QA Nurse

QA Nurse Access

Clicking the QA/Infection Preventionist button from the Main Access menu will load the below access screen.

QA Nurse	Falls	Infections	Pain	Bx/Mood	Dose Reduction	
Main Menu	Chart Fall Investigation	Chart Infection	Chart Pain Assess.	Behavior Monitoring Plan	View Antipsychotic Med Hx	Chart GDR Outcomes
		Employee Health		View Targeted Bx Charting	Chart GDR Notes	View GDR Notes
		Infection Preventionist				
	Skin	Weights	Graphs/ Reports	QAPI		
	Chart Wound Assess.	View Weights	Graphs/ Reports	QAPI Falls		
				QAPI Infection		
				QAPI Psych		
				QAPI Employee Health Impact		

Charting

1. Click onto a button underneath the column you are working to address.
2. On the Name Selection screen, select a name, click **OK**.
3. A two-way split screen will display. The top portion is the Write screen which is where the user may develop their note. The bottom portion is a view screen which displays potentially useful documentation as the user completes their charting.
4. Work from left to right, clicking onto relevant items, and free type where necessary.
5. Click **Sign** once completed with the entry.

Falls

When the user clicks onto **Chart Fall Investigation**, they will be presented with a topic located in the Quality Assurance section. This topic is only available to those who should be documenting the investigation as to why a fall occurred. Specific details such as environmental factors, equipment issues, as well as a resident interview are all located within this topic.

Infections

Chart Infection

Utilize this topic to chart all infection data. This will populate into an Infection Control Log. The origin, site, unit, pathogen/type, treatments, and risk factors are all areas that will be addressed within this topic. This topic is in the Quality Assurance section so may not be accessed by surveyors. The DATE OF INFECTION is a required word within this topic. Setup a FOLLOW UP REMINDER if you would like to be reminded to complete a follow-up note as the antibiotic course or other treatments come to an end.

Append onto the original entry to resolve the infection so it no longer appears on active infections lists. Utilize the words OUTCOME and DATE RESOLVED to knock the infection off the active list.

Employee Health

Utilize this topic to chart all employee health data related to infections and/or for COVID-19 symptom screening. To ensure proper utilization of this topic, all employees must be in ECS as a provider. This will allow you to chart on them as you would a resident.

Infection Preventionist

This button presents you with an entire screen built solely for the Infection Preventionist. There is a specific handout which details how to utilize this module.

Pain

When the user clicks onto **Chart Pain Assessment**, they will be presented with a topic located in the Nurse Charting section. This topic gives the user the pain assessment directly from the MDS, with some additional verbiage where needed.

Behavior/Mood

Behavior Monitoring Plan

Utilize this topic to document a resident's specific targeted behavior plan. Each resident may have up to 10 different behaviors that are to be tracked. This includes resident specific interventions as well as a goal for each behavior. One behavior can be listed per each number. These behaviors will then populate onto the MAR so that nurses may monitor for these. If the facility would like the targeted behavior monitoring linked instead to CNA charting, that is an option as well.

View Targeted Bx Charting

Click onto **View Targeted Bx Charting** button to view all charting completed on each resident's targeted behavior plan. You will be presented with a control screen to select a Start/End Date or select Current Month/Last Month and click **OK** once date(s) are selected. Click **Go** to view the data.

Dose Reduction

View Antipsychotic Med Hx

Click onto this button to view all antipsychotic medication(s) the resident has currently ordered or has had ordered in the past. Discontinued medications that are no longer active will display in gray text and will show "discontinued." Each order will display the dose, frequency, first date, and what the medication is to be given for. Use the Date From or Date To buttons to switch the date range being shown in the view screen and **OK** once date(s) are selected. Click **Go** to update the results.

Chart GDR Notes

To chart a GDR Assessment, click onto the **Chart GDR Notes** button. Within this screen, work from left to right completing one assessment per antipsychotic medication the resident is taking. Utilize the top row to complete this assessment. At the end of the assessment, determine whether a GDR attempt could improve symptoms and functioning. If the assessment supports a GDR, click onto **^ Go To GDR Implementation**. This will bring you to the portion of the screen where you can develop the GDR plan.

