REHAB DAILY WORKFLOW

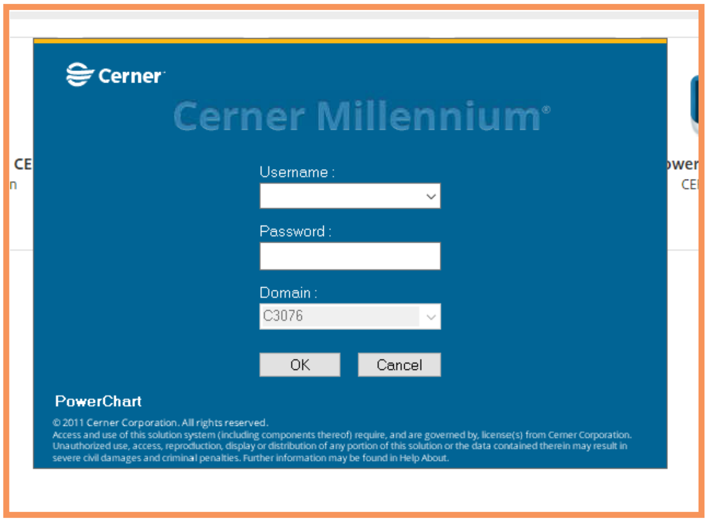
HOSPITAL INFORMATION SYSTEM (HIS)

INPATIENT INTERPROFESSIONAL REHAB – OCCUPATIONAL THERAPIST, PHYSIOTHERAPIST, SPEECH LANGUAGE PATHOLOGIST, RECREATION THERAPIST, REHAB ASSISTANT, REC THERAPY ASSISTANT, & COMMUNICATIVE DISORDERS ASSISTANT

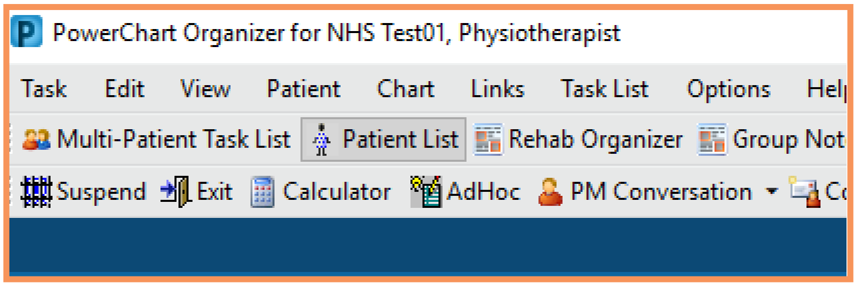
This Tip Sheet is designed to help rehabilitation staff understand how to navigate their day using the new HIS system.

Daily Workflow for Rehab

1. **Log In – Access PowerChart with most current credentials or username/password**



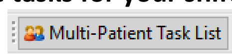
2. **If required, navigate to Patient List to create patient lists**



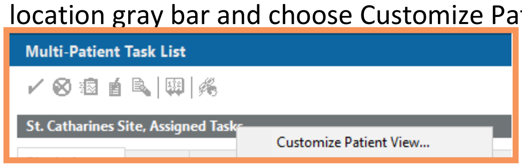
Use the Patient List Creation and Maintenance Tip Sheet to complete this as required.

***Note:** If needed, you can print a generic patient list from the Patient List view to bring to medical rounds and meetings. The layout of this print-off includes space between patients, making it easy to jot down notes. Please note that therapy orders are not included in the generic patient list view.

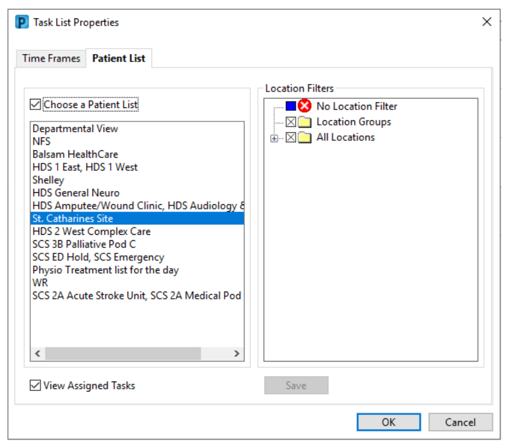
3. Accessing the Multi-Patient Task List (MPTL) to see tasks for your shift

a. Navigate to the MPTL to view patient tasks. 

