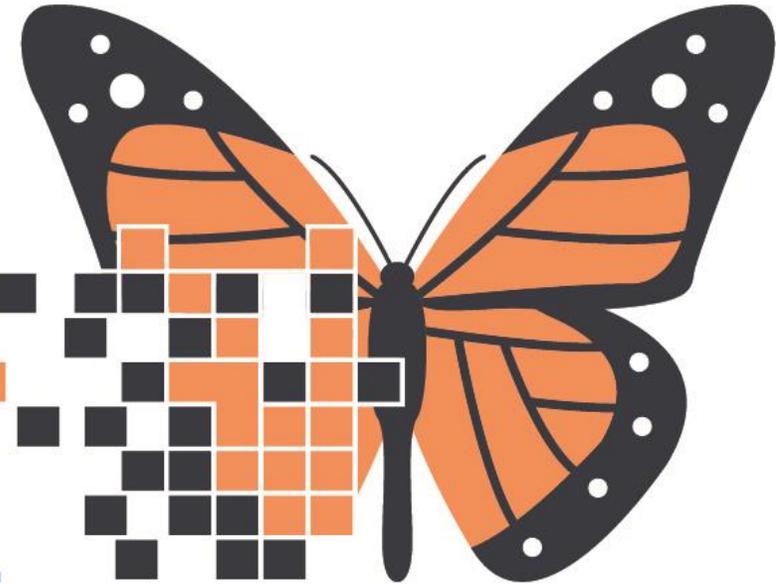


OPERATION

MONARCH

Positive change. Powerful transformation.



Practice Readiness in Prep for Go-Live – Case Management
Christina Carile, WFS (Rehab Therapies) & Curtis Wolek, AA (Rehab Therapies)

niagarahealth



Indigenous Land Acknowledgment

As part of our continued commitment to diversity, equity and inclusion, we would like to share our updated organizational Indigenous Land Acknowledgment that was developed in partnership with local Indigenous partners:



Niagara Health and Hotel Dieu Shaver are honoured to provide care on lands where Indigenous Peoples have lived for thousands of years with their own unique cultures, identities, traditions and languages. These lands are steeped in the rich history of the First Nations, such as the Hatiwendaronk, the Haudenosaunee, the Anishinaabe and the Mississaugas of the Credit First Nation. There are many First Nations, Métis, and Inuit peoples from across Turtle Island who live and work in Niagara today.

We are committed to listening and learning more about the history and current experiences of Indigenous Peoples and acknowledge our responsibility to take meaningful action towards reconciliation in the healthcare system.



Agenda

1. Key Terminology and Verbiage Changes
2. Concepts
3. Case Manager Consult Order, Tasking & PowerForm
4. ALC Order, Tasking, & PowerForm
5. Complex Care & Rehab High Referral Application – Workflow
6. QRT Workflow
7. Additional PowerForms
8. How to Place Orders
9. Domain Demo



Key Terminology & Verbiage Changes

Key Terms in HIS & Definitions

Multi-Patient Task List (MPTL) – used in inpatient settings

- Is a feature in HIS that allows healthcare providers to view and manage tasks related to multiple patients in a consolidated list format; especially beneficial for prioritizing patient care and efficiently managing **TASKS** for multiple patients.

PowerChart Organizer for NHS Test 01, Case Manager

Task Edit View Patient Chart Links Task List Options Help

Multi-Patient Task List CareCompass Ambulatory Organizer Message Center Patient List Clinical Leader Organizer Group Note eCoach Cerner Bridge Clinical Education Service Desk Help HDS ESPAN

Suspend Exit Calculator AdHoc Specimen Collection PM Conversation Communicate Medical Record Request Add Documents Capacity Management

Multi-Patient Task List

St. Catharines Site - Main

Case Management Rehab Interdisciplinary

Task retrieval completed

	Name	Medical Record Number	Location/Room/Bed	Task Status	Scheduled Date and Time	Task Description	Order Details
<input checked="" type="checkbox"/>	*SYSTEMTEST, INIEIGHT 02/Jan/1965	11001623	SC 2BB / SC2B08 / A	InProcess	2024-Jun-25 08:58	Case Management Consult	06/25/24 08:58:00
<input checked="" type="checkbox"/>	*LLTEST, ICEIGHT	<i>*Name Alert</i>					
<input checked="" type="checkbox"/>	*SYSTEMTEST, INIEIGHT	11017458	SC 5AA / SC5A01 / ...	Pending	2024-Nov-02 12:51	Case Management Consult	11/02/24 12:51:00 EDT
<input checked="" type="checkbox"/>	*SYSTEMTEST, MHARAIONE	11001850	SC 1BA / SC1B04 / B	Pending	2024-Nov-02 12:52	Case Management Consult	11/02/24 12:52:00 EDT
<input checked="" type="checkbox"/>	*ZZZTEST, GIM-SCSONE	<i>*Name Alert</i>					
<input checked="" type="checkbox"/>	*ZZZTEST, PAEDSCDUTO	11054339	SC 4BC / SC4B13 / A	Pending	2024-Nov-02 12:52	Case Management Consult	11/02/24 12:52:00 EDT
<input checked="" type="checkbox"/>	ADAMS, TAYLOR	<i>*Name Alert</i>					
<input checked="" type="checkbox"/>	ADTTTEST, NB MALE MON	11053974	SC 2AC / SC2A19 / A	Pending	2024-Nov-02 12:53	Consult to Case Management - ALC Designation	11/02/24 12:53:00 EDT
<input checked="" type="checkbox"/>	APO, GEORGE	<i>*Name Alert</i>					
<input checked="" type="checkbox"/>	APO, NICOLE	<i>*Name Alert</i>					
<input checked="" type="checkbox"/>	BARTESTFIVE, PHYSCHAR	11054264	SC 2BD / SC2B24 / A	Pending	2024-Nov-02 12:53	Consult to Case Management - ALC Designation	11/02/24 12:53:00 EDT
<input checked="" type="checkbox"/>	BARTESTFIVE, REQCHAN	<i>*Name Alert</i>					
<input checked="" type="checkbox"/>	BARTESTTHREE, ICU	<i>*Name Alert</i>					
<input checked="" type="checkbox"/>	BARTESTTHREE, STEPDOV	<i>*Name Alert</i>					
<input checked="" type="checkbox"/>	BRIDGE, TESTPTONE	<i>*Name Alert</i>					
<input checked="" type="checkbox"/>	BRIDGE, TESTPTTHREE	<i>*Name Alert</i>					
<input checked="" type="checkbox"/>	CAKES, JOHNNY	11054109	SC 4AB / SC4A09 / A	Pending	2024-Nov-02 12:53	Consult to Case Management - ALC Designation	11/02/24 12:53:00 ED...
<input checked="" type="checkbox"/>	CBORDTEST, SEVEN	<i>*Name Alert</i>					
<input checked="" type="checkbox"/>	CBORDTEST, SIX	<i>*Name Alert</i>					

TASKS

Tasks and Tasking

- Refers to a specific action or assignment that needs to be completed by a healthcare provider; tasks include assessments and treatment documentation, medication administration, vitals, following up on test results, etc. In Case Management, tasking includes documentation – PowerForm
- Tasks are assigned to patient, **NOT** an end-user
- Task-based System – Case Managers will be using the MPTL to retrieve tasks for a large portion of their documentation

Multi-Patient Task List - Tasking

	Name	Medical Record Number	Location/Room/Bed	Task Status	Scheduled Date and Time	Task Description	Order Details
	*SYSTEMTEST, INIEIGHT 02/Jan/1965 <i>*Name Alert</i>	11001623	SC 2BB / SC2B08 / A	InProcess	2024-Jun-25 08:58	Case Management Consult	06/25/24 08:58:00

Patient Name

MRN

Location/Room/Bed

Task Status (Pending, Overdue, InProcess, Pending Validation, Complete, Discontinued/Canceled)

Scheduled Date and Time

Task Description

Order Details

What is a PowerForm?

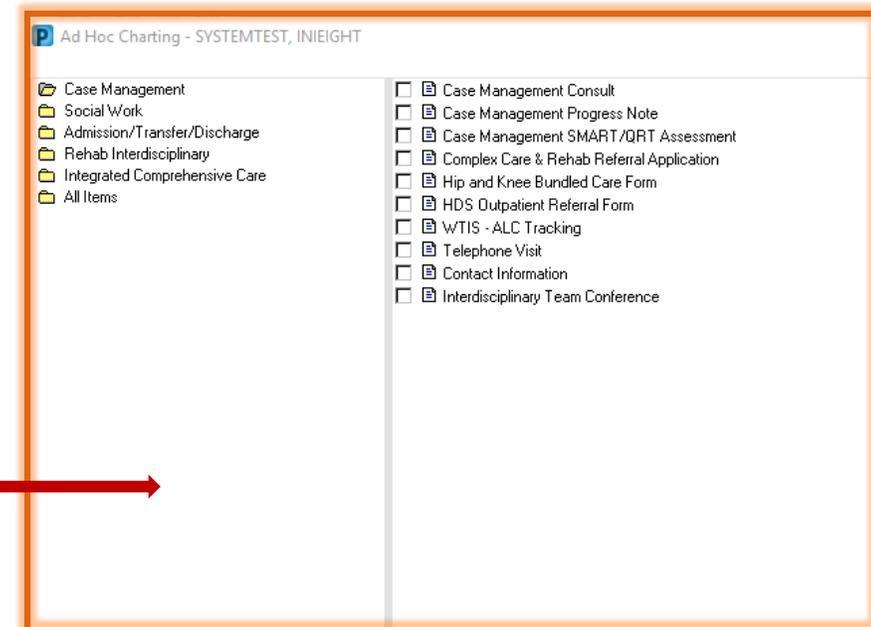
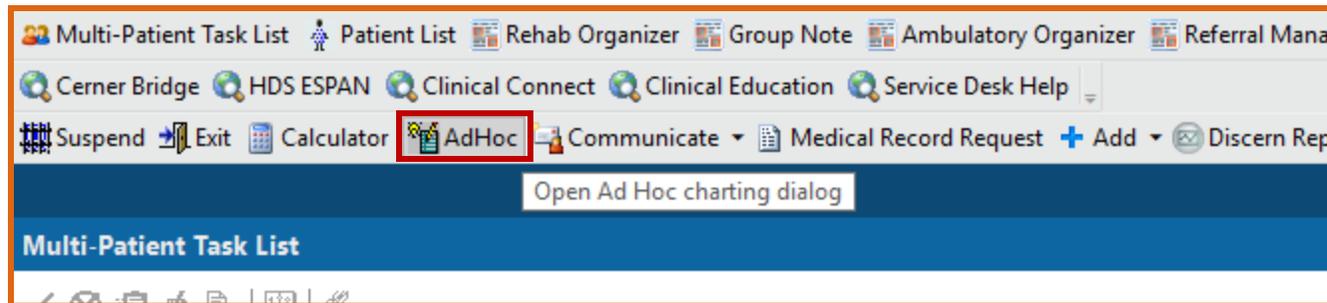
- It is the electronic version of documentation - customized and tailored to Case Management's needs & built to be a more standardized documentation practice across all sites and both Organizations (NH & HDS).
- This is where the Case Managers will capture and document patient data efficiently and accurately

Case Manager's New PowerForms

Case Management Consult
Case Management Progress Note
Case Management SMART/QRT Assessment
Complex Care & Rehab Referral Application
Hip and Knee Bundled Care Form
HDS Outpatient Referral Form
WTIS – ALC Tracking

AdHoc – PowerForm specific

- Refers to the practice of selecting or using a specific PowerForm as needed or on the spot, especially when it has not been assigned as a pre-defined task – this allows end-users to access and utilize relevant PowerForms to document patient data efficiently without prior assignment/tasking
- Case Managers will AdHoc those PowerForms **NOT** tasked
- Any PowerForm can be AdHoc'd from the AdHoc folders, at any time if needed



Ad Hoc Folder

PowerChart

- New comprehensive electronic health record (EHR) – this is where the Patient’s chart lives

The screenshot displays the PowerChart EHR interface for patient ZZREHAB, CHRISTINA. The interface is organized into several key sections:

- Header:** Patient name (ZZREHAB, CHRISTINA), MRN (11000146), DOB (11/Jan/1960), Allergies (Keflex), Age (64 years), and Attending (NHS Test01, Physician - Hospitalist).
- Navigation Menu:** A vertical sidebar on the left lists various clinical functions such as Therapist View, Medication List, and Orders.
- Patient Information:** A central section containing sub-sections for Addresses, Contact Information, Emergency Contact, and Health Plans.
- Care Team:** A section showing the current care team, with a note that no results are found.
- Actions & Situational Awareness:** Two input fields for documenting actions and situational awareness, both currently empty.
- Summary:** A table at the bottom for tracking results, with columns for Result/Form Name, Result, Author, and Date/Time.

Functionalities include, but not limited to: patient charting, medications, order entry, Results Review, decision support, documentation tools, etc.

