

Using the Clinical Decision Support Platform, Dem DX, to Assess the 'Urgent Community Care Team's Notes Regarding Clinical Assessment, Management, and Healthcare Outcomes

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Abstract : Background: Heywood, Middleton & Rochdale Urgent Community Care Team (UCCT)1 is a great example of using a multidisciplinary team to cope with demand. The service reduces unnecessary admissions to hospitals and ensures that patients can leave the hospital quicker by making care more readily available within the community and patient's homes. The team comprises nurses, community practitioners, and allied health professions, including physiotherapy, occupational therapy, pharmacy, and GPs. The main challenge for a team with a range of experiences and skill sets is to maintain consistency of care, which technology can help address. Allied healthcare professionals (HCPs) are often used in expanded roles with duties mainly involving patient consultations and decision making to ease pressure on doctors. The Clinical Reasoning Platform (CRP) Dem Dx is used to support new as well as experienced professionals in the decision making process. By guiding HCPs through diagnosing patients from an expansive directory of differential diagnoses, patients can receive quality care in the community. Actions on the platform are determined using NICE guidelines along with local guidance influencing the assessment and management of a patient. Objective: To compare the clinical assessment, decisions, and actions taken by the UCCT multidisciplinary team in the community and Dem Dx, using retrospective clinical cases. Methodology: Dem Dx was used to analyse 192 anonymised cases provided by the HMR UCCT. The team's performance was compared with Dem Dx regarding the quality of the documentation of the clinical assessment and the next steps on the patient's journey, including the initial management, actions, and any onward referrals made. The cases were audited by two medical doctors. Results: The study found that the actions outlined by the Dem Dx platform were appropriate in almost 87% of cases. When in a direct comparison between DemDX and the actions taken by the clinical team, it was found that the platform was suitable 83% ($p < 0.001$) of the time and could lead to a potential improvement of 66% in the assessment and management of cases. Dem Dx also served to highlight the importance of comprehensive and high quality clinical documentation. The quality of documentation of cases by UCCT can be improved to provide a detailed account of the assessment and management process. By providing step-by-step guidance and documentation at every stage, Dem Dx may ensure that legal accountability has been fulfilled. Conclusion: With the ever expanding workforce in the NHS, technology has become a key component in driving healthcare outcomes. To improve healthcare provision and clinical reasoning, a decision support platform can be integrated into HCPs' clinical practice. Potential assistance with clinical assessments, the most appropriate next step and actions in a patient's care, and improvements in the documentation was highlighted by this retrospective study. A further study has been planned to ascertain the effectiveness of improving outcomes using the clinical reasoning platform within the clinical setting by clinicians.

Keywords : allied health professional, assessment, clinical reasoning, clinical records, clinical decision-making, ocumentation

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