Orthopaedic Surgery, clinical coding quality and barriers

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About me

- Consultant Trauma and Orthopaedic Surgeon
- Foundation TPD / Simulation Lead
- National IT Committee BOFAS
- BOA Education sub committee for ST3 (Registrar appointments)

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What do I do?

Appointed Jan 2014

- Orthopaedic Trauma Surgery
- Orthopaedic Foot and Ankle Surgery
- Orthopaedic Clinical Consultations
- Medicolegal Work



How is my activity recorded?

Theatres:

- Bluespier Operation notes / Database
- Handwritten Operation Notes

Clinic:

- Digital dictation
- Recording of intervention on paper sheets



What is recorded?

Clinical notes are written with the following viewpoints:

- Communication of contemporary clinical events with MDT
- Medicolegal record recorded in precise medical terminology
- Expert information to allow another specialist to "pick up the ball and run" in order to continue care



Independent practice

Spire Methley Park Hospital, Leeds. & Nuffield Health Leeds Hospital.

System of capture in PP

- Theatre notes are handwritten
- Contemporary Coding on NRG or BUPA schedule by surgeon!
- Capture of clinic activity by Consultant:
 - ROS, Change or application Casts, Injections
- Regular feedback from business manager / hospital manager

Systems learning

- I collect clinical outcomes scores and assure Quality, this informs appraisal / and CMA required information for good ouutcome
- Spire have organised drop in sessions for 1-to-1 Coder support
- I have invested in my own digital capture / data collection (PPM)
- The latter is coding and revenue focused.
- This sector is lead by accurate coding and this is at case level.

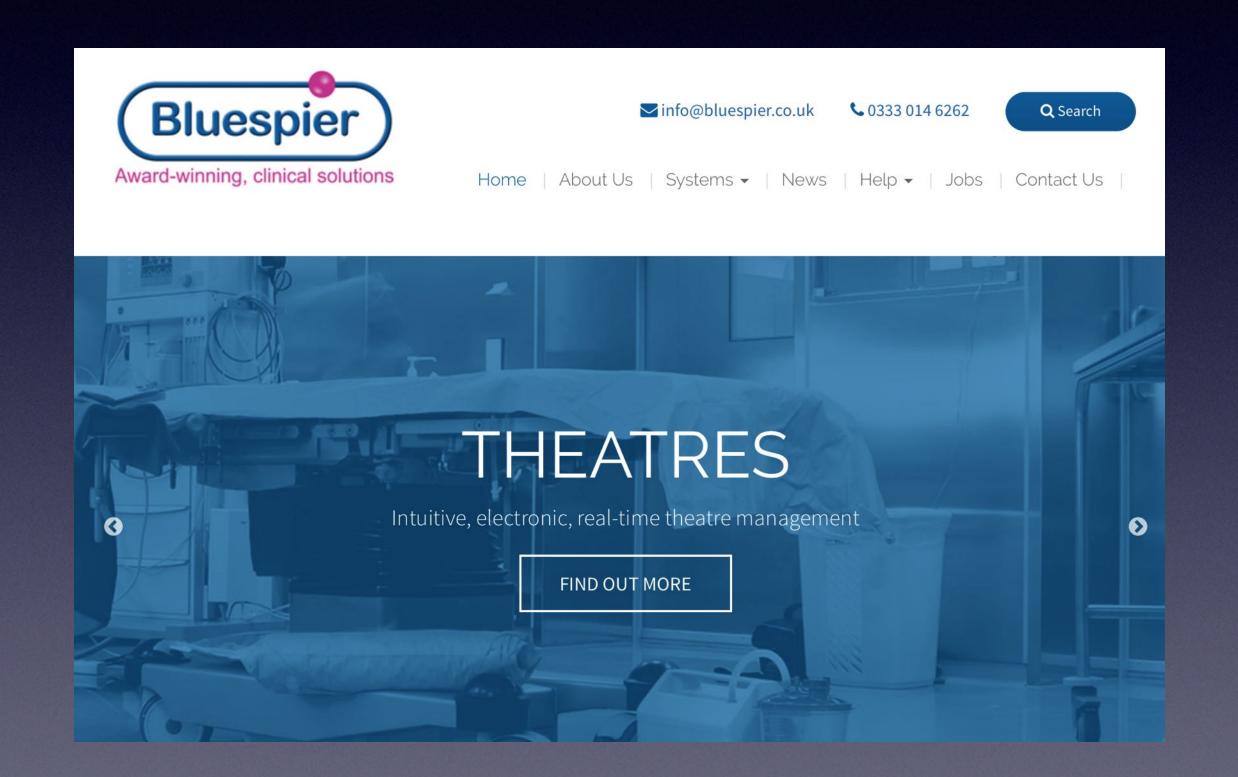


Mid Yorkshire NHS Trust

Dewsbury, Wakefield and Pontefract West Yorkshire

Bluespier

- Acute admissions and events recorded
- Elective and Trauma lists populated
- Operation notes written
- Comorbidities coded at time of procedure in conjunction with Anaesthetic assess
- Used retrospectively in post op care easy accessible electronic reference



Audit of coding 2014

- Work done by junior team with MY coding team, trauma care.
- Inspite of clear, legible electronic notes with comorbidity coding....
- £125k deficit in correct attribution of codes
- Problems:
 - Who takes responsibility?
 - Operative record not always clear to non clinicians...language

NHS Orthopaedic Clinic

- Lost revenue and poor coding for clinic interventions
- Clinician led review and redesign of coding sheets
- Capturing:
 - Side, Area of body, intervention eg cast
 - Outcome of patient clinican recorded
- 50% improvement in revenue.....

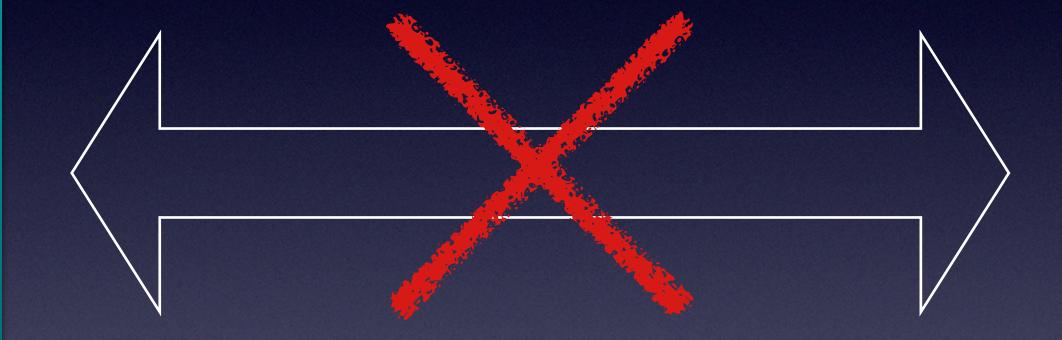


CLINICAL ENTRY:

Medical jargon

Handover of care
Medicolegal protection
Communicate with other
clinicians

Litttle reflection on Finance
Comorbidities
Upscaling of tariff



CODING OUTCOMES:

Interpretation of clinical dataset

HRG, ICD-10, Snomed Poor access to clinical systems

Lack of proximity to clinicians re clinical pathways

SUMMARY

- Clinical coding should form part of clinician training / PDP
- With the value added, clinical coders should:
 - Be invested in in terms of specific training and dept devolution
 - Attached to a clinical department, and see clinical care
 - Meet regularly with clinicians to close feedback loops