Verbiage Changes

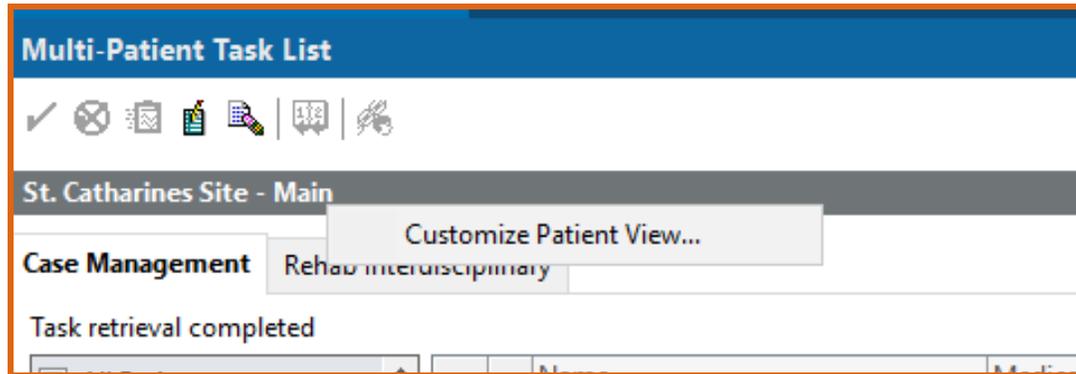
- Within HIS, Case Management & Case Manager are terms used to describe discharge planners (will not see a position entitled *Discharge Planner*)
- **Consult** used in INPATIENT settings - no longer a Referral
- **Referral** is for OUTPATIENT clinic areas only

Key Concepts

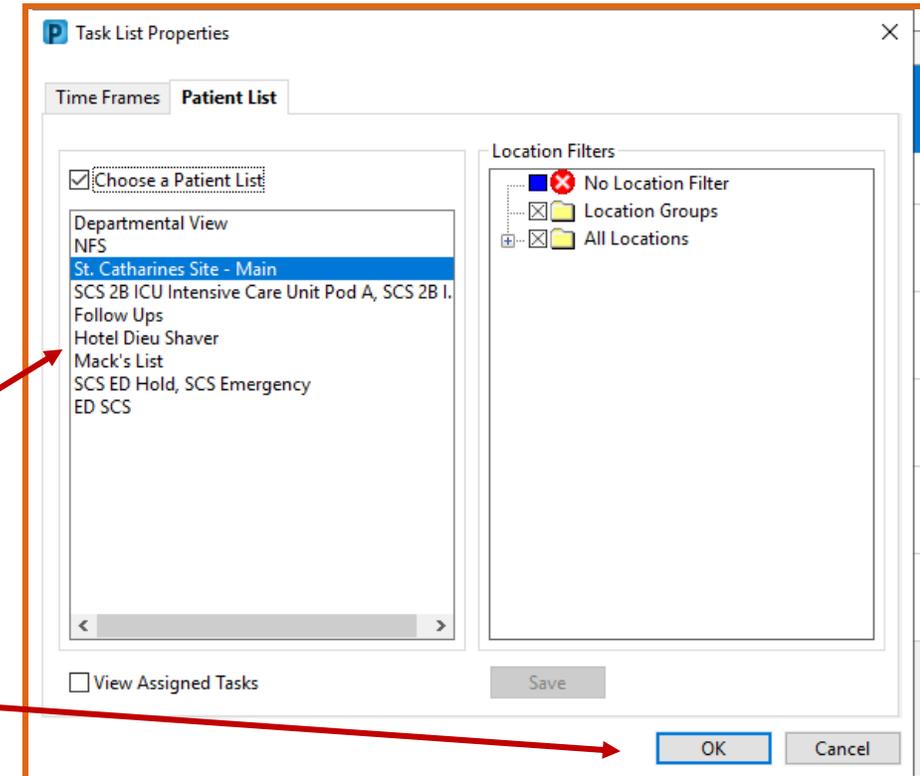


Populating Patients With List Created on the MPTL

- Right click the grey bar on the top left of the MPTL and choose **Customize Patient View...**



- Task List Properties window opens
 - Choose the location you created
 - Click OK



****This will populate all of those patients with tasks on the MPTL according to the patient view you created**

Consult Orders and Tasking

- The prescriber's Consult Order will **TASK** the Case Managers with their PowerForms
 - Consult to Case Management
 - Consult to Case Management for ALC Designation
 - Complex Care and Rehab Referral Application
- The PowerForm tasked is linked to the Consult Order
 - Important to document from the task
 - Multi-Patient Task List – double-click the task to open the PowerForm
- Once the PowerForm is signed and submitted to the patient's chart, the Consult Order status will change to "Completed"
- If the patient/caregiver does not consent or if the patient isn't appropriate, but you plan to return to the patient, it is important to **RESCHEDULE THIS TASK**

Rescheduling a Task

- Tasks remain on the task list for 7 days or 168 hours from the time the Consult Order was placed – after 7 days/168 hours the task will disappear
- If the Case Manager did not receive consent, or if the patient is inappropriate, but you plan to return to the patient at a later time, use the Reschedule This Task feature from the MPTL

ID	Name	MRN	Location	Status	Created	Time	Task	Due
66	*SYSTEMTEST, MHARAIONE 11/Mar/1988 <i>*Name Alert</i>	11001850	SC 1BA / SC1B04 / B	Pending	2024-Nov-02	12:52	Case Management Consult	11/02/24 12:52:00 EDT
66	*ZZZTEST, PAEDSCDUTOINPT 01/Jan/2010 <i>*Name Alert</i>	11054339	SC 4BC / SC4B13 / A	Pending	2024-Nov-02	12:52	Case Management Consult	02/24 12:52:00 EDT
66	*LLTEST, ICEIGHT 20/Sep/2005 <i>*Name Alert</i>	11053974	SC 2AC / SC2A19 / A	Pending	2024-Nov-02	12:53	Consult to Case Management - ALC	02/24 12:53:00 EDT
66	*LLTEST, ICFOURTYEIGHT 03/Oct/1991 <i>*Name Alert</i>	11054264	SC 2BD / SC2B24 / A	Pending	2024-Nov-02	12:53	Consult to Case Management - ALC	02/24 12:53:00 EDT
66	*ZZZTEST, GIM-SCSONE 26/Sep/1949 <i>*Name Alert</i>	11054109	SC 4AB / SC4A09 / A	Pending	2024-Nov-02	12:53	Consult to Case Management - ALC	02/24 12:53:00 ED...

- Chart Done
- Chart Done (Date/Time)...
- Chart Not Done...
- Quick Chart
- Chart Details...
- Unchart...
- Ad Hoc Charting...
- Reschedule This Task...**
- Print >
- Order Info...
- Order Comment...
- Create Admin Note...
- Reference Manual...
- Task Info...
- Patient Snapshot...
- Select All
- Deselect All
- Open Patient Chart >
- Sort By >

- Choose the task to reschedule
- Right-click the task
- Choose Reschedule This Task...

Reschedule the PowerForm for a later date and time
This will reset the task timer

Choose a Rescheduling reason and
click OK

P Reschedule Case Management Consult for SYSTEMTEST, MHARAIONE

Currently scheduled date and time
2024-Nov-02 12:52

Rescheduled date and time
02/Nov/2024 12:52 EDT

Rescheduling reason

- <none>
- <none>
- Administered by Anaesthesia Personnel
- Change in Patient Status
- Discharged prior to nurse assessment
- Documented at Incorrect Time
- Documented on Incorrect Order
- Documented on Incorrect Patient
- Equipment/Supplies Not Available
- Medication Not Available
- Nausea/Vomiting
- Parent/SDM Declined
- Patient Declined**
- Patient LOA
- Patient Sleeping/Sedated
- Prescriber Consultation Required
- Staqqer to Standard Administration Time

OK Cancel

*****This is how we ensure we keep the task on our task list a long as possible and complete the PowerForm from the task list**

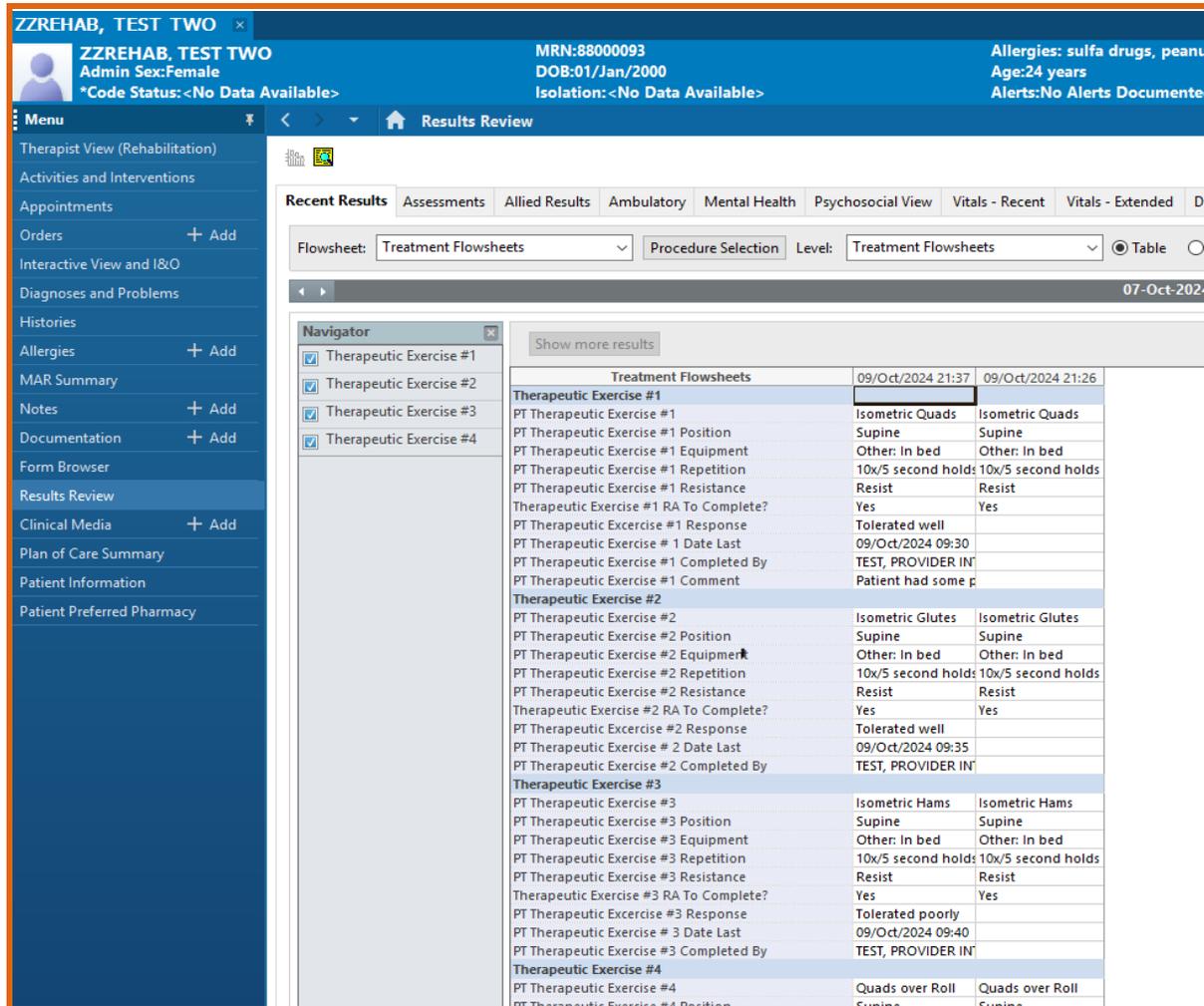
Last Charted Value (LCV) and Smart Templates

- Last Charted Value (LCV)
 - PowerForms are always automatically pulling the most recent data entered
 - If LCV has been built into areas of the PowerForms, when a clinician opens a new PowerForm, those areas are populated with the last recorded values (latest data is always present)
 - If a clinician updates any values or information, these new recent entries will be saved in the patient's chart, keeping all information current and up-to-date
- Smart template
 - Information displays in a read-only format
 - Data pulling through on our documentation from other sources
 - Cannot write-over any of the smart template entries – changes can only be made by the source of that data entry

Results Review – Easy Nursing & Rehab Flowsheet Access

- Found on the patient's chart along the blue Table of Contents Menu
- It's a feature that allows Health Care Providers to view and analyze patient test results, diagnostic data, imaging studies, and other clinical findings in a comprehensive manner.
- Can track trends over time, compare results with previous data
- Allows filtering, sorting, and detailed examination results, facilitating efficient review and interpretation

Result Review – Rehab Flowsheets



The screenshot shows the 'Results Review' tab in an EHR system. The patient information at the top includes: ZZREHAB, TEST TWO; Admin Sex: Female; MRN: 88000093; DOB: 01/Jan/2000; Allergies: sulfa drugs, peanuts; Age: 24 years; Isolation: <No Data Available>; Alerts: No Alerts Documented.

The 'Recent Results' section is active, and the 'Flowsheet' dropdown is set to 'Treatment Flowsheets'. The 'Level' dropdown is also set to 'Treatment Flowsheets'. The 'Table' view is selected.

The 'Navigator' on the left shows a list of 'Therapeutic Exercise' items, with 'Therapeutic Exercise #1', '#2', and '#3' checked. The main display area shows a table of results for these exercises, with columns for 'Treatment Flowsheets', '09/Oct/2024 21:37', and '09/Oct/2024 21:26'.

