Study of The Relationship Between Presentation Time and Comprehensiveness of Information Presented in the Northamptonshire Specialist Perinatal Mental Health Services (SPMHS) Multidisciplinary Team (MDT) Meeting

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BACKGROUND

Unlike other NHS provisions such as oncology or heart failure services, the MDT meetings for mental health services are more locally dependent and the guidance are less well established. MDT meetings in community mental health services were first documented in 1970s, gathering the input from NHS clinicians as well as social workers. (Sayce L) Guidance exists detailing members that should be present in the MDT team, recommending the presence of a consultant psychiatrist to determine an agreed treatment plan for the patients. To allow flexibility in the local team meetings, the guidance was written so that they would not be 'too prescriptive'. (Department of Health)

NORTHAMPTONSHIRE SPMHS MDT MEETING

Northamptonshire SPMHS has weekly MDT meetings on Wednesday to discuss the presentation of new patients, initial managements and appropriateness of referral. We noted that the MDT meeting has taken longer and more time consuming to complete and at times could last until late afternoon.

AIM

We aim to study the relationship between the presentation time and the comprehensiveness of the information provided in the MDT meeting.

METHOD

- In this study, comprehensiveness is defined based on specific components such as the proposed question for the team, gravida status, weeks being pregnant /postpartum, source of referral, known Psychiatric diagnosis, PHQ-9 scores, GAD-7 scores, patients' wishes, proposed plan and risks present.
- A tool is designed using Microsoft Excel comprising of these tools.
- Only new patients to the services is taken into account.
- We timed the presentation of individual MDT members for each patient they presented and noted the information presented, observing whether they comply with specific components required in the tool.
- We then reviewed the notes in SystmOne within 48 hours to check the documentation and the quality of the information recorded.
- The relationship between time and comprehensiveness of information (components covered in presentation) is calculated using linear regression method.

RESULTS

Timing of presentation

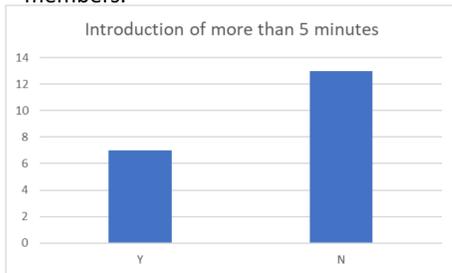On the 5th of October 2022, we recorded 20 new patients presented by 12 MDT SPMHS members.

Figure 1: Frequency of cases presented more or less than 5 minutes.

	Time (minutes)
Average Time Overall (minutes)	00:04:30
Average Time < 5 minutes	00:03:25
Average Time > 5 minutes	00:06:31

Figure 2: Average time recorded for each presentation

Figure 1: 7 (35%) were presented more than 5 minutes while 13 patients (65%) presented less than 5 minutes. The longest presentation time was 10 minutes while the shortest one lasted 1 minute and 43 seconds.
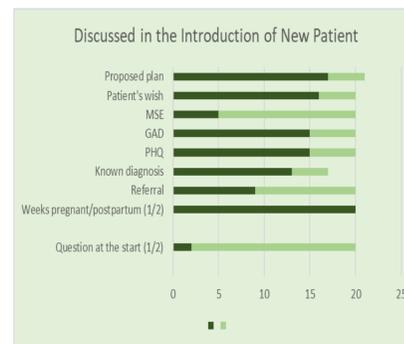
Figure 2: Average presentation time for each MDT members is 4 minutes and 30 seconds.

Components covered in The Presentation

Figure 3: Breakdown of individual components covered in the presentation

Figure 4: Contents of MDT documentation 48 hours post meeting in SystmOne

Figure 3: All of the MDT members were able to include gravida/postpartum status (100%) in their presentation. The least commented component is the main question proposed to the MDT meeting (10%).
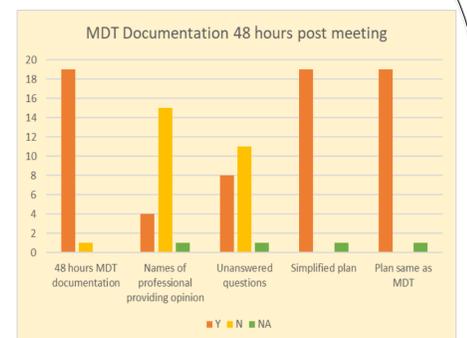
Figure 4: 95% of the case presentation were available in SystmOne 48 hours post MDT meeting. 75% of the documentation did not include the names of professionals providing opinion in the specific case.

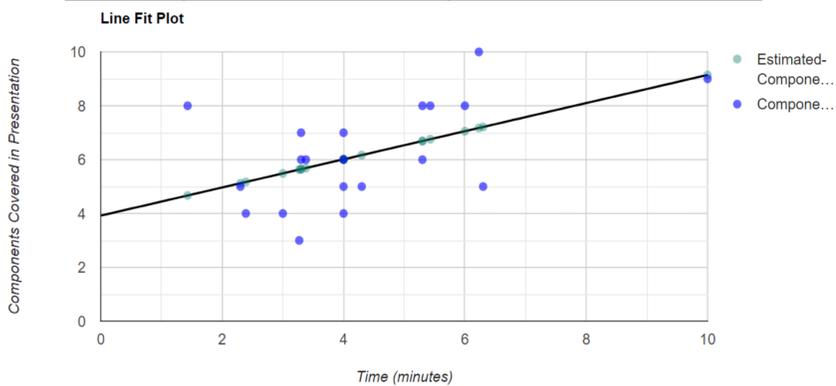### Relationship Between Time and Comprehensiveness of Information

Figure 5 : Line Fit Plot of The Relationship Between Time and Components Covered in The Presentation

Figure 5: R-Squared (R^2) equals **0.2768**. This means that 27.7% of the variability of Components Covered in Presentation is explained by Time (minutes). Correlation (R) equals **0.5261**. This means that there is a **moderate direct relationship** between Time (minutes) and Components Covered in Presentation.
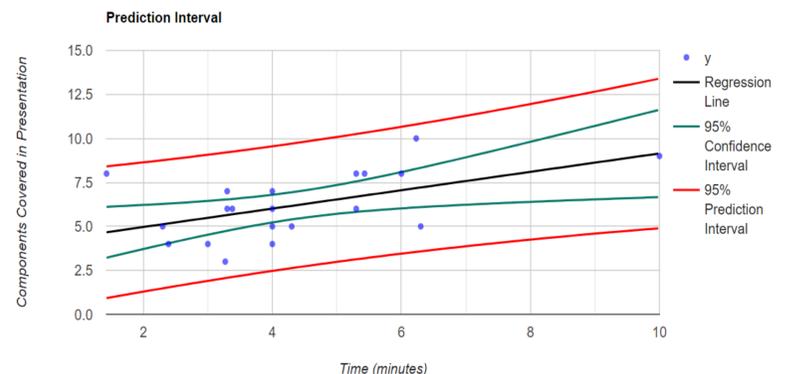
Prediction Interval

Figure 6 : Graph Consisting of 95% Confidence Interval and 95% Prediction Interval

Figure 6: p-value = **0.01718**. P-value < α (0.05).

Conclusions

1. The least commented component is the main question proposed to the MDT meeting (10%).
2. There is a moderate direct relationship between Time (minutes) and Components Covered in Presentation.
3. The longer the presentation of patients, the more key components being covered.
4. It may be difficult to implement a time limit for individual case presentation as it may affect the comprehensiveness of the information presented.