

Improving the Efficiency of Breast Multidisciplinary Team Meetings: A Toolkit for Breast Services

Section 11: MDT Audits

The 2017 CRUK report *Meeting the patient's needs: improving the effectiveness of the multidisciplinary meetings in cancer services*¹ made recommendations regarding MDT audit:

"It is important that MDTs review their own performance and that a culture of continuous improvement is fostered.

Treatment decisions compared to MDTM recommendations should be the focus of annual audits for every MDT.

The MDT needs a mortality and morbidity process to ensure all adverse outcomes come back to the whole MDT rather than just being discussed in surgical or oncological silos. The primary time for this to take place should be a quarterly or biannual operational meeting. Time for quarterly operational meetings should be included in attendees' job plans.

These meetings could include discussion of:

- *Analysis of patients under the care of the MDT that have missed waiting times targets*
- *30-day mortality following active treatment*
- *Uptake into clinical trials"*

There are a number of validated tools available that can assist review of MDTM efficiency and MDT performance (see section 12).

MDTs should have local processes in place to prospectively monitor the accuracy and completeness of data collection for mandatory dataset items (see section 9). This should include regular audits of data quality and presentation of the results to the MDT.

Regular audit and monitoring is going to be essential as streamlining processes are introduced to improve MDTM efficiency. The MDT should undertake a regular audit of patient cases not discussed at the MDTM in relation to the appropriateness of patients receiving a SoC and their outcome.

For a patient to be assigned for no discussion at the MDTM the following conditions must be met:

- They have been seen, or the clinical circumstances otherwise assessed, by a core MDT member consultant or clinical nurse specialist (CNS)
- The minimum core data requirements have been met
- The pathology has been reported by designated persons for that tumour type
- Images have been reported by designated persons for that tumour type. Where imaging is outsourced, the reporting must be carried out by individuals agreed as suitable by the MDT.
- All other tests relevant to the decision-making have been completed

Date	February 2022
Version	2

References:

1. Cancer Research UK. Improving the effectiveness of multidisciplinary team meetings in cancer services. London: Cancer Research UK 2017.