Treatment Flowsheets	09/Oct/2024 21:37	09/Oct/2024 21:26
Therapeutic Exercise #1		
PT Therapeutic Exercise #1	Isometric Quads	Isometric Quads
PT Therapeutic Exercise #1 Position	Supine	Supine
PT Therapeutic Exercise #1 Equipment	Other: In bed	Other: In bed
PT Therapeutic Exercise #1 Repetition	10x/5 second holds	10x/5 second holds
PT Therapeutic Exercise #1 Resistance	Resist	Resist
Therapeutic Exercise #1 RA To Complete?	Yes	Yes
PT Therapeutic Exercise #1 Response	Tolerated well	
PT Therapeutic Exercise #1 Date Last	09/Oct/2024 09:30	
PT Therapeutic Exercise #1 Completed By	TEST, PROVIDER IN	
PT Therapeutic Exercise #1 Comment	Patient had some p	
Therapeutic Exercise #2		
PT Therapeutic Exercise #2	Isometric Glutes	Isometric Glutes
PT Therapeutic Exercise #2 Position	Supine	Supine
PT Therapeutic Exercise #2 Equipment	Other: In bed	Other: In bed
PT Therapeutic Exercise #2 Repetition	10x/5 second holds	10x/5 second holds
PT Therapeutic Exercise #2 Resistance	Resist	Resist
Therapeutic Exercise #2 RA To Complete?	Yes	Yes
PT Therapeutic Exercise #2 Response	Tolerated well	
PT Therapeutic Exercise #2 Date Last	09/Oct/2024 09:35	
PT Therapeutic Exercise #2 Completed By	TEST, PROVIDER IN	
Therapeutic Exercise #3		
PT Therapeutic Exercise #3	Isometric Hams	Isometric Hams
PT Therapeutic Exercise #3 Position	Supine	Supine
PT Therapeutic Exercise #3 Equipment	Other: In bed	Other: In bed
PT Therapeutic Exercise #3 Repetition	10x/5 second holds	10x/5 second holds
PT Therapeutic Exercise #3 Resistance	Resist	Resist
Therapeutic Exercise #3 RA To Complete?	Yes	Yes
PT Therapeutic Exercise #3 Response	Tolerated poorly	
PT Therapeutic Exercise #3 Date Last	09/Oct/2024 09:40	
PT Therapeutic Exercise #3 Completed By	TEST, PROVIDER IN	
Therapeutic Exercise #4		
PT Therapeutic Exercise #4	Quads over Roll	Quads over Roll
PT Therapeutic Exercise #4 Position	Supine	Supine

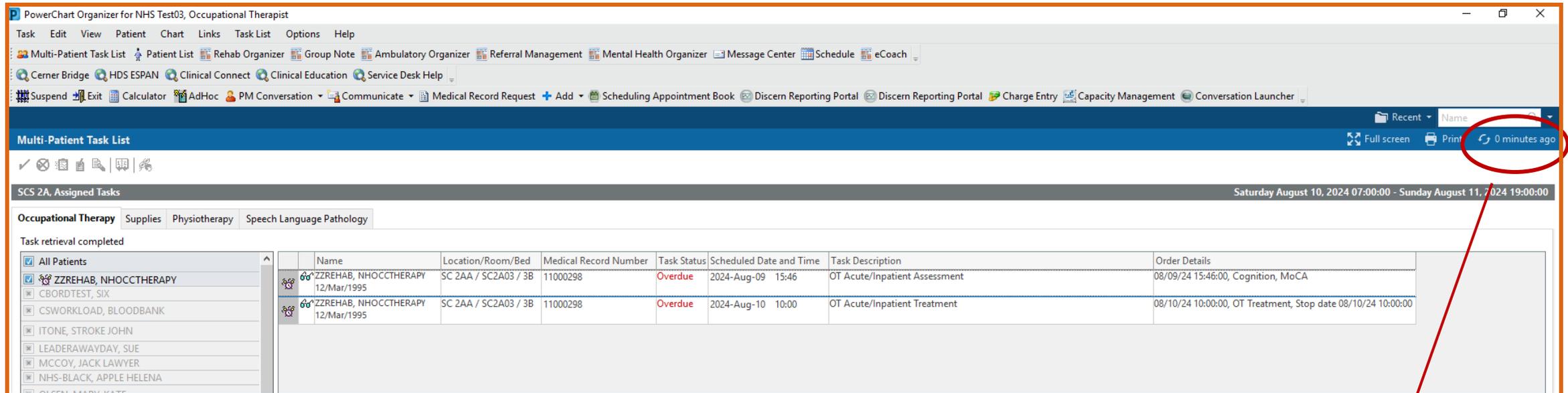
Results Review accessible by clicking on the *Result Review* tab on the Table of Contents.

Filter using the Flowsheets option under Recent Results.

Treatment Flowsheets will show Rehab Flowsheets

REFRESH Your Screen

- Refresh, Refresh, Refresh!!



PowerChart Organizer for NHS Test03, Occupational Therapist

Task Edit View Patient Chart Links Task List Options Help

Multi-Patient Task List Patient List Rehab Organizer Group Note Ambulatory Organizer Referral Management Mental Health Organizer Message Center Schedule eCoach

Center Bridge HDS ESPAN Clinical Connect Clinical Education Service Desk Help

Suspend Exit Calculator AdHoc PM Conversation Communicate Medical Record Request Add Scheduling Appointment Book Discern Reporting Portal Discern Reporting Portal Charge Entry Capacity Management Conversation Launcher

Recent Name

Full screen Print 0 minutes ago

SCS 2A, Assigned Tasks Saturday August 10, 2024 07:00:00 - Sunday August 11, 2024 19:00:00

Occupational Therapy Supplies Physiotherapy Speech Language Pathology

Task retrieval completed

	Name	Location/Room/Bed	Medical Record Number	Task Status	Scheduled Date and Time	Task Description	Order Details
<input checked="" type="checkbox"/>	ZZREHAB, NHOCC THERAPY 12/Mar/1995	SC 2AA / SC2A03 / 3B	11000298	Overdue	2024-Aug-09 15:46	OT Acute/Inpatient Assessment	08/09/24 15:46:00, Cognition, MoCA
<input checked="" type="checkbox"/>	ZZREHAB, NHOCC THERAPY 12/Mar/1995	SC 2AA / SC2A03 / 3B	11000298	Overdue	2024-Aug-10 10:00	OT Acute/Inpatient Treatment	08/10/24 10:00:00, OT Treatment, Stop date 08/10/24 10:00:00

** Refreshing the patient's chart and the MPTL will ensure the most up-to-date information is shown on the screen

0 minutes ago

Case Manager Consult Order, Tasking, and PowerForm

Current State - Referral to Discharge Planner/Case Manager

- In Current State:
 - Prescribers and Case Managers can order discharge planning within Meditech
 - Case Managers review the patient's paper chart and Meditech, to address the referral
 - Document the assessment on paper, and/or in the Interdisciplinary Notes section of the patient's paper chart

Future State - Practice Change – Consult to Case Management

- New verbiage in HIS – internal referrals are now a CONSULT
- New Consult Order created is Consult to Case Management

Add Order

T, SARAH MRN:11000117 Allergies: Acetaminophen Arthritis Pain, Milk T
x:Female DOB:10/Oct/1990 Age:34 years
tus: <No Data Available> Isolation: <No Data Available> Alerts: Violence Risk

Diagnoses & Problems

being Addressed this Visit

Search: consult to case

Consult to Case Management

Consult to Case Management for ALC Designation

Enter to Search

Rotated Display	Code	Clinical Dx	Condition Name
-----------------	------	-------------	----------------

Consult to Case Management

Tasking – Consult to Case Management

- To be aware of this new consult order, Case Managers will look at the Multi-Patient Task List (MPTL)
- This consult order will **TASK** the Case Managers with their new Case Management Consult PowerForm

Multi-Patient Task List Viewpoint

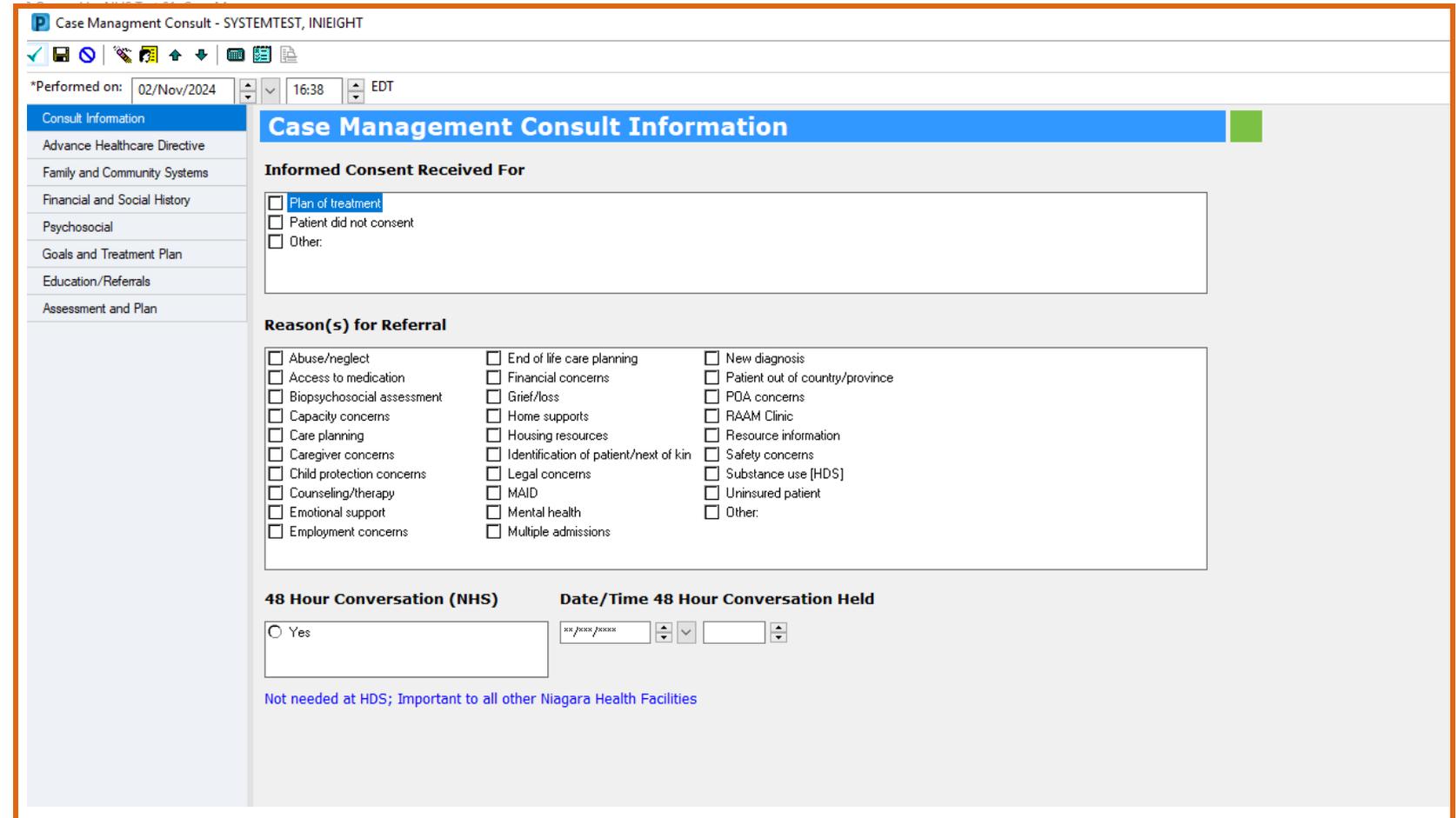
	Name	Medical Record Number	Location/Room/Bed	Task Status	Scheduled Date and Time	Task Description	Order Details
68^	*ZZZTEST, SARAH 10/Oct/1990 <i>*Name Alert</i>	11000117	SC ED / WR	Pending	2024-Oct-29 12:08	Case Management Consult	10/29/24 12:08:0...

****Expectation: Retrieve the task by double-clicking on it.**

- **This opens up the Case Management Consult PowerForm**
- **Complete and SIGN the PowerForm to publish it on the patient's chart**

Case Management Consult PowerForm

- Sections along the left column
- Multi-select choices
- Radio buttons
- Sign, Save, Cancel, Clear, Calculator icons
- No required fields in this PowerForm – only complete necessary info



Case Management Consult - SYSTEMTEST, INIEIGHT

*Performed on: 02/Nov/2024 16:38 EDT

Case Management Consult Information

Informed Consent Received For

Plan of treatment
 Patient did not consent
 Other:

Reason(s) for Referral

Abuse/neglect
 Access to medication
 Biopsychosocial assessment
 Capacity concerns
 Care planning
 Caregiver concerns
 Child protection concerns
 Counseling/therapy
 Emotional support
 Employment concerns

End of life care planning
 Financial concerns
 Grief/loss
 Home supports
 Housing resources
 Identification of patient/next of kin
 Legal concerns
 MAID
 Mental health
 Multiple admissions

New diagnosis
 Patient out of country/province
 PDA concerns
 RAAM Clinic
 Resource information
 Safety concerns
 Substance use [HDS]
 Uninsured patient
 Other:

48 Hour Conversation (NHS) **Date/Time 48 Hour Conversation Held**

Yes

Not needed at HDS; Important to all other Niagara Health Facilities

Case Management Consult - SYSTEMTEST, INIEIGHT

*Performed on: 02/Nov/2024 16:38 EDT

Consult Information
Advance Healthcare Directive
Family and Community Systems
Financial and Social History
Psychosocial
Goals and Treatment Plan
Education/Referrals
Assessment and Plan

Financial History and Social History

Living Situation

<input checked="" type="checkbox"/> Assisted living	<input type="checkbox"/> Home with hospice	<input type="checkbox"/> Psychiatric Unit
<input type="checkbox"/> Extended Care Facility	<input type="checkbox"/> Home with infusion therapy	<input type="checkbox"/> Rehabilitation Unit
<input type="checkbox"/> Group home	<input type="checkbox"/> Home with palliative care	<input type="checkbox"/> Shelter
<input type="checkbox"/> Home independently	<input type="checkbox"/> Home with responsible caregiver	<input type="checkbox"/> Skilled nursing facility
<input type="checkbox"/> Home with day care	<input type="checkbox"/> Home with telehealth	<input type="checkbox"/> Other:
<input checked="" type="checkbox"/> Home with family care	<input type="checkbox"/> Homeless	
<input checked="" type="checkbox"/> Home with home health	<input type="checkbox"/> Law enforcement detention	

Employment Status

Full time Part time Retired Disabled Other:

Last Charted Value icon

Published PowerForm in Patient's Chart

← List

SYSTEMTEST, INIEIGHT ×



Admin Sex: Male
 *Code Status: Full Code - R1

MRN: 11001623
 DOB: 02/Jan/1965
 Isolation: <No Data Available>

Allergies: Sulphites
 Age: 59 years
 Alerts: No Alerts Documented

Attending: NHS Test 01, Physician - Hospitalist
 Dose Wt: <No Data Available>
 Inpatient FIN: 22-001771 [Admit Dt: 2024-Jun-25 10:10:00 Disch Dt: <No - Discha

