Is it time to tame the MDT beast?

The Trust had a PACS upgrade in December 2015. First Trust in the EMRAD consortium to do so.

A number of concerns were raised as to how the MDTs were running and this was attributed to the new system.

Detailed analysis conducted on four MDTs: Neuro-oncology, Lung Cancer, Urology & Specialist Liver Imaging.

Brief - what was investigated?

How much of the issues experienced can legitimately be pushed back to the new supplier?

How much would have occurred with any transition to a new system regardless of supplier?

How much is due to incomplete data migration and the need to dual run?

How much is due to external Trust systems and MDT processes?

How much is due to image import slowness (IEP) as PACS team are occupied with other work?

32 separate observations were logged into a critique matrix and these broke down into 8 categories:

- Housekeeping
- System performance/stability
- Process
- Training
- Configuration
- Hardware
- Request for change
- Perception

Reasons why MDTs worked well or experience difficulties:

- Housekeeping (35%)
- System performance (25%)
- Process (19%)
- Training (6%)
- Configuration (6%)
- Hardware (3%)
- Requests for change (3%)
- Perception (3%)

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housekeeping</td>
<td>11</td>
<td>35%</td>
</tr>
<tr>
<td>System performance</td>
<td>8</td>
<td>25%</td>
</tr>
<tr>
<td>Process</td>
<td>6</td>
<td>19%</td>
</tr>
<tr>
<td>Training</td>
<td>2</td>
<td>6%</td>
</tr>
<tr>
<td>Configuration</td>
<td>2</td>
<td>6%</td>
</tr>
<tr>
<td>Hardware, RFCs, Perception</td>
<td>3 (1 each)</td>
<td>3% (each)</td>
</tr>
</tbody>
</table>

So what?

- The majority of issues were down to the way MDTs were prepped, coordinated and chaired.
- An independent audit against RCR guidelines for MDTs showed that only 2/15 standards were consistently being met across the East Midlands.
- Many MDTs have 'outgrown' the time and resources allocated for them.
- Any change, particularly an ICT system would upset the delicate balance of an MDT working or not.

For more information please contact Simon Harris:

Simon.Harris@nuh.nhs.uk