction (MI)	Autism
Epilepsy	Tendency to Fall
Asthma	Rheumatoid Arthritis
Ischaemic Heart Disease	Harmful use of Alcohol
Urinary Retention	Current Smoker
Heart Failure	Anticoagulation - oral
Emphysema	Schizophrenia
Eating Disorder	Depression
Dementia	Self Harm History
Alzheimer's Disease	Presence of cardiac pacemaker
Anxiety	Multiple Sclerosis
Alcohol Dependence	Hearing loss, severe or profound

# **Contextualising Diagnoses**

Main condition	Main condition treated in episode of care	Episode specific		
Other acute condition	Any acute condition receiving treatment, not a primary reason for health encounter	Episode specific		
Chronic long term condition	Ongoing treatment of condition	Patient record		
Historical diagnosis	Historical diagnosis no longer treated	Patient record		

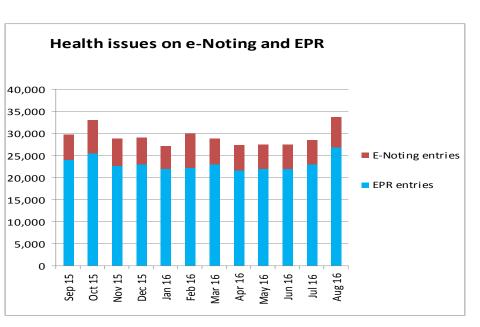
# Qlikview E-noting dashboard

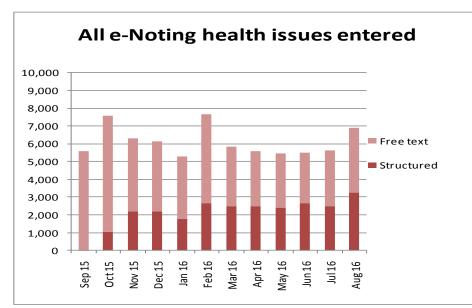


## One stop coding

- Coding from point of entry to coded data
- 100% Auditable
- No need to include additional information in EDLs
- Enhances the diagnostic depth in support of HRG 4+
- Harnesses previously under utilised sources of information eg
   POAC
- Allows for coders to use their knowledge to Enhance codes rather than searching for information

#### What information can we use?





## **Electronic Prescribing**

- Make use of drug prescription reports to reflect treatment of a diagnosis (only for single use drugs)
- Incorporation of the terminology list into the drug indication field



# Harnessing the power of the team



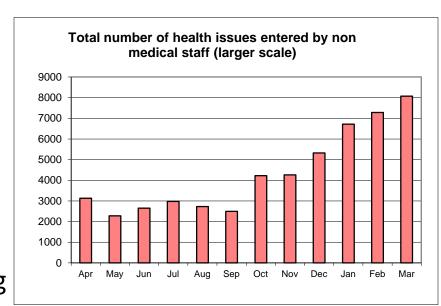
# What I have gained from being part of the clinical coding team

- An understanding of Clinical Coding
- Seeing patient care from a non-clinical perspective
- Transferable skills
- The importance of Clinical Coding for:
  - Patient safety
  - Quality
  - Income generation



#### What I have achieved

- Engagement of all clinical disciplines in the importance of documenting the complexity of our patients
- Capture of interventions carried out in outpatient settings
- Increase in number of health issues
- Increase in depth of clinical coding
- Raised the profile of the clinical coding team



#### How I have achieved

- My clinical knowledge and understanding
- Interface with all clinical staff
- Interface with service managers
- Growing understanding of clinical coding
- Specialty specific examples
- Events
- Awards



# Next steps

#### Quality, safety, exploration, analysis



- Sepsis
- Learning Disability
- Falls
- Medication
- Outpatient clinics
- Order sets

We are all working together for the benefit of our patients and it is of great importance that clinical and non clinical staff understand their role and record effective information to obtain complete and accurate information for individual patients, for wider data collection and future planning.

Caroline Spencer

# **Any Questions**

