Leading the way into the Future of Patient Empowerment in the Digital World

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• Generally Digital Healthcare is focussed on medical records or cost savings, albeit to improve the patient journey.

We wanted to empower patients to be a partner in their health care not a bystander and the Interactive Patient Station would allow us to achieve this – (IPS)
History

• Cairns Hospital redeveloped and decanted mid 2014
• Part of the electronic medical record program in Qld since 2010 and will become a Digital Hospital by the mid 2016.
• Visit to Epworth, Victoria.
• In 2012 system requirements were developed
• North Queensland Hospital Foundation support for funding and ongoing management of entertainment.
• Contract signed 2014 and the project commenced
• 2 releases – 2\textsuperscript{nd} for clinical interfaces.
• In July 2015 the IPS was deployed across all overnight inpatient areas – 354.
Implementation Plan

• Project Control Group included NQHF and HHS staff

• Project plan - 8 key areas of focus:
  ➢ CHHHS preliminary infrastructure works,
  ➢ configuration,
  ➢ system testing,
  ➢ system validation,
  ➢ content,
  ➢ resourcing,
  ➢ communication and training and
  ➢ go-Live plan

• Risk Register
Technolog

Cybernet 22” Medical Grade Monitor and Keyboard mounted on an articulating arm
Initial IPS Features

• Customised, dynamic educational material
• Entertainment Services
• Multi lingual interface and translation
• Care Team Console including photos of staff
• Goals and scheduling
• Survey capability with aggregated data reporting tools to gain an insight on patient satisfaction and to monitor the use of the technology
• Nurse Rounding
• Clinical Applications: ieMR, Viewer, Medical Imaging, Delegate, Trend care, Pathology etc.
• Meal Ordering with provision of patient dependent dietary requirements and restrictions
The Welcoming Experience

- The IPS terminal individually welcomes each patient to their bed, ward and surrounds. Patients have the ability to personalise their experience and the terminals will save that information for future admissions.
- The system interfaces with our HBCIS system and follows the patient throughout their journey at Cairns Hospital.
- When each patient is admitted they have to verify their identification and are then presented with an introductory presentation containing pertinent information about the patient experience and the ward they are admitted to. The following is an example of these presentation.
- The patient then has access to educational content and hospital information e.g., Ryan's rule, handover, nurse rounding, discharge planning, doctors ward round etc.
Welcome Deborah
Welcome to Oneview Interactive Patient Care

To log into the system, enter your date of birth (d/mm/yyyy) to access your information, entertainment and to connect with your family and friends.
Welcome to Cairns Hospital
Welcome to the Cairns Hospital

Cancer Care Ward

Visiting Hours Daily: 10am – 1pm, 3pm – 8pm

Discharge Time is 10am
The Cancer Care Unit is a 20 bed ward and provides care for acute patients with Haematological or Oncological health conditions. It also provides a service for patients requiring therapeutic plasma exchange (TPE).
General information

At times general medical patients may be admitted to this unit due to bed limitations, however they will then be relocated to the appropriate unit.

Due to the patient type on this ward there are no flowers allowed. Please inform your visitors.
Helpful Information

What to Bring
Personal Medication
Personal Medical Equipment
Smoking Policy
During your stay
Doctors Ward Rounds
Nurse Rounding
Discharge Planning
Transferring to another hospital
Entertainment Services
What to Bring

Personal Items such as:

**Toiletries**
- Toothbrush & toothpaste
- Shampoo/conditioner/ comb
- Soap/shaving gear
- Comfortable underwear/sanitary pads

**Clothing**
It is recommended you provide your own clothing for your stay in hospital
The wards only have a limited supply of pyjamas available

**Footwear**
Comfortable and safe footwear
What to Bring

Money

A small amount of money may be bought for vending machine, snack trolley or to pay for the television service.

Do not bring any jewellery or valuables

The Hospital is not responsible for loss of valuables
Personal Medication

ALL MEDICATION needs to be identified and given to your Nurse on arrival to the ward

All medication including vitamins, creams and herbal remedies need to be written on the medication chart if you wish to continue these during your stay

Any medication not required should be sent home if possible
Personal Medical Equipment

We recommend you bring any equipment you use at home

For example: Walking aids, insulin pens, CPAP machines

Please ensure they are clearly labeled with your name

Please be advised that the Hospital is not responsible for maintaining your personal equipment
Cairns Hospital has a Non Smoking Policy and there is no smoking permitted within 5 metres of Hospital Grounds.

Please advise Nursing Staff if you smoke so they can provide supportive alternative treatment options during your stay if you would like.

You may like to consider the Quit line hotline: 1307848
During your stay

During your stay you will have various members of staff involved with different aspects of your care.

You will be reviewed daily by our Medical and Nursing team to closely monitor your progress.
During your stay

These teams consist of:

• Your Consultant
• Registrar
• Medical Officer/ Intern
• Nursing Team Leader
• Clinical Facilitator
• Clinical Nurse Consultant
• Oncology Services
• Allied Health Services
• Nurse looking after you
During your stay

You will also have access to other teams and Allied Health if required. This includes:

• Social Worker
• Physiotherapist
• Dietician
• Occupational Therapist
• Speech Therapist
• Other specialist Nursing Teams
Doctor’s Ward Rounds

Ward Round times may change due to the demand on the Medical Teams. Most Medical Teams are on the unit from 8am until 4:30pm.

We understand your urgency to see a Doctor. We appreciate your patience as Doctors may have patients in other units requiring urgent medical treatment.
Nurse Rounding

The Nurse looking after you on each shift will check on you every hour during the day and second hourly at night and ask a series of questions.