Loc: SC 2BB; SC2B08;
 HCN: ON 4512-154-54

Menu

Documentation

Case Manager View

Allied and Mental Health Summary

MAR

MAR Summary

Medication List + Add

Activities and Interventions

Interactive View and I&O

Documentation

Orders + Add

Notes + Add

+ Add Sign Forward Modify In Error Preview

List

Display: Only... Contributor NHS Test 01, Case Man... Advanced Filters

Arranged By: Date	Newest At Top
Case Management Progress Note - T...	2024-Aug-02 09:53:00
Case Management Progress Note	NHS Test 01, Case Manager
WTIS - ALC Tracking - text	2024-Jul-17 08:49:00
WTIS - ALC Tracking	NHS Test 01, Case Manager
Case Management Consult - Text	2024-Jun-25 10:43:00
Case Management Consult	NHS Test 01, Case Manager

Case Management Consult Entered On: 2024-Jun-25 10:44 EDT
 Performed On: 2024-Jun-25 10:43 EDT by NHS Test 02, Case Manager

Consult Information
CM Informed Consent: Plan of treatment
 NHS Test 02, Case Manager - 2024-Jun-25 10:43 EDT

Reason(s) for Referral: Counseling/therapy, Home supports, Housing resources
 NHS Test 02, Case Manager - 2024-Jun-25 11:01 EDT

Advance Healthcare Directive
Substitute Decision Maker: Spouse or partner
 NHS Test 02, Case Manager - 2024-Jun-25 11:01 EDT

Does the Patient have an Advance Directive?: No
Code Status Addressed: No
Patient/SDM Wishes to Receive further Information on Advance Care Planning: No
 NHS Test 02, Case Manager - 2024-Jun-25 10:43 EDT

Family and Community Systems
Family and Informal Relationships: test/smart
 NHS Test 02, Case Manager - 2024-Jun-25 10:43 EDT

Financial and Social History
Living Situation: Assisted living, Home with family care, Home with home health
 NHS Test 02, Case Manager - 2024-Jun-25 11:01 EDT

Employment Status: Retired
Current Income Source: Long term disability insurance

Tasking Attached to the Consult Order

- In the patient’s chart in the Orders section, it shows an “Ordered” status

Interprofessional Consults				
Active				
<input checked="" type="checkbox"/>		Consult to Case Mana.. Ordered	10/29/24 12:08:00 EDT	NHS Test01, Physicia... 2024-Oct-29 12:08 2024-Oct-29 12:08

- Once the Case Manager retrieves the PowerForm from the MPTL, completes it and SIGNs, the order status will change to “Completed”

Inactive				
<input type="checkbox"/>		Consult to Case Mana.. Completed	06/25/24 10:42:00, TEST/SMART	NHS Test01, Physicia... 2024-Jun-25 10:42

***This informs the Prescriber and the care team that the patient’s assessment was addressed by the Case Manager and the assessment is complete

ALC Order, Tasking, & PowerForm

Current State

- Case Managers are ordering ALC designation, and completing the necessary documentation in Meditech
- Faxing the ALC referral to place patient into an ALC bed
- Case Managers may cancel an ALC order placed by a prescriber, in Meditech

Future State – Practice Change – ALC Designation Order

- Prescribers will be placing the Consult to Case Management for ALC Designation Order

Consult to Case Management for ALC Designation

The screenshot shows a software interface for creating an order. The title bar reads "Details for Consult to Case Management for ALC Designation". Below the title, there are two tabs: "Details" (selected) and "Order Comments". Under the "Details" tab, there are several icons: a plus sign, a speech bubble, a bar chart, and a dropdown arrow. The main content area contains a form with the following fields: "*Requested Start Date/Time:" with a date input field containing "29/Oct/2024", a time input field containing "1208", and a time zone dropdown menu set to "EDT". To the right of these fields is a "Special Instructions:" label followed by an empty text box. At the bottom of the form, there are two buttons: "Sign" and "Cancel". On the left side of the bottom bar, there are two status indicators: "0 Missing Required Details" and "Orders For Cosignature".

ALC Order Tasking and PowerForm

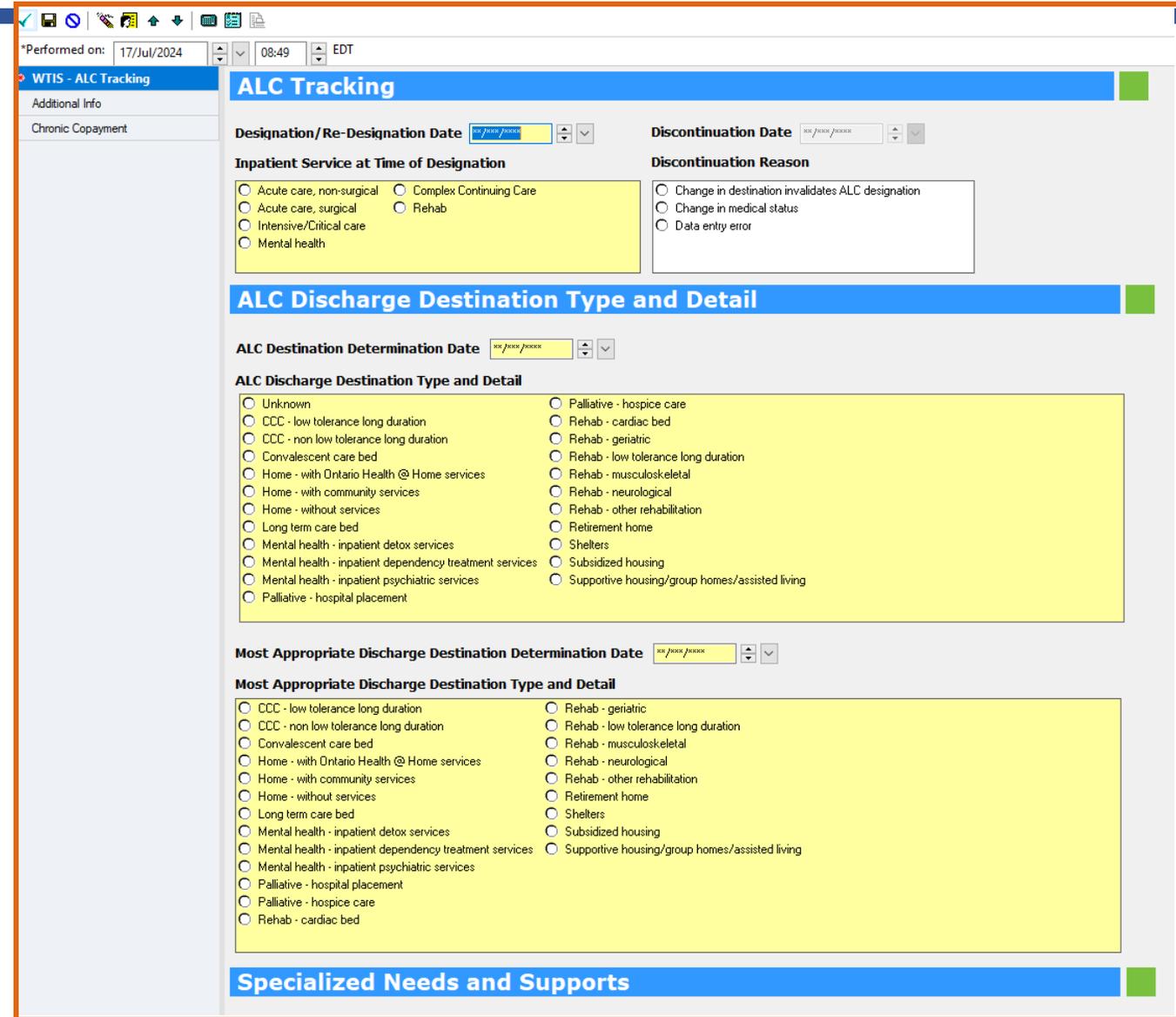
- Tasking in the Multi-Patient Task List

	*ZZZTEST, SARAH 10/Oct/1990 <i>*Name Alert</i>	11000117	SC ED / WR	Pending	2024-Nov-02 10:39	Consult to Case Management - ALC Designation	11/02/24 10:39:00 ED...
---------------------------------------------------------------------------------	----------------------------------------------------------	----------	------------	---------	-------------------	----------------------------------------------	-------------------------

- Double-click on the task to open the PowerForm and document
- Once the PowerForm is signed, the information is transferred via the WTIS interface
- This PowerForm will also be published under the patient's chart and easily accessible in Documentation and Form Browser areas
- The order status will change to **Completed**, indicating to the prescriber and the care team, that this task/assignment has been addressed and completed.

ALC PowerForm

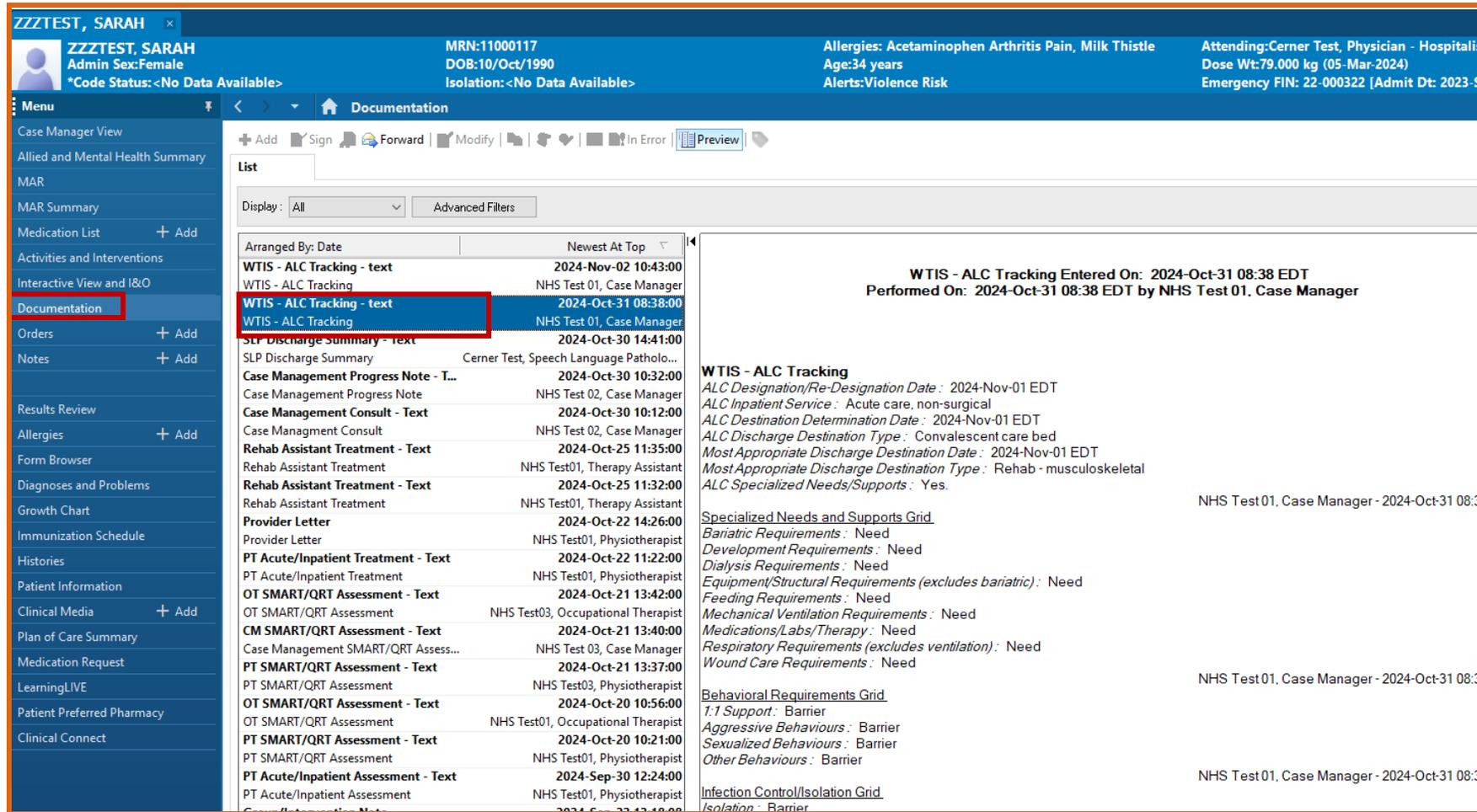
- WTIS – ALC Tracking (++)Required)
- Additional Info
 - 1st ALC Designation
 - 1st Application Submitted To
 - #1 Application Date
 - Service Contract Confirmed Date
 - Contract Service Start Date
 - **Long Term Care** (dates)
- Chronic Copayment
 - Chronic Copayment Date
 - Chronic Copayment
 - (No, Yes, On hold, Unknown)
 - Notes



The screenshot shows the ALC Tracking PowerForm interface. At the top, it displays the date and time: "Performed on: 17/Jul/2024 08:49 EDT". The form is divided into several sections:

- WTIS - ALC Tracking**: Includes "Additional Info" and "Chronic Copayment".
- ALC Tracking**: Contains "Designation/ Re-Designation Date" and "Discontinuation Date" dropdowns. Below this is "Inpatient Service at Time of Designation" with radio buttons for "Acute care, non-surgical", "Acute care, surgical", "Intensive/Critical care", "Mental health", "Complex Continuing Care", and "Rehab". To the right is "Discontinuation Reason" with radio buttons for "Change in destination invalidates ALC designation", "Change in medical status", and "Data entry error".
- ALC Discharge Destination Type and Detail**: Includes "ALC Destination Determination Date" dropdown and "ALC Discharge Destination Type and Detail" with a large list of radio button options such as "Unknown", "CCC - low tolerance long duration", "Home - with Ontario Health @ Home services", etc.
- Most Appropriate Discharge Destination Determination Date**: A dropdown menu.
- Most Appropriate Discharge Destination Type and Detail**: Another large list of radio button options for discharge destinations.
- Specialized Needs and Supports**: A section at the bottom of the form.