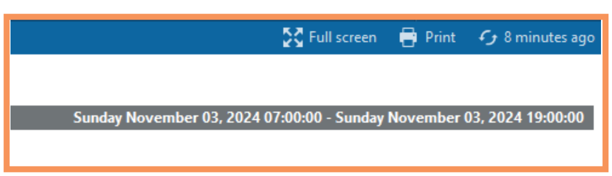
b. Ensure to use the correct patient list view for your shift. To select the correct unit/location and to pull from your patient list creations, right-click on the MPTL's location gray bar and choose Customize Patient View.



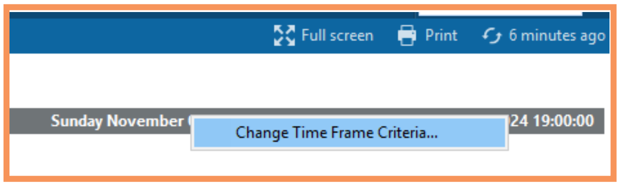
c. Choose the correct patient list view from the Task List Properties window. Ensure the ***Choose a Patient List*** box is checked and that ***No Location Filter*** box is blue. If it isn't, click it to highlight it blue. Click OK when done.

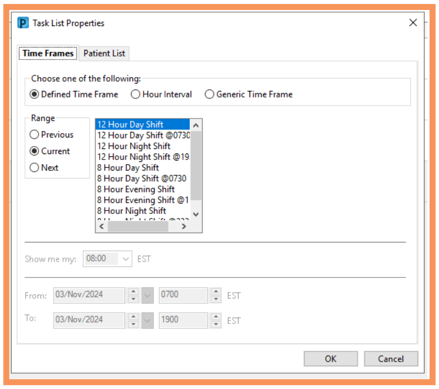


d. Verify Date and Shift. Confirm that the correct day and shift are displayed, by locating the gray bar with dates on the right of the MPTL.



It should reflect the current shift you are working. If not, right-click the gray bar with date and time, and click Change Time Frame Criteria.

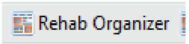




Ensure to choose Defined Time Frame, Range of Current and 12 Hour Day Shift. Click OK when done.

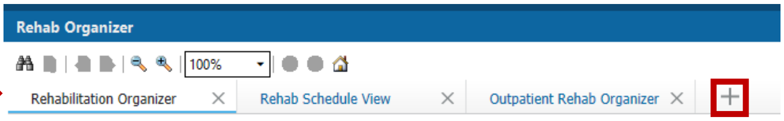
e. Click to Refresh the screen to ensure the most up-to-date information is displaying in the MPTL.

4. Accessing the Rehab Organizer as a viewpoint

a. Access Rehab Organizer from the Task Toolbar 

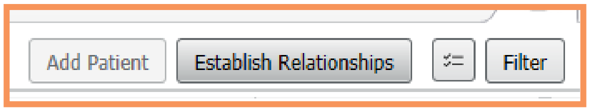
b. Ensure the Mpage view includes Rehab Organizer. It should open by default. If it isn't there, click the + on the MPages and choose Rehab Organizer.

MPages



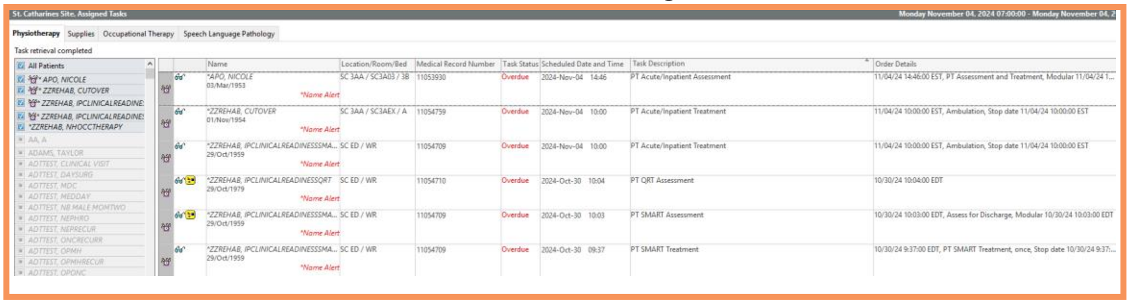
c. Ensure the correct patient list view is chosen. To change the patient list view, click the down arrow next to the patient list and select the desired view. If the patient list you're looking for isn't available, click the List Maintenance button to choose from your saved lists. 