These will include whether you have pain, need to go to the toilet, need repositioning and check you have everything you need is within reach.

They will not wake you if you do not require any treatment.
Clinical handover

Various staff will be involved in your care at different points in time. Clinical handover is the sharing of information about you, between on-duty staff and the staff who will take over your care. Performing the clinical handover at your bedside involves you in your own care and allows staff to discuss and ensure your care continues as planned.

For more information, please read the clinical handover brochure in the General Information application.
Discharge Planning

Please discuss every day with your doctors when you can go home. Ask them for your E.D.D (Estimated Date of Discharge). Please consider how you get home and who will be able to support you during your recovery.

The leaving time is **10am on your day of discharge.** You may be transferred to the Transit Lounge to finalise your arrangements.

You are responsible for making your own travel arrangement home. However, during your stay, staff will discuss your discharge requirements and any support you may require when you get home (e.g. Blue Nurses, Home Help).

Please don’t hesitate to ask your Nurse if you have any concerns about your discharge so these can be sorted for you early.
Transferring to another hospital

If you live closer to another Hospital: Babinda, Innisfail, Tully, Atherton, Mareeba, Herberton or Mossman, we will try to get you closer to home to complete your recovery.
Transferring to another hospital

When the Hospital experiences high numbers of admissions, it may be necessary for you to be transferred to another Hospital within our Health Service even if you are not from that area.
Transferring to another hospital

Patients who may be required to be transferred are those awaiting residential/age care placement or who no longer require any specialist intervention.
Entertainment services

TV and Radio are available on this terminal. Television is a paid service.

Just click on the Entertainment Services Icon on the Home Screen.

You can pay by credit card on the terminal or by voucher. Vouchers are available from D’Café, or from the Hospital Foundation Shopping Trolley.

The Hospital is not responsible for the loss or damage of personal devices.
Interactive Patient Station (IPS) Terms of Use

Whilst using this station, I will conduct myself in an appropriate matter and not access information, video or images that might be deemed inappropriate by staff or other patients.

Clinical staff will be required and have priority to use this station as part of your ongoing care to access and document your clinical information.

If you have any questions about any aspect of your care, please don’t hesitate to ask.
Thank you for taking the time to watch this presentation.

Please press the home button to return to the home screen.
Information Applications

• The General Information application on the home screen provides a link to the introductory video that will give the patient/caregiver a quick overview of how to use the Oneview system at any time. Patients can also revisit the ward information presentation.

• It also contains pertinent information required for Bed Side Audit and accreditation such as The Australian health care charter of right, Ryan's Rule, Pressure injury prevention etc.

• We will have access to reporting so we can monitor how often patients are access this information and implement any quality improvement actions if needed.

• Patient education is also available. We have started off with a basic platform of slide shows and video clips, however will ink to websites such as the Heart Foundation and Leukemia Foundation so patient have access to current up-to-date information at all times.
Information Applications

- Introductory Video
- Ward Information - Cardiac Services
- Australian Charter of Healthcare Rights
- Clinical Handover
- Pressure Injury Prevention - Keep Bedsores at Bay
- Falls Prevention - Stay on Your Feet
- Ryan's Rule - Adult
- Blood clots - reducing your risk
- Hospital Information Booklet
Personalised Settings Application

Patients:

• can customise their personal profile, upload a profile picture and change their screensaver to make their patient experience more individual

• have access to Multi lingual interface and translation

• can set personal goals they wish to achieve to aid their recovery in conjunction with allied health and the rest of their medical team. These goals could include reading allocated education content from the education application and performing exercises. This is a great example of patient empowerment in the digital world

• This information will be retained on the data base.
Personalised Settings Application
Clinical Applications

• The IPS provides a platform in which clinical applications can be delivered at the bed side using secure card access.
• This Point of care access not only allows nurses and doctors to spend more time at the bedside engaging with patients but also empowers patients to be more involved with their care.
• Patients will be able to view medical imaging at the bedside so they can better understand their treatment and medical conditions.
• Nurses will be able to update patient information at the bedside.
• Allied health can adjust patient diets at the bedside, involving patients in these decisions.

The main benefits of having clinical applications at the bedside is that it releases more time to care for the patients.
Clinical Applications
Entertainment Applications

• Television and Radio are currently available on the IPS terminals at the bedside.

• In the near future we can include internet access, games, on-demand movies all to improve the patient experience.

• The use of the camera and Skype also will improve patient discharge planning by having the ability to facilitate family meetings at the bedside.
Entertainment Application
Implementation - Challenges

• There were many unforeseen challenges involved in this body of work which delayed the GO-Live date
• Unexpected Network Infrastructure requirements
• Multiple firewall and active directory issues
• Issues with the Integration of multiple programs from multiple vendors around the world working together as a team
• Smartcards to give clinicians access to clinical applications
• Lack of resourcing and expertise
Conclusion

• While ieMr improves care and lowers cost, it does little to address the critical aspects of patient centred care: education, satisfaction and empowerment

• Point of care devices guides patients through their hospital stay, providing access to the people and resources they need to have an optimal care experience
Conclusion

• Consumers are empowered at the bedside
• IPS Solution is an important tool to complement ieMr and other Hospital IT Systems, but more importantly delivering patient applications whose delivery at the point of care ensures the completion of service and quality of care to our patients
“Actually, it’s surprising that it has taken us this long to focus on patient engagement because the results we have thus far are nothing short of astounding. If patient engagement were a drug, it would be the blockbuster drug of the century and malpractice not to use it.”

Leonard Kish, Forbes, August 28th, 2012