Published PowerForm



ZZZTEST, SARAH x

ZZZTEST, SARAH
Admin Sex:Female
*Code Status:<No Data Available>

MRN:11000117
DOB:10/Oct/1990
Isolation:<No Data Available>

Allergies: Acetaminophen Arthritis Pain, Milk Thistle
Age:34 years
Alerts:Violence Risk

Attending:Cerner Test, Physician - Hospitali...
Dose Wt:79.000 kg (05-Mar-2024)
Emergency FIN: 22-000322 [Admit Dt: 2023-5

Menu

- Case Manager View
- Allied and Mental Health Summary
- MAR
- MAR Summary
- Medication List + Add
- Activities and Interventions
- Interactive View and I&O
- Documentation**
- Orders + Add
- Notes + Add
- Results Review
- Allergies + Add
- Form Browser
- Diagnoses and Problems
- Growth Chart
- Immunization Schedule
- Histories
- Patient Information
- Clinical Media + Add
- Plan of Care Summary
- Medication Request
- LearningLIVE
- Patient Preferred Pharmacy
- Clinical Connect

Documentation

List

Display: All Advanced Filters

Arranged By: Date	Newest At Top
WTIS - ALC Tracking - text	2024-Nov-02 10:43:00
WTIS - ALC Tracking	NHS Test 01, Case Manager
WTIS - ALC Tracking - text	2024-Oct-31 08:38:00
WTIS - ALC Tracking	NHS Test 01, Case Manager
SLP Discharge Summary - text	2024-Oct-30 14:41:00
SLP Discharge Summary	Cerner Test, Speech Language Patholo...
Case Management Progress Note - T...	2024-Oct-30 10:32:00
Case Management Progress Note	NHS Test 02, Case Manager
Case Management Consult - Text	2024-Oct-30 10:12:00
Case Management Consult	NHS Test 02, Case Manager
Rehab Assistant Treatment - Text	2024-Oct-25 11:35:00
Rehab Assistant Treatment	NHS Test01, Therapy Assistant
Rehab Assistant Treatment - Text	2024-Oct-25 11:32:00
Rehab Assistant Treatment	NHS Test01, Therapy Assistant
Provider Letter	2024-Oct-22 14:26:00
Provider Letter	NHS Test01, Physiotherapist
PT Acute/Inpatient Treatment - Text	2024-Oct-22 11:22:00
PT Acute/Inpatient Treatment	NHS Test01, Physiotherapist
OT SMART/QRT Assessment - Text	2024-Oct-21 13:42:00
OT SMART/QRT Assessment	NHS Test03, Occupational Therapist
CM SMART/QRT Assessment - Text	2024-Oct-21 13:40:00
Case Management SMART/QRT Assess...	NHS Test 03, Case Manager
PT SMART/QRT Assessment - Text	2024-Oct-21 13:37:00
PT SMART/QRT Assessment	NHS Test03, Physiotherapist
OT SMART/QRT Assessment - Text	2024-Oct-20 10:56:00
OT SMART/QRT Assessment	NHS Test01, Occupational Therapist
PT SMART/QRT Assessment - Text	2024-Oct-20 10:21:00
PT SMART/QRT Assessment	NHS Test01, Physiotherapist
PT Acute/Inpatient Assessment - Text	2024-Sep-30 12:24:00
PT Acute/Inpatient Assessment	NHS Test01, Physiotherapist
Case Management Note	2024-Sep-22 12:10:00

WTIS - ALC Tracking Entered On: 2024-Oct-31 08:38 EDT
Performed On: 2024-Oct-31 08:38 EDT by NHS Test 01, Case Manager

WTIS - ALC Tracking
ALC Designation/Re-Designation Date : 2024-Nov-01 EDT
ALC Inpatient Service : Acute care, non-surgical
ALC Destination Determination Date : 2024-Nov-01 EDT
ALC Discharge Destination Type : Convalescent care bed
Most Appropriate Discharge Destination Date : 2024-Nov-01 EDT
Most Appropriate Discharge Destination Type : Rehab - musculoskeletal
ALC Specialized Needs/Supports : Yes.

NHS Test 01, Case Manager - 2024-Oct-31 08:3

Specialized Needs and Supports Grid
Bariatric Requirements : Need
Development Requirements : Need
Dialysis Requirements : Need
Equipment/Structural Requirements (excludes bariatric) : Need
Feeding Requirements : Need
Mechanical Ventilation Requirements : Need
Medications/Labs/Therapy : Need
Respiratory Requirements (excludes ventilation) : Need
Wound Care Requirements : Need

NHS Test 01, Case Manager - 2024-Oct-31 08:3

Behavioral Requirements Grid
1:1 Support : Barrier
Aggressive Behaviours : Barrier
Sexualized Behaviours : Barrier
Other Behaviours : Barrier

NHS Test 01, Case Manager - 2024-Oct-31 08:3

Infection Control/Isolation Grid
Isolation : Barrier

The published document will read **WTIS – ALC Tracking**

This document interfaced with WTIS to send the appropriate information

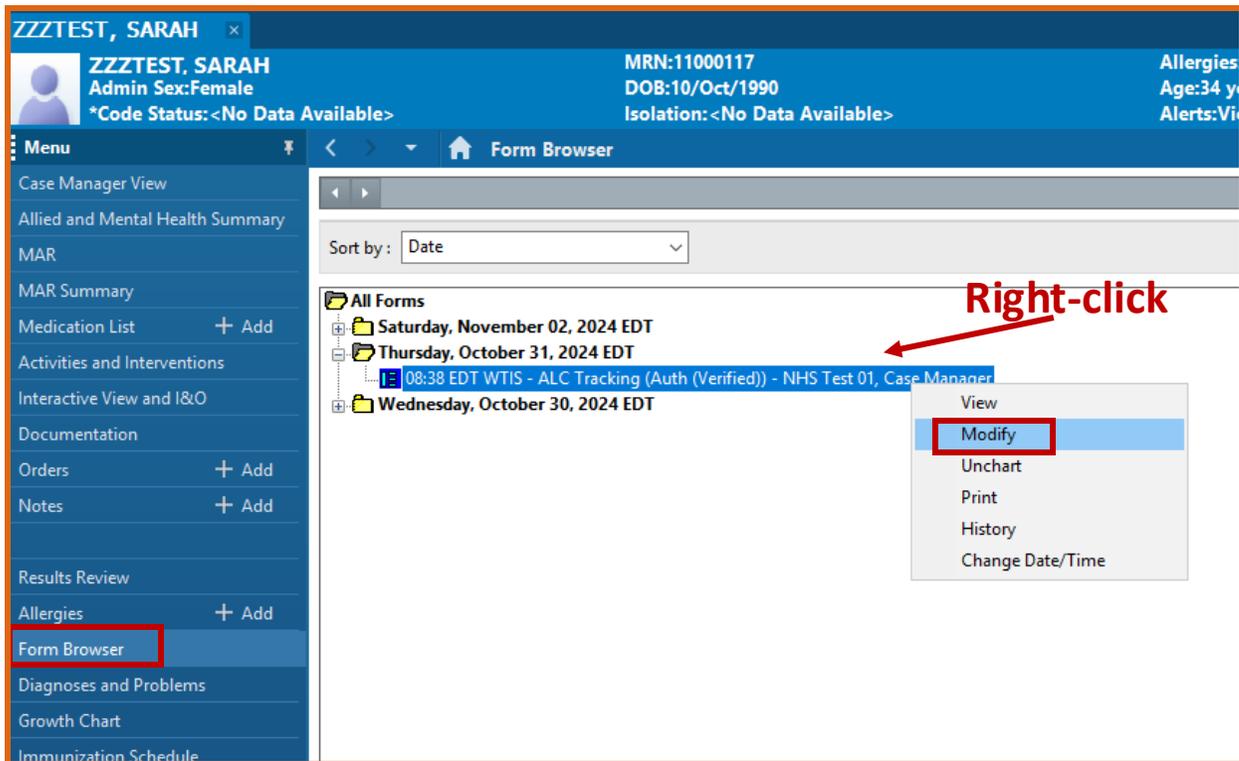
Completed Order

Inactive					
		Consult to Case Mana... Completed	10/29/24 12:08:00 EDT	NHS Test01, Physicia...	2024-Oct-29
		Consult to Case Mana... Completed	11/02/24 10:39:00 EDT, Patient is medically stable.	NHS Test01, Physicia...	2024-Nov-02
		Consult to Case Management for ALC Designation	11/02/24 12:08:00 EDT, Patient is medically stable. Requires ...	NHS Test01, Physicia...	2024-Oct-29

- Visibility to the Prescriber and the interdisciplinary team that this PowerForm is complete
- Because the PowerForm was retrieved from the MPTL, utilizing this sophisticated system as it relates to the linking of the Consult Order and the task

What if the Patient's ALC Designation Changes...

- Modify the published WTIS – ALC Tracking document
- Go to Form Browser on the patient's chart, locate document, right-click,



ZZZTEST, SARAH

ZZZTEST, SARAH
Admin Sex:Female
*Code Status:<No Data Available>

MRN:11000117
DOB:10/Oct/1990
Isolation:<No Data Available>

Allergies
Age:34 y
Alerts:Vi

Menu

Case Manager View

Allied and Mental Health Summary

MAR

MAR Summary

Medication List + Add

Activities and Interventions

Interactive View and I&O

Documentation

Orders + Add

Notes + Add

Results Review

Allergies + Add

Form Browser

Diagnoses and Problems

Growth Chart

Immunization Schedule

Form Browser

Sort by: Date

All Forms

Saturday, November 02, 2024 EDT

Thursday, October 31, 2024 EDT

08:38 EDT WTIS - ALC Tracking (Auth (Verified)) - NHS Test 01, Case Manager

Wednesday, October 30, 2024 EDT

Right-click

View

Modify

Unchart

Print

History

Change Date/Time

and choose **Modify**

- PowerForm will open
- Complete the *Discontinue Date* and *Discontinue Reason*



Performed on: 17/Jul/2024 08:49 EDT

WTIS - ALC Tracking

Additional Info

Chronic Copayment

ALC Tracking

Designation/Re-Designation Date

Inpatient Service at Time of Designation

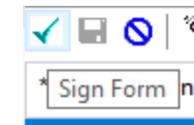
Acute care, non-surgical
 Acute care, surgical
 Intensive/Critical care
 Mental health
 Complex Continuing Care
 Rehab

Discontinuation Date

Discontinuation Reason

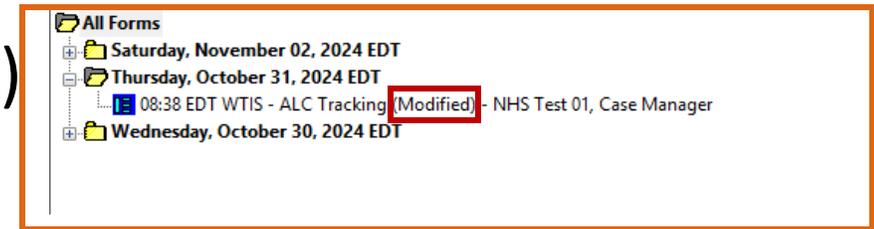
Change in destination invalidates ALC designation
 Change in medical status
 Data entry error

- Once done, SIGN



Modified ALC PowerForm

- Modifications on the PowerForm **will interface live with WTIS**
- The status of the PowerForm will read (Modified)
- The textual rendition will say **Document Has Been Revised**



Arranged By: Date	Newest At Top
WTIS - ALC Tracking - text	2024-Nov-02 10:43:00
WTIS - ALC Tracking	NHS Test 01, Case Manager
WTIS - ALC Tracking - text	2024-Oct-31 08:38:00
WTIS - ALC Tracking	NHS Test 01, Case Manager
SLP Discharge Summary - Text	2024-Oct-30 14:41:00
SLP Discharge Summary	Cerner Test, Speech Language Patholo...
Case Management Progress Note - T...	2024-Oct-30 10:32:00
Case Management Progress Note	NHS Test 02, Case Manager
Case Management Consult - Text	2024-Oct-30 10:12:00

Document Has Been Revised

WTIS - ALC Tracking Entered On: 2024-Nov-02 10:43 EDT
Performed On: 2024-Nov-02 10:43 EDT by NHS Test 01, Case Manager

WTIS - ALC Tracking
ALC Designation/Re-Designation Date : 2024-Nov-02 EDT

Results Review

ZZZTEST, SARAH

ZZZTEST, SARAH
 Admin Sex:Female
 *Code Status: <No Data Available>

MRN:11000117
 DOB:10/Oct/1990
 Isolation:<No Data Available>

Allergies: Acetaminophen Arthritis Pain, Milk Thistle
 Age:34 years
 Alerts:Violence Risk

Attending: Cer
 Dose Wt:79.00
 Emergency FI

Menu

Case Manager View

Allied and Mental Health Summary

MAR

MAR Summary

Medication List + Add

Activities and Interventions

Interactive View and I&O

Documentation

Orders + Add

Notes + Add

Results Review

Allergies + Add

Form Browser

Diagnoses and Problems

Growth Chart

Immunization Schedule

Histories

Patient Information

Clinical Media + Add

Plan of Care Summary

Medication Request

LearningLIVE

Patient Preferred Pharmacy

Clinical Connect

Results Review

Recent Results Lab - Recent Lab - Extended Pathology Microbiology Imaging Vitals - Recent Vitals - Extended **Assessments View**

Flowsheet: Clinical Info Procedure Selection Level: Clinical Info Table Group List

26-Oct-2024 12:12 - 03-Nov-2024 12:12 (Clinical Range)