*Note: In order to see the ***Activity Orders***, ***Tasks***, ***Comments*** columns of the Rehab Organizer, you MUST **Establish Relationships**. Please note, establishing a relationship with patients in this viewpoint, is NOT the same as reviewing a patient's chart for the purposes of patient confidentiality.



5. **Reviewing the MPTL and Rehab Organizer for today's tasks**
   a. Review today's task list for new consult orders, overdue consult orders, and any new treatment or overdue treatment documentation tasking.

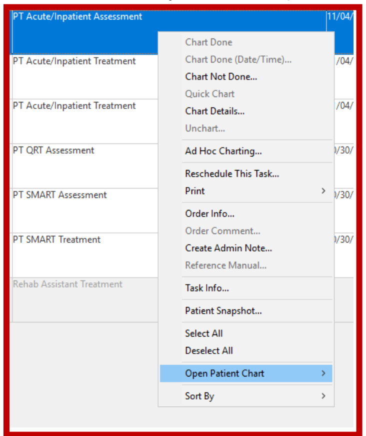
MPTL



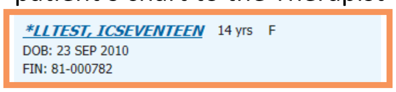
   b. Prioritize your patient caseload according to those tasks that are nearing the 7-day overdue mark. These tasks are at risk of disappearing off of the task list.
   c. You can organize your task description list in the MPTL, in alphabetical order by clicking on the Task Description column. This may help you visualize all new consult order tasking, treatment tasking, and other tasked PowerForms easier.

6. Attend Medical Rounds and meetings, and continue to communicate with other rehab staff and support staff to ensure appropriate prioritizing of patient care and caseload.

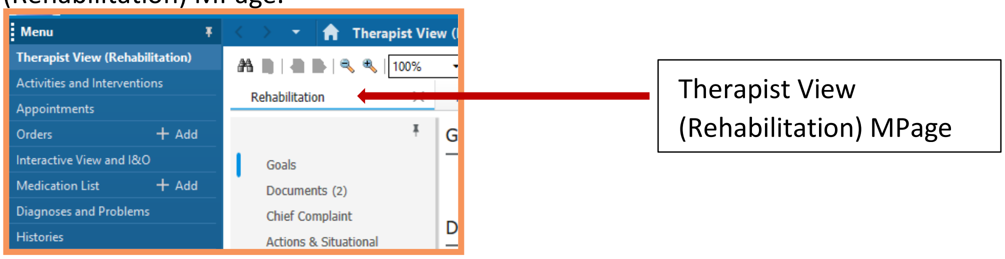
7. **Reviewing the patient's chart**
   a. To review the patient's chart:
      i. From MPTL viewpoint, right-click the task, choose Open Patient Chart, and choose Therapist View (Rehabilitation) MPage.



      ii. From Rehab Organizer, click the patient's name hyperlink; this will open the patient's chart to the Therapist View (Rehabilitation) MPage by default.



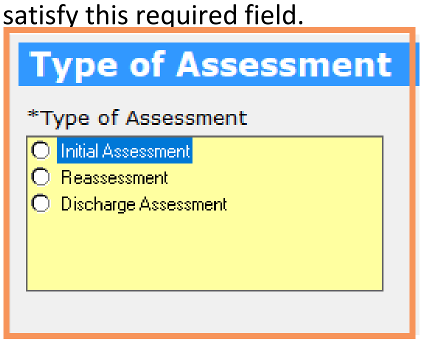
   b. Review all patient information first by navigating through the Therapist View (Rehabilitation) MPage.



   c. You can review any items along the blue Table of Contents.
   d. Review Orders by clicking on the ***Orders*** tab.
   e. Review any treatment flowsheets, nursing notes, labs, diagnostics through ***Results Review***.
   f. Review any published documentation through the ***Documentation*** tab.
   g. Click on ***Clinical Connect*** to review any out of Region medical documentation.
   h. Review booked appointments in the ***Appointments*** tab on the blue Table of Contents.
   ***Note:** The Appointments tab will include any VFSAs scheduled for the patient, outpatient schedules, etc. Anyone utilizing Rehab Organizer can review patient rehab related schedules through the Rehab Schedule View mPage; ensure the appropriate clinical area or unit is chosen.

