

After-Hours Task Manager

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Introduction

'Hospitals at Night' do not have the same support, staffing or resources as are available during business hours. At night and on weekends, nursing staff requiring medical attention for their patients or needing tasks to be performed, traditionally paged doctors via switchboards, waited for return phone calls, had limited means to convey clinical information and no visibility of the status of their task or of the recipient doctors' workload.

Aim

As part of the RBWH '24/7 Hospital' initiative, there was a requirement to implement a visual, responsive, intuitive means for both nursing and medical staff to manage medical tasks – from routine tasks through to urgent clinical reviews and to encourage teamwork and workload sharing.

There was also a need to understand after-hours workloads – to quantify the types of tasks being requested, from which wards, with what urgency, being managed by which doctors for a given time period.

Method

Detailed spreadsheets with the mapping of the medical 'On-call' clinical allocations for all wards were submitted to Telstra Health for creation of a Task Management module within Patient Flow Manager, the software already used by RBWH. The detailed coding defined

- shift hours for evenings and nights, mid-week, weekends and public holidays
- comprehensive lists of task types that nursing staff would require
- urgency criteria
- and most importantly, the mapping of individual wards to specific doctor roles for over 30 wards

With invaluable assistance from technical staff, portable devices were configured to connect to both the hospital Wi-Fi and 4G to receive triggered email notifications and colour-coded displays of all tasks on role-specific iPad minis. With patient safety being paramount, extensive testing was performed to mimic any scenario that might occur after-hours. Training material and face-to-face education sessions were provided to nurses and doctors – in the lead up to system go-live at 4pm, on 6th February 2017. Nine wards and six medical staff have been utilising the electronic after-hours task management system since, with eleven more wards coming on line by 3rd April. All Mental Health wards will follow, then Maternity – with all wards being 'Live' by 2nd May.

Results

We don't ever want to go back to paging! Nursing staff feel that not only is it intuitive, but there is an enhanced ability for them to include succinct clinical details within the task request. There is an improved visibility of its progress – from acknowledgement through to completion. Doctors appreciate phone calls are no longer required to confirm receipt of tasks and there is now the ability to prioritise, re-allocate and respond in a digital manner - elicited with a tap on the device screen. An unexpected but positive outcome is evidence of doctors voluntarily assisting each other, as task loads are now visible to colleagues.

Despite the lack of continuous Wi-Fi coverage within RBWH, meaning portable devices drop in and out of range between wards, overall there has been very positive feedback. This has been partly due to the measures implemented to improve the clinician experience 'on the floor' with a change of browser, 'remember me' passwords, auto-join Wi-Fi settings and all feedback, whether positive or negative, being responded to.

Conclusion

Previously, after-hours doctors and their disparate workloads were invisible. Given nurses are now logging all tasks for their patients, true indications of the volume of after-hours work required in individual wards is being captured, along with response times, task types and the variances between streams is available. This data, never previously available, can be interrogated and used to change practice, inform resource allocation and improve efficiency and patient care after-hours. Hospitals intending to implement this task management system will value the lessons learnt at RBWH.

Keywords

Portable devices, Task Management, Hospital at Night, Wi-Fi, Patient Safety, after-hours care, 24/7 Hospital