Navigator

Showing results from (30/Oct/2024 - 02/Nov/2024) Show more results

Clinical Info	02/Nov/2024 10:43	31/Oct/2024 08:38	30/Oct/2024 14:41	30/Oct/2024 10:12
MHA Psychosocial Assessment Conclusions				
Interventions Planned				Access funding for instr
Instrumental ADLs				
Writing			Within functional limits	
Assessment				
Barriers to Safe Discharge SLP			Decreased communicat	
Plan				
Feeding Equipment			test	
SLP Discharge SMART Goals				
SLP Discharge SMART Goal #1			test	
SLP Discharge Plan				
SLP Impairments or Limitations			Cognitive deficits	
SLP Recommended Supports			Meal delivery, Adult tran	
SLP Status on Discharge				
SLP Receptive Language			No report/observed conc	
SLP Expressive Language			Within functional limits	
Reading Comprehension			Mild impairment	
Dysphagia Evaluation				
SLP Discharge Recommendations			SLP Discharge Recomme	
Admit/Transfer/Discharge Information				
Discharge Needs				
Discharge To, Anticipated			Home independently, Hc	
ALC Designation/Re-Designation Date	02/Nov/2024	01/Nov/2024		
ALC Inpatient Service	SU	RB (c)		
ALC Destination Determination Date	02/Nov/2024	01/Nov/2024		
ALC Discharge Destination Type	CCC.NTLD (c)	CVC		
Most Appropriate DC Destination Date	02/Nov/2024	01/Nov/2024		
PowerForm Activities & Interventions				
SLP Discharge Summary - Form			SLP Discharge Summary -	

Assessments View

Flowsheet: Clinical Info

ALC Information

Complex Care & Rehab High Application - Workflow

Current State

- Case Managers are discussing next stages of the patient's hospital journey with the interdisciplinary team
- Once the patient is deemed medically stable, Case Managers are completing their Complex Care and Rehabilitation Referral on paper; getting a signature from the patient for consent to share their medical information for the purpose of the referral
- Emailing the referral, along with supporting documentation to the flow/intake coordinators, phone call to discuss referrals
- The flow/intake coordinators and sometimes the accepting unit CNs provide bed offers to the Case Managers
- Prescribers complete TOA and write a Discharge Order

Future State – Practice Change – Preadmission to Rehab Workflow

- New Consult Orders
 - Consult to Inpatient Rehab (Complex Continuing Care)
 - Consult to Inpatient Rehab High (HDS)
 - Consult to End-of-Life
 - Consult to Medically Complex (Non-Rehab Related)
 - Consult to Behavioural Bed
- The therapists/care team/Prescriber will advise of appropriate stream
- Prescriber will place the order

Consult to Inpatient Rehab (Complex Continuing Care)

Consult to Inpatient Rehab High (HDS)

Consult to End-of-Life Bed

Consult to Medically Complex Bed (Non-Rehab Related)

Consult to Behavioural Bed (Non NH/HDS Bed)

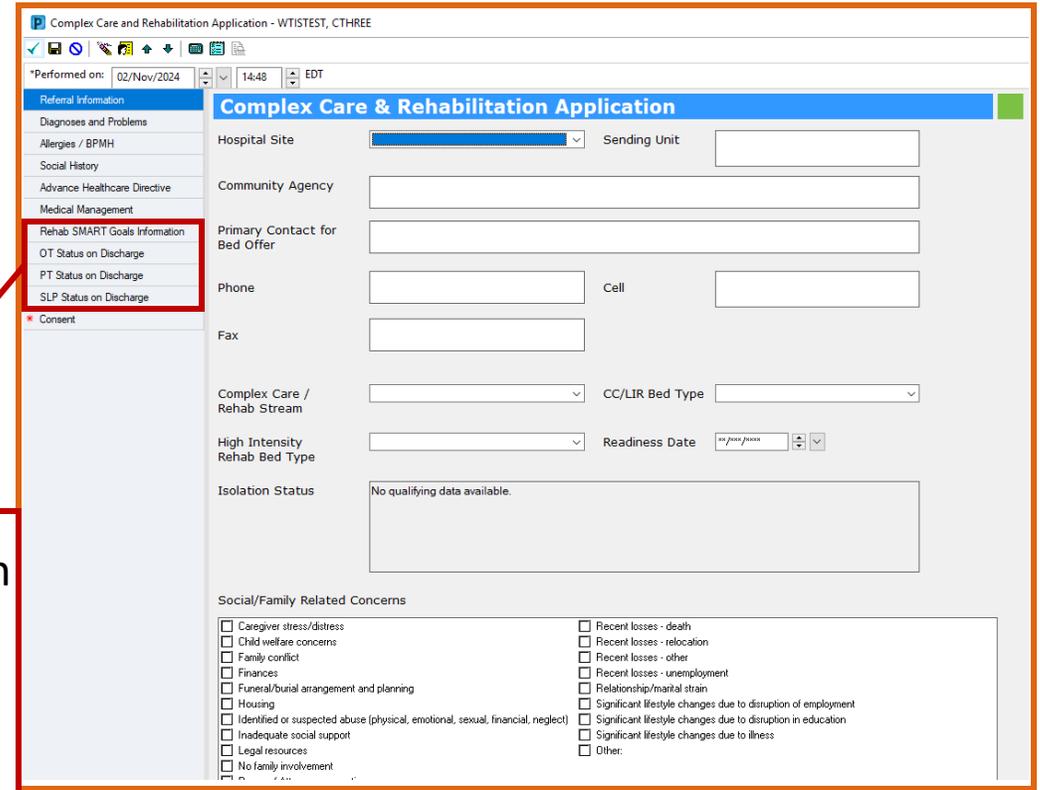
Case Manager's will be TASKED with the Complex Care & Rehab Referral Application

Multi-Patient Task List View

WTISTEST, CTHREE 01/Feb/1980	11017458	SC 5AA / SC5A01 / ...	Pending	2024-Nov-02 14:44	Complex Care & Rehab Referral Application	11/02/24 14:44:00 ED..
---------------------------------	----------	-----------------------	---------	-------------------	-------------------------------------------	------------------------

- Retrieve the PowerForm from the task list by double-clicking the task
- PowerForm will open
- Complete all relevant areas of the PowerForm
- No signature needed for consent

Rehab SMART Goals Information
OT Status on Discharge
PT Status on Discharge
SLP Status on Discharge



Complex Care and Rehabilitation Application - WTISTEST, CTHREE

*Performed on: 02/Nov/2024 14:48 EDT

Complex Care & Rehabilitation Application

Referral Information

Diagnoses and Problems

Allergies / BPMH

Social History

Advance Healthcare Directive

Medical Management

Rehab SMART Goals Information

OT Status on Discharge

PT Status on Discharge

SLP Status on Discharge

* Consent

Hospital Site: [Dropdown]

Sending Unit: [Text]

Community Agency: [Text]

Primary Contact for Bed Offer: [Text]

Phone: [Text] Cell: [Text]

Fax: [Text]

Complex Care / Rehab Stream: [Dropdown] CC/LIR Bed Type: [Dropdown]

High Intensity Rehab Bed Type: [Dropdown] Readiness Date: [Date Picker]

Isolation Status: No qualifying data available.

Social/Family Related Concerns

Caregiver stress/distress

Child welfare concerns

Family conflict

Finances

Funeral/burial arrangement and planning

Housing

Identified or suspected abuse (physical, emotional, sexual, financial, neglect)

Inadequate social support

Legal resources

No family involvement

Recent losses - death

Recent losses - relocation

Recent losses - other

Recent losses - unemployment

Relationship/marital strain

Significant lifestyle changes due to disruption of employment

Significant lifestyle changes due to disruption in education

Significant lifestyle changes due to illness

Other:

Rehab SMART Goals

OT Discharge SMART Goals

Specific, Measurable, Achievable, Relevant, and Timebound (SMART) Goals are to be filled out only if Patient is being Discharged with Home Care Services or if Therapists are requesting further Inpatient and/or Outpatient Rehabilitation

OT SMART Goals

	OT SMART Goals
Goal #1	Independent with transfers, with 4 ww, from sit to stand, in 4-6 weeks
Goal #2	
Goal #3	
Goal #4	
Goal #5	
Goal #6	
Goal #7	
Goal #8	

PT Discharge SMART Goals

Specific, Measurable, Achievable, Relevant, and Timebound (SMART) Goals are to be filled out only if Patient is being Discharged with Home Care Services or if Therapists are requesting further Inpatient and/or Outpatient Rehabilitation

PT SMART Goals

	PT SMART Goals
Goal #1	Ambulate, independently 100m with 4ww in 6-8 weeks
Goal #2	
Goal #3	
Goal #4	
Goal #5	
Goal #6	
Goal #7	
Goal #8	

SLP Discharge SMART Goals

Specific, Measurable, Achievable, Relevant, and Timebound (SMART) Goals are to be filled out only if Patient is being Discharged with Home Care Services or if Therapists are requesting further Inpatient and/or Outpatient Rehabilitation

SLP SMART Goals

	SLP SMART Goals
Goal #1	Within 12 weeks, patient will initiate and maintain a conversation for 3 minutes with a peer, demonstrating appropriate turn-taking and topic maintenance
Goal #2	
Goal #3	
Goal #4	
Goal #5	
Goal #6	
Goal #7	
Goal #8	



Discharge SMART Goals – flow into Case Manager’s Rehab Application PowerForm as a read-only template

The screenshot displays a software interface for a 'Complex Care and Rehabilitation Application'. The main content area is titled 'Rehab SMART Goals Information' and lists the following:

- Rehab SMART Goals**
- Therapy SMART Goals**
- PT SMART Goals**
 - SMART Goal #1 PT: Ambulate, independently 100m with 4ww in 6-8 weeks (16/10/24 17:10:00)
- OT SMART Goals**
 - SMART Goals #1 OT: Independent with transfers, with 4 ww, from sit to stand, in 4-6 weeks (16/10/24 17:13:00)
- SLP SMART Goals**
 - SMART Goal #1 SLP: Within 12 weeks, patient will initiate and maintain a conversation for 3 minutes with a peer, demonstrating appropriate turn-taking and topic maintenance (22/10/24 10:44:00)

The interface includes a sidebar with navigation options such as 'Referral Information', 'Diagnoses and Pro...', 'Allergies / BPMH', 'Social History', 'Advance Healthc...', 'Medical Managen...', 'Rehab SMART G...', 'OT Status on Disc...', 'PT Status on Disc...', 'SLP Status on Dis...', and '* Consent'. The top of the window shows the application title and a toolbar with various icons. The date and time are set to 22/Oct/2024 at 10:54 EDT.

Status on Discharge Sections

Complex Care and Rehabilitation Application - WTISTEST, CTHREE

*Performed on: 02/Nov/2024 14:48 EDT By: NHS Test 01

Status on Discharge

Interventions to Date

Coban

Cognitive/Perceptual testing and treatment

Contrast Baths

Education

Equipment prescription

Functional transfers

Functional treatment program

Home exercise program

Meal preparation assessment and training

Mobility clinic referral

Modalities

Psychosocial/Community support

Range of motion exercises

Scar gel

Self-care assessment and training

Sensory re-education

Splint

Strengthening

Wheelchair assessment and provision

Other:

Education

Document learning evaluation for Responsible Learner(s)

	Verbalizes understanding	Demonstrates	Needs further teaching	Needs practice/supervision	Comment
Activity of Daily Living Training					
Bed Positioning					
Bed to Chair Transfers					
Body Mechanics					
Car Transfers					
Exercise Program					
Home Safety					
Plan of Care					
Skin Care					
Wheelchair Positioning					
Work Related Tasks					
Workstation Ergonomics					
Falls Prevention					
Energy Conservation					
Sternal Precautions					
Hip Precautions					
Knee Precautions					
Weight Bearing Precautions					

Home Environment

Lives With

Roommate

Sibling

Paid caregiver

Alone

Caregiver

Child(ren)

Family

Friend

Lives In

Transitional Care Bed

Shelter

Motel

Apartment

Condominium

Group home

Homeless

House

Retirement Home Options

Long Term Care Facility

Retirement home

Other:

Assisted living

Independent living

Other:

- Utilizes the Last Charted Value (LCV) feature
- This data is being pulled in from the therapists documentation
- If more information is required, Case Managers will have to communicate with the therapists to request they enter in any missing data to help with the referral application
- Because it's LCV, you can change/write over any entries, however this isn't advised

After Completing the PowerForm

- Sign and submit to the patient's chart
- Print off the published document in PDF format,
- Complete the current state paper form and attach to the PDF
- Send as in current state
- Communication remains for bed offers as is in current state
- Prescriber will write a Transfer Order for NH to NH, and a Discharge Order for NH to HDS

ZZREHAB, IPCLINICALREADINESSQRT

ZZREHAB, IPCLINICALREADINESSQRT
 Admin Sex:Male
 *Code Status: <No Data Available>

MRN:11054710
 DOB:29/Oct/1979
 Isolation: <No Data Available>

Allergies: Allergies Not Recorded
 Age:45 years
 Alerts:No Alerts Documented

Menu

- Case Manager View
- Allied and Mental Health Summary
- MAR
- MAR Summary
- Medication List + Add
- Activities and Interventions
- Interactive View and I&O
- Documentation
- Orders + Add
- Notes + Add
- Results Review
- Allergies + Add
- Form Browser
- Diagnoses and Problems
- Growth Chart
- Immunization Schedule
- Histories
- Patient Information
- Clinical Media + Add
- Plan of Care Summary
- Medication Request
- LearningLIVE
- Patient Preferred Pharmacy
- Clinical Connect

Documentation

+ Add Sign Forward Modify In Error Preview

List

Display: All Advanced Filters

Service Date/Ti...	Subject	Type	Pa
2024-Nov-04 09:39:00	Complex Care and Rehabilitation Application	CCC/Rehabilitation Application - Text	SC
2024-Nov-01 19:43:00	OT Acute/Inpatient Treatment	OT Acute/Inpatient Treatment - Text	SC
2024-Nov-01 19:35:00	OT Acute/Inpatient Treatment	OT Acute/Inpatient Treatment - Text	SC
2024-Nov-01 19:01:00	OT Acute/Inpatient Assessment	OT Acute/Inpatient Assessment - Text	SC
2024-Oct-31 08:48:00	Case Management Consult	Case Management Consult - Text	SC
2024-Oct-30 10:39:00	Rehab Assistant Treatment	Rehab Assistant Treatment - Text	SC
2024-Oct-30 09:47:00	AMB Supplies Dispensing Form	AMB Supplies Dispensing - Text	SC
2024-Oct-30 09:39:00	PT SMART/QRT Assessment	PT SMART/QRT Assessment - Text	SC
2024-Oct-30 08:37:00	OT SMART/QRT Assessment	OT SMART/QRT Assessment - Text	SC

Complex Pe

Referral Information
 Hospital Site : NH - St Cathar
 Sending Unit : 3A
 Primary Contact for Bed Offer :
 Phone : 555-555-5555
 Cell : 555-555-5555
 CM Referral Primary Contact F
 CM Referral CC/Rehab Strea
 CC/LIR Bed Type : Low Intens
 Readiness Date : 2024-Oct-3
 Social/Family Related Concer
 Discharge Destination : Pallia
 Instrumental Needs Identified :
 Patient/Family Response to P.