8. Assessing a patient and retrieving initial assessment documention (Therapists)

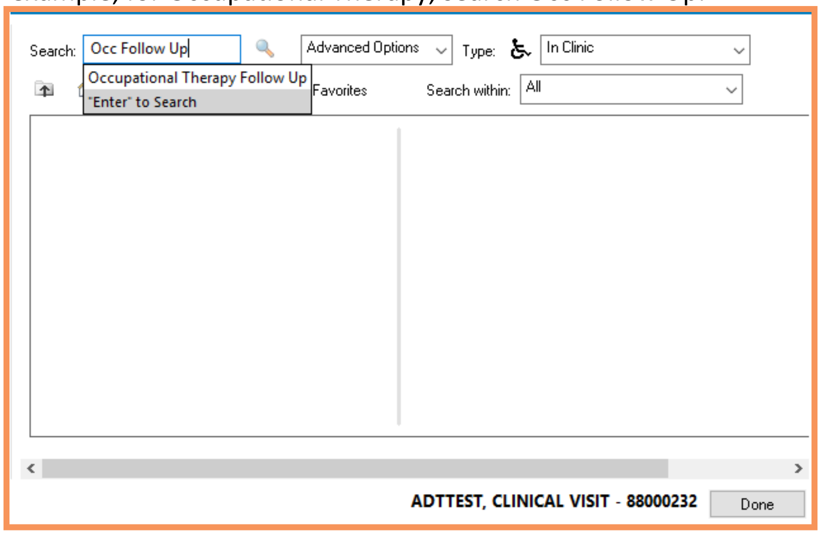
a. If the patient is appropriate for their initial assessment, be sure to obtain consent.
b. Once the initial assessment is complete, navigate back to the MPTL or Rehab Organizer to retrieve your documentation.
c. MPTL:
   i. Locate the task in the task list and double-click to open the Acute/Inpatient Assessment PowerForm.
d. Rehab Organizer:
   i. Locate the patient and click within the ***Tasks*** column. Click the Document tab next to the appropriate PowerForm.
e. Complete the required field, titled ***Type of Assessment**. Choose *Initial Assessment* to satisfy this required field.



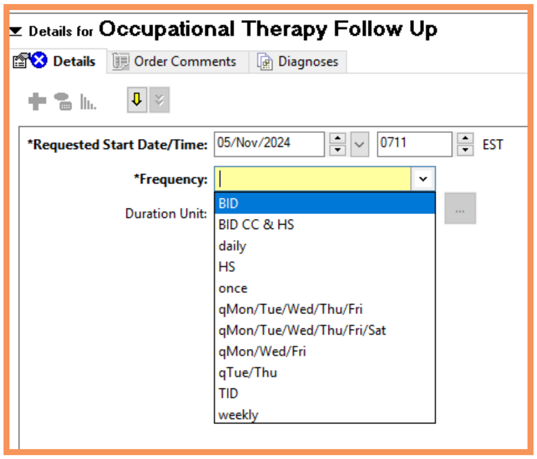
f. Complete any areas within the PowerForm. The *Home Environment*, *Preadmission Status* sections have Last Charted Value (LCV) functionality.
*Note: If another therapist, from a different discipline completed and signed their assessment PowerForm before you begin your PowerForm, you may notice that some fields are pre-populated with the last recorded values. You can choose to add new data or modify any existing information to ensure it accurately reflects updated or corrected details.
g. **PTs and OTs** – complete any flowsheets within the Review/Treatments section of your PowerForm, as well as the PT Instructions and OT Instructions sections for Rehab Assistant information.
h. **SLPs** – complete any Short-Term Goals in your PowerForm to help guide future treatment for CDAs.
i. Once you've completed all areas in the PowerForm, SIGN it. 
j. Ensure your initial assessment PowerForm is published by navigating to the blue Table of Contents on the patient's chart, and clicking on Documentation.

