Introduction

Mental health issues affect approximately one in 4 people in Scotland any given year. Mental illnesses can range from mild to severe and affect different people at different times in their lives. Mental health issues include depression, stress, anxiety, panic attacks, low self-esteem, problems with alcohol and drugs, self-harm and eating disorders.

A patient’s mental health treatment may start in primary care teams, move into multidisciplinary community mental health teams, touch on crisis teams and even move into elderly care teams.

Previous studies have shown how accurate, current, complete information can facilitate communication between health care professionals and help provide more coordinated, efficient patient care.

Aim

The project aimed to introduce a single electronic patient record for Mental Health, Addictions and Learning Disability teams across NHS Greater Glasgow & Clyde.

Method

Following a 2 year rolling Implementation and Training Plan, the electronic patient record (EMIS Web) was gradually introduced to over 2600 community based Clinical and Admin Staff located within 80 sites across NHS Greater Glasgow & Clyde. The system was rolled out geographically and included all key teams working in that area. For example teams in the North West all went live on the same day. Other teams, like out of hours, were given read only access initially.

Existing patient data was migrated to the new system in phases to help provide continuity in care provision and form the basis of the new electronic record. Although paper case notes still exist, all clinical notes, clinical letters, appointment details and alerts are recorded electronically.

As well as providing localised training on the new electronic system, on site support was provided to help consolidate learning and ease staff transition to the new methods of information recording.

Results

Undoubtedly, the patient’s journey through mental health and addiction services in NHSGG&C has been improved since the introduction of the electronic patient record.

- Staff say they feel better informed and can respond to crisis situations in a much safer way as information is readily available to them.
- Staff have 24 hour access to information. They no longer have to wait for paper case notes to arrive on site.
- Out of Hours staff have access to clinically rich information they never had before. This has resulted in more informed decision making and safer practice.
- Teams who are well integrated with social work colleagues also benefit from the new integrated record.

Conclusion

Rich with clinical information on consultations, assessments and alerts, the benefit of the project to service users has been undeniable.

With Phase 2 of the project now underway, we are now continuing our journey to expand the use of the electronic record and allow further sharing of data to other services within NHS Greater Glasgow & Clyde.

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