Consent
 Rehab/CCC Referral Consent
 agree to proceed with informat

Result type: CCC.
 Result date: 04-N
 Result status: Auth
 Result title: Com
 Performed by: NHS
 Verified by: NHS
 Encounter info: 22-01

Published Complex Care and Rehabilitation Application PowerForm in the patient's chart

Quick Response Team (QRT) Workflow

Quick Response Team Program

- In Current State - QRT:
 - Occupational Therapy, Physiotherapy, and Case Management receive separate orders for the Quick Response Team (QRT) Program
 - The Case Manager and therapists complete the **GREEN** ED Assessment sheet upon receiving this program order – multi-contributor document
 - The therapists and Case Manager can review the Emergency Department tracker to identify which patients have a QRT referral

Future State – Practice Change – QRT Subphase Orders

- QRT
- The Prescriber in the Emergency Department, will order ED REHAB QRT Subphase  Available in **ED ONLY**
- The order details include the purpose of the QRT program, and automatic, individual consult orders to OT, PT, and Case Management

Component	Status	Dose ...	Details
ED REHAB QRT Subphase (Initiated Pending)			
Admission/Transfer/Discharge The Quick Response Team (QRT) is an interprofessional admission avoidance strategy that is utilized in the Emergency Department at the Niagara Falls Site (NFS), St Catharines Site (SCS), and the Welland Site (WS) to prioritize the assessment of non-admitted patients. The Quick Response Team (QRT) model consists of an Occupational Therapist (OT), Physiotherapist (PT) and a Case Manager. The purpose of the QRT is to avoid admission of patients whose needs may be supported in the community, by this team assessing and making recommendations prior to admission. All diagnostics need to be completed before intervention by the team.			
Interprofessional Consults			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Consult to Quick Response Team - Case Management...	T;N
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Consult to Quick Response Team - Occupational Ther...	T;N
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Consult to Quick Response Team - Physiotherapy (Co...	T;N



QRT Program information included for ED Prescriber reference

Consult to QRT - CM

Interprofessional Consults		
<input checked="" type="checkbox"/>		Consult to Quick Response Team - Case Management... T;N
<input checked="" type="checkbox"/>		Consult to Quick Response Team - Case Management (Consult to QRT - CM) T;N
<input checked="" type="checkbox"/>		Consult to Quick Response Team - Physiotherapy (Co... T;N

Consult to QRT - OT

Interprofessional Consults		
<input checked="" type="checkbox"/>		Consult to Quick Response Team - Case Management... T;N
<input checked="" type="checkbox"/>		Consult to Quick Response Team - Occupational Ther... T;N
<input checked="" type="checkbox"/>		Consult to Quick Response Team - Occupational Therapy (Consult to QRT - OT) T;N

Consult to QRT - PT

Interprofessional Consults		
<input checked="" type="checkbox"/>		Consult to Quick Response Team - Case Management... T;N
<input checked="" type="checkbox"/>		Consult to Quick Response Team - Occupational Ther... T;N
<input checked="" type="checkbox"/>		Consult to Quick Response Team - Physiotherapy (Co... T;N
		Consult to Quick Response Team - Physiotherapy (Consult to QRT - PT)

QRT Assessment PowerForm Tasking

Occupational Therapy, Physiotherapy, and Case Manager are each tasked with the QRT Assessment PowerForm

Multi-Patient Task List (MPTL) Viewpoint

	Name	Medical Record Number	Location/Room/Bed	Task Status	Scheduled Date and Time	Task Description	Order Details
	*ZZREHAB, IPCLINICALREADINESSQ... 29/Oct/1979 <i>*Name Alert</i>	11054710	SC ED / WR	Overdue	2024-Oct-31 10:04	Case Management SMART/QRT Assessment	10/30/24 10:04:00 EDT

***This is the new ED Tracker at this time

QRT Assessment PowerForm

- Retrieve the PowerForms by double-clicking on the task from the MPTL
- When the PowerForm opens, the first section of the PowerForm is a required field asking the end-user to identify the type of referral

Case Management SMART/QRT Assessment - ZZREHAB, IPCLINICALREADINESSQRT

*Performed on: 04/Nov/2024 10:22 EST

Type of Referral

*Type of Referral

SMART (Senior Mobility Assess and Restore Team)

QRT (Quick Response Team)

Choose QRT (Quick Response Team) to satisfy the required field and to identify the type of assessment

- **Last Charted Value (LCV) Feature**

Type of Referral
Case Management Consent
History, Problems
Pre-Admission Status
Case Management
Current Status
OT Discharge SMART Goals
PT Discharge SMART Goals

- The History, Problems, Pre-Admission Status, Case Management, Current Status, PT Discharge SMART Goals, and the OT Discharge SMART Goals sections of this PowerForm utilize **Last Charted Value (LCV)** functionality.
- This means that the last information placed into these areas, as long as the PowerForm is published, that data will flow into the next opened PowerForm.

PT SMART/QRT Assessment - ZZZTEST, SARAH

*Performed on: 20/Oct/2024 10:21 EDT By: NHS Test01, Physiotherap

Current Status

Subjective Statement

Segoe UI 9

Patient reports feeling weak, with a fear of falling.

Current Cognition Status

Patient is alert and oriented x 3. Patient able to follow directions, and responses are appropriate.

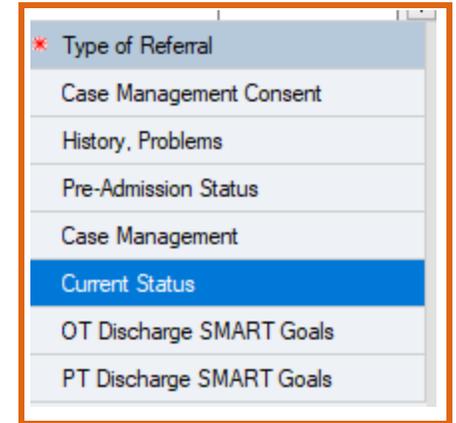
Current Functional Status

	Independent	Modified	Assist Needed	Dependent	Comment
Toileting			X		Assist x 1
Bathing					
Dressing					
Supine to Sit			X		Assist x 1
Sit to Supine			X		Assist x 1
Sit to Stand			X		Assist x 1 with rollator walker
Stand to Sit					
Bed to Chair/Wheelchair					
Chair/Wheelchair to Bed					
Functional Mobility			X		Assist x 1 with rollator walker
Stairs					

For example: if the Case Manager opens up their QRT Assessment PowerForm first, completes and SIGNs it, their data will flow into the OT and PT QRT Assessment PowerForms

• Smart Template Feature

- Is located in the **Current Status** section of the PowerForm
- For example: when the PT documents in their PowerForm, it will be a rich text box – when the OT opens their PowerForm, they will see a PT's entry as a smart template (read-only) format.



Physiotherapist's PowerForm Viewpoint

A screenshot of a Physiotherapist's PowerForm Viewpoint. The interface shows a sidebar with navigation options: Pre-Admission Site, Case Management, Current Status (selected), PT Discharge SM, OT Discharge SM, and PT Workload. The main content area is titled "Physiotherapy Analysis, Plan and Recommendations" and contains a rich text editor with the following text: "Patient requires minimal assist x 1 to transfer and ambulate with a rollator walker. Patient ambulated ~20m to emergency bathroom. Further assist required with OT to complete toileting activities." Below this is a section for "Physiotherapy Plan/Recommendations" with the text: "Recommend patient continue with SMART program, and be seen daily. The writer is place SMART Follow Up orders."

Occupational Therapist's PowerForm Viewpoint

A screenshot of an Occupational Therapist's PowerForm Viewpoint. The interface shows a sidebar with navigation options: Current Status (selected), OT Discharge SM, PT Discharge SM, and OT Workload. The main content area is titled "Physiotherapy Analysis, Plan and Recommendations" and contains a rich text editor with the following text: "Patient requires minimal assist x 1 to transfer and ambulate with a rollator walker. Patient ambulated ~20m to emergency bathroom. Further assist required with OT to complete toileting activities." Below this is a section for "Physiotherapy Plan/Recommendations" with the text: "Recommend patient continue with SMART program, and be seen daily. The writer is place SMART Follow Up orders."

Smart
template

Key takeaway

- Whomever opens and completes the QRT Assessment first and SIGNs, the Last Charted Value (LCV) information will flow into the other clinician's QRT Assessment PowerForm, when they open their PowerForm
- The first clinician who opens their QRT Assessment PowerForm, no information will be present as LCV and no information will be available to pull into the smart template
- The last published QRT Assessment document will contain EVERY CLINICIANS' data entry
- This was the **ONLY** way we could work around a dual or multi-contributor published document within the software

Other Key Points

- CANNOT reschedule the QRT task
- Our tasking for QRT in the MPTL will take place of the ED Tracker at this time

Additional PowerForms

Additional PowerForms

- PowerForms built:
 - Case Management Consult
 - Case Management Progress Note
 - Case Management SMART/QRT Assessment
 - Complex Care & Rehab Referral Application
 - Hip and Knee Bundled Care Form
 - HDS Outpatient Referral Form
 - WTIS – ALC Tracking
 - Telephone Visit
 - Contact Information
 - Interdisciplinary Team Conference (HDS Only)

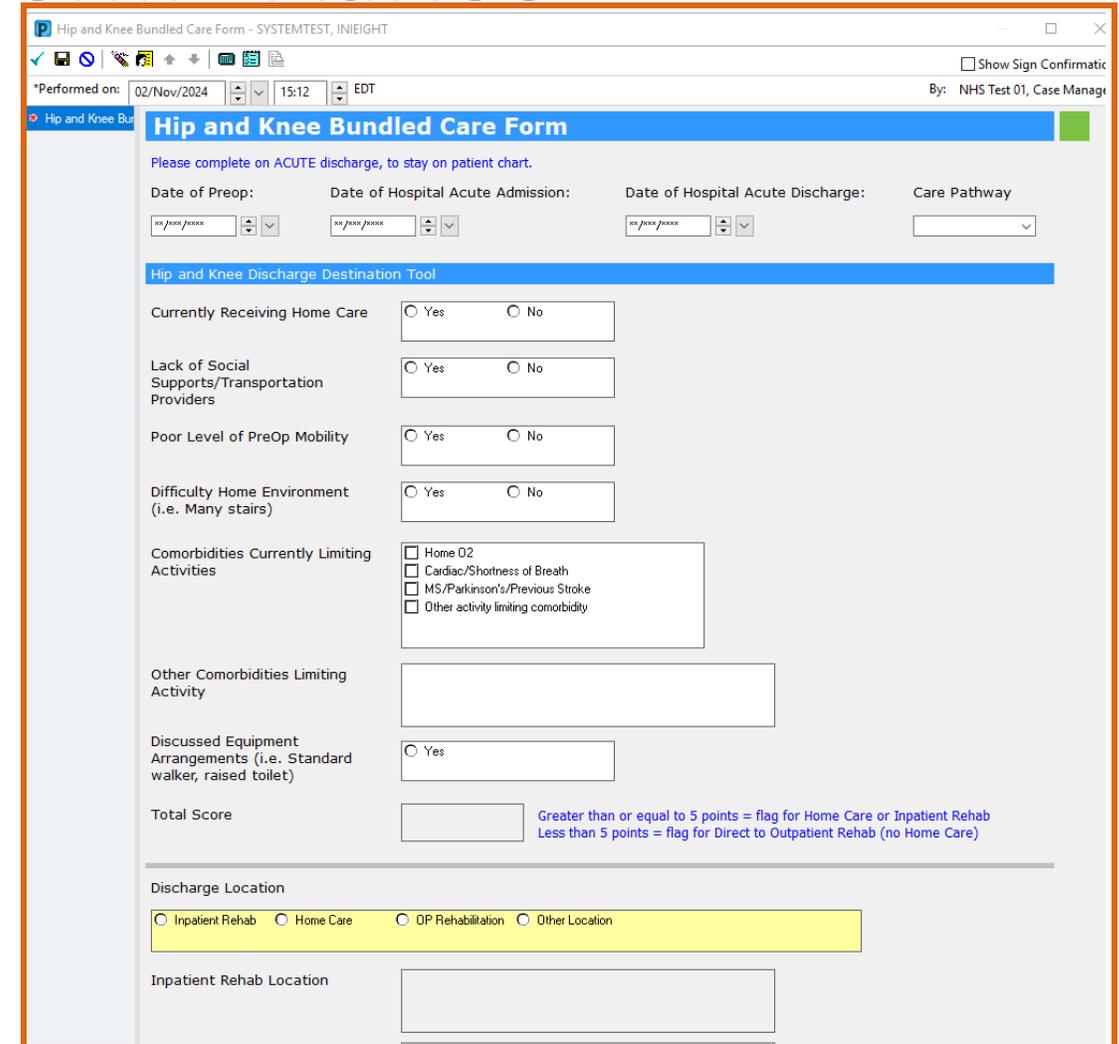
- Case Management Consult
- Case Management Progress Note
- Case Management SMART/QRT Assessment
- Complex Care & Rehab Referral Application
- Hip and Knee Bundled Care Form
- HDS Outpatient Referral Form
- WTIS - ALC Tracking
- Telephone Visit
- Contact Information
- Interdisciplinary Team Conference

Case Management Progress Note - AdHoc

The screenshot shows a web application window titled "Case Management Progress Note - SYSTEMTEST, INIEIGHT". The interface includes a toolbar with icons for save, undo, redo, and other actions. Below the toolbar, there is a field for "*Performed on:" with a date of "02/Nov/2024", a time of "15:11", and a time zone of "EDT". The main content area is a text editor with a blue header "Case Management Progress Note" and a toolbar for text formatting, including options for font face (Segoe UI), size (9), and styles like bold, italic, and underline. The text area is currently empty.