9. **Follow Up Orders – for ongoing treatment documentation tasking (Therapists)**
    a. If you wish to provide ongoing treatment for a patient after your initial assessment, navigate to the Orders tab on the blue Table of Contents in the patient's chart.
    b. Click the +Add icon. 

    c. Search the Follow Up Order for your discipline, in the search window. Click Done. For example, for Occupational Therapy, search Occ Follow Up.



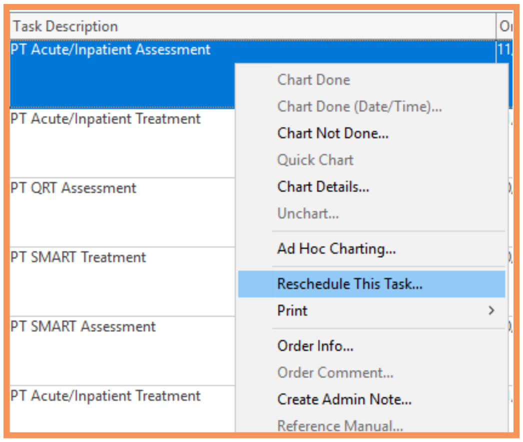
    d. Complete order details, including the required fields of *Frequency and *Treatment. The frequency should be chosen based on documentation frequency, and not how often a patient should receive treatment. The treatment is a free text box. You can set a Duration and Duration Unit as desired.



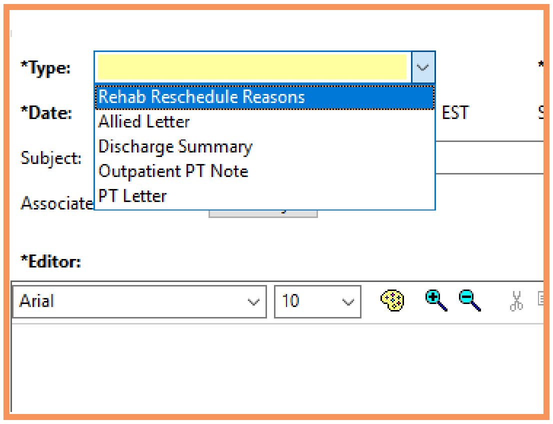
e. Click SIGN to create the Order.
*Note: If you are uncertain whether you will follow up with a patient, please refrain from placing a Follow Up Order at this time. You can always return to the Orders section of the patient's chart to add a Follow Up Order at any time. Additionally, if you work on an inpatient unit that schedules patients using the Scheduling Appointment Book feature, there is no need to use the Follow Up Order.

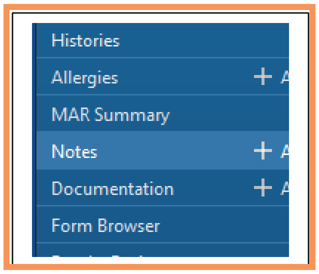
10. Reschedule This Task – if you plan to return to the patient at a later time

a. If the patient is inappropriate or if the patient does not consent to participate in the Initial Assessment, you will need to use the ***Reschedule This Task*** feature from the MPTL.



b. Remember to create the Rehab Reschedule Reason Note, from the Notes tab on the patient's blue Table of Contents.

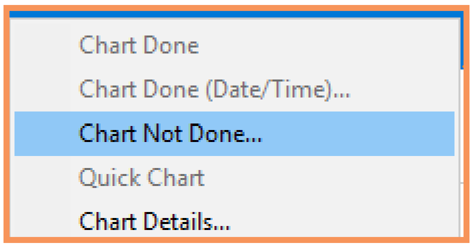




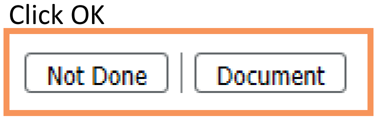
Access the Rehab Reschedule Reasons note in the Notes section on the blue Table of Contents menu

c. If you did not have time to see a patient, you may reschedule the task to ensure it does not risk disappearing from the task list. However, you do **NOT** need to create a Rehab Reschedule Reason Note if you are rescheduling due to time constraints.
*Note: You **CANNOT** reschedule a task from the Rehab Organizer. Once you reschedule a task from the MPTL, both the MPTL and the Rehab Organizer viewpoints will display the rescheduled task.