Chart GDR Outcomes

This button will display all GDR plans that have been documented and do not have an outcome attached onto them. Click onto a GDR implementation plan to turn it red (called 'tagging' the entry), select **Edit**, then click onto **Append**. Once in the GDR Assessment topic, click through the items in the *GDR Evaluation* row.

View GDR Notes

This button will display all notes related to GDR, including the GDR assessment, implementation plan, and all evaluation which has been completed. In addition, if there is an order on the resident's chart for "Psych medication reduction contraindicated per physician," this will also display in this view screen.

Skin

When the user clicks onto **Chart Wound Assessment**, they will be presented with the Pressure Injury topic located in the Nurse Charting section. This topic gives the user capability to chart each pressure injury using a separate AREA word. Work through the topic by clicking onto each relevant button in the Wound Charting column, as well as the PUSH scoring tool at the end of the screen. The PUSH scoring graph for each of the areas tracked should decrease as the wound continues to heal.

Weights

When the user clicks onto **View Weights**, they will first be presented with the control screen which will allow you to Start Date/End Date or a period (Current Month/Last Month). Once the date range is selected, click **OK**, and **Go** to view the results.

Graphs/Reports

When clicking onto the **Graphs/Reports** button, the user will be presented with a new screen. Click onto any of the buttons within the screen to run the report/graph. Each one is detailed below. All graphs are interactive in that you can click onto any of the data points (a bar within a bar graph or a slice in a pie graph) to be flipped to the specific documentation. This allows for easy data mining within each graph.

Fall/Safety

- **Fall Graph (past month):** Displays four graphs – history of prior falls, factors related to fall (health/care, equipment, medication, other), percentage of falls on residents who have an active psychotropic medication order, and location of fall. All the graphs populate from Quality Assurance > Fall Investigation, except for the location of falls graph.
- **Fall Graph (past year):** Displays four graphs – fall rate per 1000 patient days, falls by injury sustained (major, minor, none), falls by shift, and falls by unit. Falls by unit will populate based on Quality Assurance > Fall Investigation.
- **Fall Calendar:** Prompts the user to first select a date range. Once selected, click OK to load the data. The days that a fall occurred for each resident will display with a number in the cell to correlate to the number of fall(s) the resident had that day of the month. The totals section will give a total for each day of the month. This report may be most helpful in trying to determine if certain day(s) of the month seem to have more falls happen or if there is a large event that correlates with a day of the month that more falls occurred on.
- **Supportive Device (past month):** Displays four graphs – restraint use frequency, restraint types used, alarm use frequency, and alarm types used. The data for these graphs is populating directly from the MDS.
- **Incident Calendar:** Prompts the user to first select a date range. Once selected, click OK to load the data. The days that an incident occurred for each resident will display with a number in the cell to correlate to the number of incident(s) the resident had that day of the month. The totals section will give a total for each day of the month broken out by incident type. This report may be most helpful in trying to determine if certain day(s) of the month seem to have more incidents happen or if there is a large event that correlates with a day of the month that more incidents occurred on.
- **Incident Types (Graph):** Shows the total number of incident types for the past 12 months.

- **Fall/Incident Summary Report:** Displays the last 90 days of falls/incidents. The bottom of the graph will display totals for each incident type as well.

Infections
- **Infection Graph (past month):** Displays two graphs – all infections as well as infections that are in house acquired. The bottom of the graphs will display a breakout of infections by unit.
- **Infection Graph (past year):** Displays three graphs – in hour infection rate per 1000 patient days, breakout of infection based on origin, and number of infections per unit.
- **Antibiotic Use (past year):** This graph displays all antibiotic medications that are ordered within the past year. In addition, the reason as to why the antibiotic medication is ordered will be within the graph as well. This graph does not display the total number of residents on antibiotic medications, but rather the total number of antibiotic orders within the facility.
- **Infection Detail:** This report is what is used as the infection line list. It gives all the detail of each infection that is being monitored.
- **Infection Types:** After selecting a date range, this report will give a breakout of all different infection types, with totals at the bottom of the report.
- **Employee/Resident Illness**: You will be presented with several different graph options once clicking onto this button. The key is to make sure that you select both Clients and Providers as all graphs under this button look at the correlation between employee and resident illnesses/infections.