Hip and Knee Bundled Care Form - AdHoc

- AdHoc from AdHoc Folder
- Complete the form and SIGN
- Print off and fax as in current state
- TBD Provider Letter
 or Print template document feature



Hip and Knee Bundled Care Form - SYSTEMTEST, INIEIGHT

*Performed on: 02/Nov/2024 15:12 EDT By: NHS Test 01, Case Manag

Hip and Knee Bundled Care Form

Please complete on ACUTE discharge, to stay on patient chart.

Date of Preop: [mm/yyyy] Date of Hospital Acute Admission: [mm/yyyy] Date of Hospital Acute Discharge: [mm/yyyy] Care Pathway: [dropdown]

Hip and Knee Discharge Destination Tool

Currently Receiving Home Care Yes No

Lack of Social Supports/Transportation Providers Yes No

Poor Level of PreOp Mobility Yes No

Difficulty Home Environment (i.e. Many stairs) Yes No

Comorbidities Currently Limiting Activities

- Home O2
- Cardiac/Shortness of Breath
- MS/Parkinson's/Previous Stroke
- Other activity limiting comorbidity

Other Comorbidities Limiting Activity [text box]

Discussed Equipment Arrangements (i.e. Standard walker, raised toilet) Yes

Total Score [text box] Greater than or equal to 5 points = flag for Home Care or Inpatient Rehab
 Less than 5 points = flag for Direct to Outpatient Rehab (no Home Care)

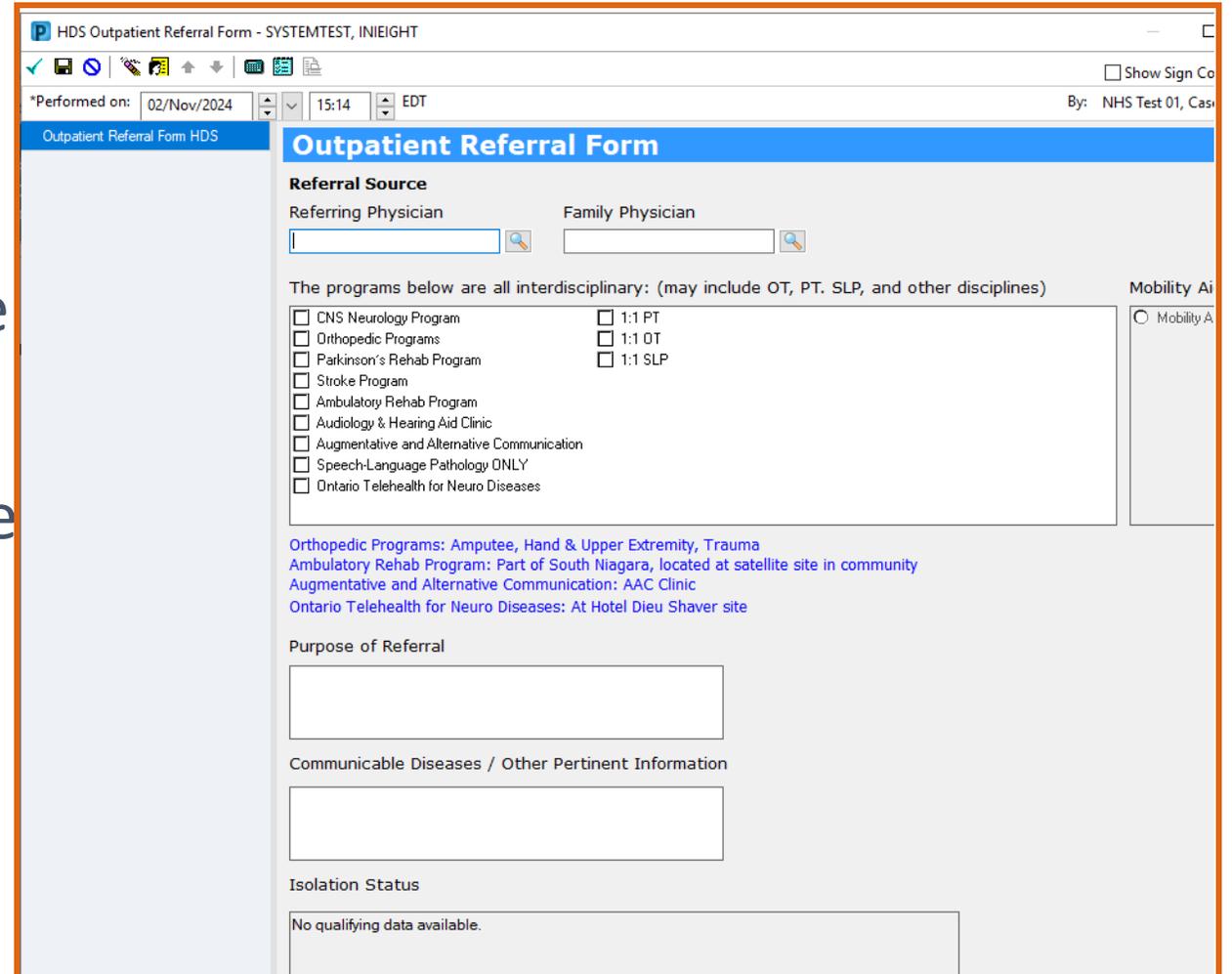
Discharge Location

Inpatient Rehab Home Care OP Rehabilitation Other Location

Inpatient Rehab Location [text box]

HDS Outpatient Referral Form - AdHoc

- AdHoc from AdHoc Folder
- Complete the form and SIGN
- Print off and fax as in current state
- TBD Provider Letter
 or Print template document feature



HDS Outpatient Referral Form - SYSTEMTEST, INIEIGHT

*Performed on: 02/Nov/2024 15:14 EDT By: NHS Test 01, Cas

Outpatient Referral Form

Referral Source

Referring Physician: Family Physician:

The programs below are all interdisciplinary: (may include OT, PT, SLP, and other disciplines)

<input type="checkbox"/> CNS Neurology Program	<input type="checkbox"/> 1:1 PT
<input type="checkbox"/> Orthopedic Programs	<input type="checkbox"/> 1:1 OT
<input type="checkbox"/> Parkinson's Rehab Program	<input type="checkbox"/> 1:1 SLP
<input type="checkbox"/> Stroke Program	
<input type="checkbox"/> Ambulatory Rehab Program	
<input type="checkbox"/> Audiology & Hearing Aid Clinic	
<input type="checkbox"/> Augmentative and Alternative Communication	
<input type="checkbox"/> Speech-Language Pathology ONLY	
<input type="checkbox"/> Ontario Telehealth for Neuro Diseases	

Orthopedic Programs: [Amputee, Hand & Upper Extremity, Trauma](#)
 Ambulatory Rehab Program: [Part of South Niagara, located at satellite site in community](#)
 Augmentative and Alternative Communication: [AAC Clinic](#)
 Ontario Telehealth for Neuro Diseases: [At Hotel Dieu Shaver site](#)

Purpose of Referral

Communicable Diseases / Other Pertinent Information

Isolation Status

No qualifying data available.

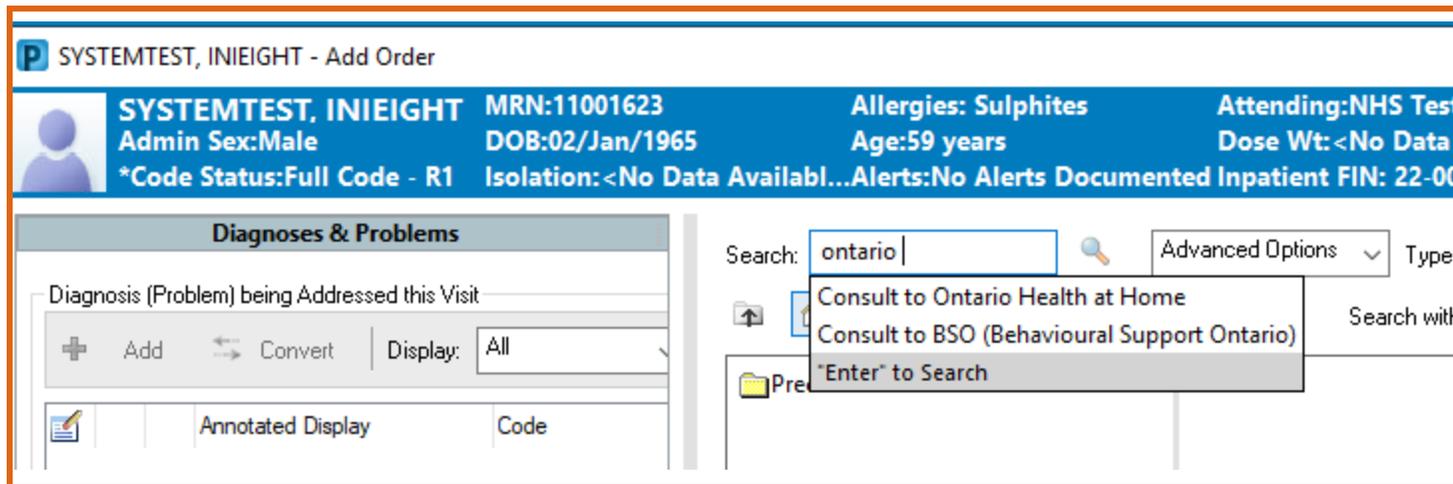
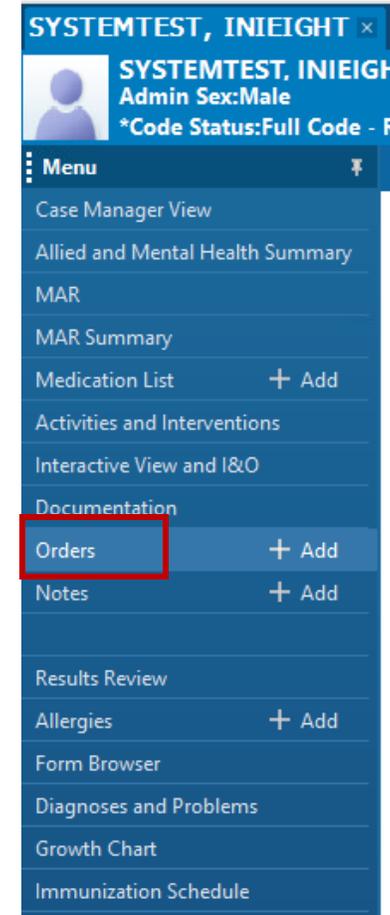
How to Place Orders

Current State

- Placing orders in Meditech for several items, including Home Care for a family meeting and/or home care services

Future State – Practice Change - Placing Orders

- Navigate to patient's chart
- Find the Orders section on the blue Table of Contents
- Click the +Add icon **+ Add**
- Search your Order and click DONE
- Complete the Order details and SIGN



▼ Details for **Consult to Ontario Health at Home (Consult to Home and Community Care Support Services)**

Details | Order Comments | Diagnoses

+ [Icons]

*Requested Start Date/Time: 04/Nov/2024 0944 EST Priority: [Dropdown]

*Reason for Consult: [Dropdown]

- Assessment
- Assistance, Personal Care
- Family Meeting
- Hospice Referral
- Nursing, Other (Special Instructions)
- Nursing, Wound
- Palliative Supports
- Other (Specify in Special Instructions)

Special Instructions: [Text Area]

2 Missing Required Details | Dx Table | Orders for Cosignature | Orders For Nurse Review

Sign

***Reason for Consult is required**

SIGN

Orders – Visible on Patient’s Chart

Displayed: All Active Orders | All Active Orders

	Order Name	Status	Dose ...	Details	Ordering Physician	Start	Stop
4 Active							
<input checked="" type="checkbox"/>	Consult to BSO (Beha...	Ordered		11/02/24 15:25:00 EDT, Patient has age-related cognitive im...	NHS Test01, Physicia...	2024-Nov-02 15:25	2024-Nov-02 15:25
<input checked="" type="checkbox"/>	Consult to Case Mana...	Ordered		06/25/24 08:58:00	NHS Test01, Physicia...	2024-Jun-25 08:58	2024-Jun-25 08:58
<input checked="" type="checkbox"/>	Consult to Case Mana...	Ordered		05/24/24 11:48:00, COMPLEX CARE AND REHAB REFERRAL ...	NHS Test01, Physicia...	2024-May-24 11:48	2024-May-24 11:48
<input checked="" type="checkbox"/>	Consult to Dietitian	Ordered		07/02/24 14:31:27 Ordered secondary to CNST screening information where th...	SYSTEM, SYSTEM Cerner	2024-Jul-02 14:31	2024-Jul-02 14:31
<input checked="" type="checkbox"/>	Consult to GAP (Geria...	Ordered		11/02/24 15:26:00 EDT, Dementia/Memory Loss	NHS Test01, Physicia...	2024-Nov-02 15:26	2024-Nov-02 15:26
<input checked="" type="checkbox"/>	Consult to Ontario He...	Ordered		11/02/24 15:24:00 EDT, Family Meeting	NHS Test01, Physicia...	2024-Nov-02 15:24	2024-Nov-02 15:24

Any orders to home care will generate as a fax as in current state

Questions?



Positive change. Powerful transformation.