



InPatients

Completing Assessments, Nursing Tasks

Business Rules

Initial Risk Assessment 1 to be completed and Signed by Registered Nurse within 6 Hours.

Initial Risk Assessment 2 to be completed and Signed by Registered Nurse within 24 hours.

Expected Discharge Date to be reviewed (and updated if required) every day.

Unregistered Staff must inform a Registered nurse when they have completed an assessment so that they can be reviewed and signed promptly (and the nursing actions made available).

Support available:

Please contact your local Champion User

Service Desk:

Tel: 01225 82 5444

Email: ruh-tr.ITServiceDesk@nhs.net





Bringing it all together

Completing Assessments

1 Completing Initial Assessment Risks Forms – From the Activity List

Scenario: The following assessment will now be completed on the system
Initial Risk Assessment (IRA) Part 1. The principle applies to IRA 2 as well.


Step 1. Within Powerchart  **select Patient Access List**  **Patient Access List** .

Note: Current or overdue nursing assessments for a patient are indicated by the  icon. The  icon indicates outstanding clinician tasks (e.g. VTE).

IRA Part 1 must be completed within **6 hours** of admission & Part 2 within **24 hours**.



VTE's must be completed by a Dr within 6 hours of admission.

Step 2. Double Click on the **Patient Name** to open the **Patient Record**.

Step 3. Click on  **Activity List** **Activity List** tab from the Side Bar Menu.

Step 4. Click on the  **PowerForm** tab within the Activity List screen to list current assessments .

Step 5. Double-click on the **Assessment** to be completed (e.g. Initial Risk Assessment Part 1). The system opens the required Assessment PowerForm.

Note: If the Assessment has multiple forms these will be listed on the left hand side of the screen. Select a form by clicking on its name.
The  icon indicates that not all the mandatory fields in a form are complete, while the  icon indicates that they are all complete. All mandatory fields must be complete before the assessment form can be signed.


Note: *Red writing within a form indicates that the system will automatically generate an action (e.g. a nursing task, order a repeat assessment, request a referral etc.)*

Completing Assessments

Blue writing provides further guidance on actions that may be required


Radio boxes (e.g. No) are used where users must choose between a number of options


Check boxes (e.g. Deaf) are used where the users may select any number of the options

The  icon indicates that the information has been “pulled” through from other forms

To access available reference information (eg PURA and MUST assessments) right click on field and select “reference Text”



Step 6. Complete all **mandatory (yellow) fields** (and any other non-mandatory fields as appropriate).


Step 7. To **save an assessment** click the save  icon. The status on the Activity List will change from **pending (or overdue)** to **in process**.

Step 8. To **sign an assessment** click the sign icon  (top lhs of screen). **Status** will now be **complete**.

Note: Only Registered nurses can sign assessments. Un-registered nurses can complete and save assessments but cannot sign them.

1 Authorising a Saved Assessment (Registered Nurses Only)

Step 1. Within Patient Record click  **Activity List**, then click  **PowerForm** tab. Double click on required assessment. Note the status will be “**in process**”.

Step 2. Review (and amend if required) assessment and use sign icon  to sign the document .


1 Completing Patient Status Assessment

Note: Patient Status Assessment is used to maintain the **Expected Discharge Date & Discharge Status** for all patients and should be updated daily (see 5th Section of PAL).



Patient Status & Viewing Assess

2 Patient Status

Step 1. To **Create Patient Status Assessment**, within the Patients Record Click on  **Activity List tab** from the Side Bar Menu.


Step 2. Click  PowerForm tab.

Step 3. If Task Status for Patient Status is In Process or Complete go to section 4 below (as Patient Status already created).

Step 4. Double click on **Patient Status**. The assessment will be opened by the system.

Step 5. Update first screen as required (e.g. Expected Discharge date and Ward Comments).


Note: When adding comments, always put latest comment on first line and use format dd/mm initials and comment

Step 6. Use sign icon  to sign the document (and to save the amendments).

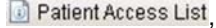
Result: The amendments can be viewed via the PAL.

2 Updating Patient Status

Step 1. To **update Patient Status** select the  Documentation tab from the side bar menu.

Step 2. Double click on Patient status to open assessment, update as required and sign .

2 Viewing Completed Assessments

Step 1. Select Patient on the PAL .

Step 2. Select the  **Documentation tab** from the side bar menu.


Step 3. Click on the **required assessment** from the list of documents and it will be displayed in the right hand side of the screen.

Step 4. Select the **Print** icon to print.

Adhoc Assess & Nursing Tasks

3 Adhoc Assessments



Note: Assessments can also be accessed through the adhoc function. This will be used for assessments that are not used for all patients e.g. **Transfer Of Care**, or when assessment such as MUST and PURA need to be carried out sooner or later than planned.

Step 1. In the Patient's record select  **AdHoc adhoc icon** from the top bar menu.


Step 2. Select the appropriate **folder** (e.g. Transfer and Discharge for Transfer of Care).

Step 3. Click on required assessment. Complete assessment as outlined in Section 1 above.

3 Recording Nursing Tasks as complete

Step 1. Within Powerchart  select Patient Access List . Double Click on the Patient's Name to open the **Patient Record**.



Step 2. Click on  **Activity List tab** from the Side Bar Menu.

Step 3. Click on the  **Nursing Action tab** within the **Activity List** screen. The system lists all outstanding nursing tasks. These will be completed on paper but recorded as complete on the system.

3 Task Done

Step 1. To record a **task as done**, **Right Click** on the required **task** (e.g. Infection Care plan). From the context menu select **Record Done**, and click **OK**.

3 Task Not Done



Step 1. To record a **Task as Not Done** (e.g. as not clinically appropriate), **Right Click** on the required **task**. From the context menu select **Record Not Done**. In the **Reason Not Done field** click the  icon to display choice of reasons. Enter additional comments in the **Comments Pane**. Click the  sign icon.


Note: For a guide to the icons used in the first column of the Activity List tabs, click on Options from the main menu and select Task at a Glance Legend.

Referrals


4 Referring Patient to Other Services

Note: Millennium will be used to raise referrals including
- Dietician, Tissue Viability Nurse
- SALT, - DATE
- Occupational Therapy, - Physiotherapy
- CHC & CHC Fast Track, - Section 2,3,5
- Health Rehab, Nursing Needs Assessment (CM7)
All referrals following the same process with the exception of Health Rehab and CM7 (see below).


Step 1. To create a new Referral, open Patient's record (from the PAL ) **Patient Access List**), select the  **Requests Request tab** from the side bar menu.

Step 2. Select  **Add**. Enter "refer" (select "starts with" search). A list of referrals will be displayed.

Step 3. Click on the required referral. The **Order Entry Form (OEF)** will appear at the bottom of the screen.

Step 4. In the OEF screen the required fields are listed on the LHS and you record the answers on the RHS. Mandatory field are in **yellow**. To navigate between mandatory fields press the  icon.

Step 5. Complete all mandatories and any non-mandatories required.

Step 6. When complete sign the OEF using the  icon.

Step 7. Refresh the screen .

Note: Completing the refresh is an important step in the process and must be done.

Result: The request has been order (status now shows as Ordered).

Note: When referring to Health Rehab on Nursing Needs Assessment, follow steps 1 to 3, then before the OEF is displayed, the system will redirect you to complete the relevant assessment.