11. **Chart Not Done, Not Done Features – if you <u>DO NOT</u> plan to return to the patient <u>and</u> the tasking of the PowerForm is no longer required**
    a. ***MPTL:***
        i. Right-click the task from the MPTL, and choose Chart Not Done;
        ii. Complete the prompts when the Not Done window opens; and
        iii. Click OK



    b. ***Rehab Organizer:***
        i. Locate the task on the Rehab Organizer from the Tasks column;
        ii. Click the Not Done button next to the task you wish to eliminate;
        iii. Complete the prompts when the Not Done window opens; and
        iv. Click OK



12. **Navigate back to MPTL or Rehab Organizer to retrieve <u>other</u> Consult Orders. Repeat steps 7 through 11.**

13. **Treatment Tasking – Treat patients and document from the task on the task list (Therapists)**
    a. Therapists can retrieve the treatment documentation from the MPTL or Rehab Organizer. If the documentation is not necessary, feel free to utilize the *Chart Not Done* or *Not Done* features to remove the task. Additionally, if you wish to access the treatment PowerForm at a later time, you can take advantage of the *Reschedule This Task* feature on the MPTL.
    b. For therapists working on units with a schedule, the treatment PowerForms can be accessed from the **AdHoc** folders.
    c. Rehab Assistants, Rec Therapy Assistants, and Communicative Disorders Assistants should obtain their treatment PowerForms from their **AdHoc** folders, following predetermined treatment plans established with the therapist.

14. **Return to the MPTL or Rehab Organizer frequently throughout your shift to monitor your tasks**
    a. You'll see that tasks start to disappear as you complete them, indicating that you've fulfilled your responsibilities for your shift.

    ***Note:** You can also complete **Steps 10 and 11** to manage your task list and prepare for your next shift or to assist colleagues taking over the caseload.

15. **Exit from PowerChart**
    a. All of your customizations, including patient lists are saved within HIS if you exit correctly. Use the Exit door tab on the task toolbar. 

16. **Enter workload into GRASP/EMERALD**

Reminders and Key Activities

1. You may PLACE orders at any time on a patient if you have access to those orders, including Diet Orders, home care, CDA Screening, etc.
2. You may PROPOSE orders at any time on a patient, including Video Fluoroscopic Swallow Assessment, Bed Speciality Surface, Interprofessional Consults, etc.
3. You should be REFRESHING your screen at any time and frequently to get the most up-to-date information on the patient's chart.
4. You will need to use the AdHoc feature to manually choose PowerForms that are NOT TASKED. This includes:
    a. Rehab Assistants, Rec Therapy Assistants, and Communicative Disorders Assistants – treatment documentation is NOT TASKED based on the therapists' Follow Up Orders.
    b. Discharge Documentation is NOT TASKED
        i. Discharge Summary is available for OT, PT, & SLP
        ii. A more in-depth discharge document can be obtained by AdHoc'ing the Initial Assessment PowerForm, and qualifying it as a Discharge Assessment in the *Type of Assessment field
5. Communication should continue among rehab staff and other members of the care team.
6. Therapists can retrieve tasks early or later – use your judgement based on the tasks you have available to you for the current shift.
7. Therapists must document as much as possible from the task list, as this will provide visibility to other providers and prescribers on the patient's care team.
8. The Consult Order is **linked** to the task. When you complete an initial assessment task from the MPTL or Rehab Organizer, the Consult Order status will flip to "Completed".
9. Reschedule a consult order task, if the patient isn't appropriate and/or did not consent, and you wish to return to the patient at a later time. Remember to create a REHAB RESCHEDULE REASON Note.
10. Make sure to retrieve all saved documentation to complete and SIGN it, so that is becomes visible in the patient's chart. The care team will not have access to any saved documentation until it is published.
11. You are NEVER erasing any data when you are writing over any Last Charted Value entries. The patient's information will only continue to grow, each time new information is entered and published.
12. Therapy students have visibility to all therapy tasking, and can function the same as their preceptors. Remember to AUTHENTICATE their documentation as soon as possible.
13. Exit out the door EVERY time you leave PowerChart.