

# Top 10 at Noon

Date: 06.20.2022



Time: 12:00 PM

GTM -

Facilitator: Command Center Captain

## Critical Issues Update (Data current as of 12:00 PM 06/20/2022)

### 1. Pyxis Override

Issue to Mitigate	<ul style="list-style-type: none"><li>NB remains on full override</li><li>RAH &amp; HAM have a few on override<ul style="list-style-type: none"><li>Issues – changes in dept names</li><li>Medication ID mismatch</li><li>Some orders not crossing</li></ul></li><li>*While on Override – Pyxis sends medication to Epic and creates second line on MAR</li></ul>
Mitigation Plan	<ul style="list-style-type: none"><li>Work on Medication ID mismatch</li><li>Align department names</li><li>Validate and fix any medications expected to come over to Pyxis.</li><li>Will block creation of second med on MAR at NB (gathering full list of meds) and educate nursing on reconciliation process after Pyxis off override</li><li>Full assessment of current issue taking place to come up with target date of completion</li></ul>
Update	<ul style="list-style-type: none"><li>Roll out going very well. 4- 9 Tower Complete. RCU Complete</li><li>For 6/20/2022 - 6 North, SDC Medical are coming off Override with the team present</li></ul>

### 2. Heparin & Insulin Protocol

Issue to Mitigate	Change in process related to the management of Heparin/ Insulin protocols- heritage fully automated, Epic requires user management, additional due to a ISMP safety recommendation the system changed to a units/kg/hour ordering practice
Mitigation Plan	<ul style="list-style-type: none"><li>Nursing Informatics running reports of all patients on Heparin and Insulin protocols – working with nurses when changes are being made to drip to reinforce process – including the manual ordering of labs</li></ul>
Update	<ul style="list-style-type: none"><li>Nursing Informatics continues to monitor and round with nursing to adjust drips and enter follow up PTT for heparin protocol. No changes or issues to report (6/20)</li></ul>

3. Pharmacy Dispense Scanning Mismatch	
Issue to Mitigate	Report issues (1600 error codes) for IV room dispense errors
Mitigation Plan	<ul style="list-style-type: none"> <li>Willow team, Epic and NBR pharmacy validated together and documented several different issues that are already in flight for correction.</li> <li>Huddle daily for communication of correction completion and additional reports of scanning issues – NBR pharmacy, Epic and Willow Team</li> </ul>
Update	<ul style="list-style-type: none"> <li>The Willow Team made configuration changes to shut off the wrong package warnings and completed cross product scan build on Monday</li> <li>Compiled a list of all know issues, prioritization, and review at NBR daily pharmacy huddle</li> <li>Finalized daily dispense prep alert report, reviewed with pharmacy leadership</li> <li>Willow completed Cross Scanning</li> <li>Willow now working on Cross concentration and alert report making adjustments/build for more appropriate level warnings/alert - <i>In Process</i></li> </ul>
4. Independent Practice Epic Access	
Issue to Mitigate	<ul style="list-style-type: none"> <li>Independent physician practice staff need CAMs created for Epic Hyperspace access</li> <li>Medical Staff Offices do not have enough bandwidth to collect required information on staff</li> </ul>
Mitigation Plan	<ul style="list-style-type: none"> <li>Epic Together team will take ownership to call practices and collect data from private practice staff</li> <li>Dr. O'Mahony will help coordinate a communication from the CMOs to practices informing them of this effort using the existing communication channels</li> </ul>
Update	<ul style="list-style-type: none"> <li>Consolidated and reconciled lists of practice staff</li> <li>Epic Together team members have been assigned to support the process, including both gathering necessary information and validating the correct Epic access level</li> <li>Communication to Independent Offices – validated process, expectations, loop closure and FAQ <ul style="list-style-type: none"> <li>Distributed Friday (6/17)</li> </ul> </li> <li>Provisioning Office Staff <ul style="list-style-type: none"> <li>First pass completed – those with complete information already in progress</li> <li>Gathering further information from practices continuing on a daily basis</li> </ul> </li> </ul>

5. OR Charge Logs	
Issue to Mitigate	<ul style="list-style-type: none"> <li>OR pending revenue is \$17.1M (6/20) <ul style="list-style-type: none"> <li>\$14.4M (6/17) \$13.3M (6/16)</li> </ul> </li> </ul>
Mitigation Plan	<ul style="list-style-type: none"> <li>Work with Charge Posters to address unposted surgical logs</li> </ul>
Update	<ul style="list-style-type: none"> <li>Revenue status was sent to the NBUH site leads for awareness (Cheryl Myers, Franck Nelson, and Jim Alexander)</li> <li>Keisha Owens worked with operations to coordinate Epic support <ul style="list-style-type: none"> <li>Analysts worked with charge posters at-the-elbow on 6/15 &amp; 6/16</li> <li>Daily Charge Poster Check-ins are scheduled</li> <li>Most of the support is focused on how to reconcile supply charges, communication back to clinical staff, Clinical documentation workflows, and utilization of Epic reports</li> </ul> </li> <li>Total Revenue posting on 6/17 was \$1.9M which is below the expected baseline of \$2M <ul style="list-style-type: none"> <li>6/16 was \$1.5M</li> </ul> </li> <li>NBR Main OR has posted 232 of 609 logs (38.10% complete) and is projecting to be caught up by the end of the week</li> </ul>