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HOW WILL MY ROLE CHANGE?

A snapshot into the new day-to-day role of a

ALLIED TEAM

SOCIAL WORK, PT, OT, SLP, REC, RD, RT, BT

WHERE WE ARE NOW...	SAFER. BETTER. SMARTER.
Patients tell their story over and over again.	The creation of a longitudinal chart where information (e.g. allergies, home meds, a patient's medical history, etc.) is accessible visit to visit and across multiple sites. Allied staff will be able to contribute to the history section in Expanse.
Team members receive referrals in a variety of ways and have their own methods for assigning work and tracking the patient's care team.	All allied referrals are ordered and appear on the teams' new referrals tracker. Signing up for the patient adds them to your list, making hand over and coverage easier to manage.
Kardex is only accessible at the nursing station and the information on the Kardex is not always reliable and up-to-date.	Expanse has a snapshot view that summarizes the patient's care. It's like a self-transcribing Kardex that automatically updates in real time as documentation occurs.
Important patient information is scattered throughout the paper chart and the electronic chart. Searching through paper medical records and online content is time consuming and can be confusing.	Centralized multidisciplinary care plans, multiple people can access the record at the same time, improved and customized status boards, and surveillance tools for better care coordination. All clinical documentation is online.
Handwritten orders are sometimes illegible and prone to transcription error.	Orders are entered directly by the provider and are legible.
Workload is documented in Meditech on a variety of workload screens and automatically posts to the proper finance account.	The patient workload screens have been simplified. Generic 'workload' patients exist in Expanse to document non-patient workload.
The physician guides the discharge process. Information on discharge is scattered throughout the chart.	Universal discharge: everyone on the care team is contributing to the discharge plan, creating a multidisciplinary approach that can start anytime during the patient's admission. A paper patient discharge summary is generated with standard design and predictable information.
People are creating personal reminders and to-do lists to stay on track.	Standardized plans of care organize the team work. Each person has a personal work list tracking their patient roster.

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