Pain
- **Pain Graph (past month):** Displays four graphs – pain scale type used by residents, number of residents who received 15 or more PRN pain medications, the number of PRN analgesic doses administered, and the number of new PRN analgesic orders.
- **Pain Graph (past year):** Displays four graphs – average pain rating, percentage of residents who received non-pharmacological interventions, number of residents who trigger for a pain QM (moderate to severe pain), and percent of residents who state that pain affects their sleep or daily activities. The bottom two graphs in this report will populate based on the MDS.
- **PRN Analgesics Calendar**: You will first be presented with a control screen to select a date range. Once that has been selected, click OK to load the calendar report. Within this report, any day that a resident received a PRN medication for pain or discomfort will be displayed with a number in the cell for that resident. You can more easily spot any trends regarding PRN usage for pain when looking at a calendar report, which is when this is useful.
- **Pain Review (Charting)**: After selecting a date range, click onto OK, and Go to load the results. This screen will look at the following areas of the record and populate all charting within the time frame selected: resident complaints of pain noted in the Physician Assessment topic, any analgesic medication orders (scheduled or PRN),

anytime that a CNA reported pain via the Stop & Watch tool, anytime that a PRN medication was given to a resident for pain or discomfort of any kind, and any care plans related to Pain/Comfort.

Bx/Mood

- **Bx/Mood (past month):** Displays four graphs – PRN medication use for agitation/anxiety/behavior symptoms/mood symptoms/insomnia, behavior quality measures triggered, total number of residents who have psychotropic orders, and number of psychotropic orders that are have been new or changed within the past six months.
- **Bx/Mood (past year):** Displays four graphs – number of clients with psychotropic medications, total reported instances of adverse behaviors/declined care/wandering, number of clients on antidepressant medications or with mood indicators documented (feeling down, overeating, trouble sleeping, etc.), and the total number of clients that fall into each PHQ9 category.
- **Antipsychotic Med List:** Displays a list of all current antipsychotic medication orders on the selected clients.
- **PRN Psychotropic Calendar:** You will first be presented with a control screen to select a date range. Once that has been selected, click OK to load the calendar report. Within this report, any day that a resident received a PRN medication for behavior or mood symptoms will be displayed with a number in the cell for that resident. You can more easily spot any trends regarding PRN usage for these symptoms when looking at a calendar report, which is when this is useful.
- **Psychotropic Med Graph:** This graph displays all psychotropic drugs, broken out by category, that are current orders during each of the increments. This graph displays the past 12 months of data, broken out by two-month increments. This graph counts the total number of orders, not total number of clients.
- **Psychotropic Med Report:** This report displays each resident who has a current psychotropic medication order. It will then list any relevant diagnosis (to ensure one is in place), as well as the relevant care plans (to ensure one is also in place). The last three columns will populate if the resident has also had a fall in the past 30 days or last year or has had any weight loss.
- **Psychotropic Meds (MAR):** This button will load the MAR report on all residents that have a Psychotropic Medication Monitoring order or a Side Effect Monitoring order. This will display the full order as well as each day of the current month. The user can evaluate that this monitoring is being signed off on and completed by nursing staff.
- **Behavior Review (Charting):** Start by selecting a start and end date or Current Month/Last Month, click OK and Go to view the charting. Displays all charting related to behavior. This will include entries made by CNA's, nurses, or any PRN medications administered for behavior.

Skin

- **PI Graph (past month):** Displays four graphs – total pressure injuries vs. total clients, healing status (percentage of clients who have healed, improved, no change, or worsening of PI), new pressure injuries by stage, and any clients receiving adjunctive therapy. All graphs populate from the Pressure Injury Assessment documented by nurses.
- **PI Graph (past year):** Displays three graphs – pressure injury rate per 1000 patient days, origin of pressure injuries (present on admission or developed in-house), and total number of pressure injury infections. The top two graphs populate from the Pressure Injury Assessment documented by nurses, and the bottom graph populates from Quality Assurance > Infection Control topic.
- **Skin/Wound Assessment:** This report will display the client's primary diagnosis, skin treatment orders, and pressure injury assessment(s) that fall into the selected date range.
- **Skin Review (Charting):** Start by selecting a start and end date or Current Month/Last Month, click OK and Go to view the charting. Displays all charting related to skin. This will include entries made by nurses in the Non-Pressure Wounds topic, Pressure Injury Assessment topic, and anytime they click onto SKIN STATUS in the Nurse's Note topic.

Weights

- **Weights Graph (past month):** Displays four graphs – number of client's with significant weight loss, number of clients per each BMI category, contributing factors of weight loss, and weight loss in relation to cognitive status (BIMS score).
- **Weights Graph (past year):** Displays three graphs – number of clients with significant weight changes (gain/loss), percent of clients at risk for malnutrition (based on the Nestle MNA), and the residents who have had weight loss but presented no risk based on the Nestle MNA.
- **Weekly Weight Graph:** Presents a weight graph for the past month, breaking out the weight documented per week. In addition, the client's ideal weight, diet order(s), and relevant care plans will also display.
- **Food Intake < 75%:** A calendar report for the current month will display. Anyone who ate less than 75% of their meal for breakfast, lunch, or dinner, will populate into this report. If there is a large grouping surrounding a specific date, it may indicate that the meal served on that date was not the most popular among the clients.
- **Monthly Weight Tracking:** This report displays all weights for the past 12 months. In addition, any weight changes that have occurred in the past 12 months will also be displayed.
- **Monthly Weight Graph:** Presents a weight graph for the past 12 months, breaking out the weight documented per month. In addition, the client's ideal weight, diet order(s), and relevant care plans will also display.

Re-hosp.
- **INTERACT:** ECS has partnered directly with INTERACT so that we may have all their re-hospitalization tools directly at your fingertips. If this is a module that your facility is interested in utilizing, please contact the clinical department for the implementation guide. There are several setup changes to make prior to utilizing the module to ensure that you are tracking all data accurately.

Other
- **Quality Measure Reports:** Each time an MDS is submitted into ECS, it will check amongst all quality measures and write into a Statistics topic in the MDS section. These reports will populate from that section and topic. Typically, with facility QM's, users can see their overall numerator and denominator, but with this QM reports, we give the user all the detail, including which specific resident triggered for each QM. These can be run at any point in time (no need to wait on any data to be submitted) so that a facility may monitor their QM's in real time as MDS' are submitted.
- **Facility Assessment Reports:** Although there are no specific regulation requirements as to what specifically must be in a facility assessment, there were several guidance manuals that were released. ECS has built in two different reports, which are directly off one of the more popular manuals to utilize when developing your Facility Assessment. The great part about using ECS to help track this data is that it is already been documented. This report just simply pulls the data together into a report, which allows the user to export it, or manipulate it in which ever way is necessary.
- **MDS Analytics**: The reports available in here are based directly off the submitted MDS'. Options available currently include: Length of Stay, Diagnosis Totals, and Medicare Days. Once a report type is selected, the user must choose the Site/Service as well as a date period. Then click onto Print or Export to view the data.
- **View Resident/Family Concerns:** This report will display all resident/family concerns reported during the specified date range.
- **Write Internal Memo:** Utilize this topic to write memos to anyone users within ECS. These are sent internally within ECS only.
- **View Reports:** Clicking onto this button will load all the reports in ECS that your user group has rights to. Select a report and click OK to preview it.
- **View Graphs:** Clicking onto this button will load all the graph reports in ECS that your user group has rights to. Select a graph and click OK to preview it.

QAPI
QAPI plans may be developed and tracked directly in ECS. To complete this task, you will first have to create a fake QAPI "resident" that the data may be charted on. Once you have that fake "resident" created, then this person may be attached to all the QAPI write tasks. Each QAPI topic may be utilized to track the QAPI plan, as well as the evaluation of each plan. The preset QAPI topics available are: Falls, Infection, Psych, and Employee Health Impact.