

## **Nursing Electronic Documentation in the Pediatric Critical Care Setting**

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**Purpose:** To successfully manage the conversion of critical care documentation in the hospital's four intensive care units. The initial implementation of the PowerChart EHR in 2007 proved to be unsuccessful in the ICU setting. This resulted in the use of a hybrid model for documentation and a lengthy redesign and reimplementation process.

**Methods:** Multidisciplinary and collaborative approach involving nursing, medicine, respiratory therapy, pharmacy, and IT. A staged approach to implementation starting with CPOE and MAR in 2009, and concluding with flowsheet in 2011. Thoughtful flowsheet design by the SME group; focused on meeting the unique charting needs of each ICU while remaining compatible with hospital-wide documentation. Repeated testing, troubleshooting and redesign of the flowsheet. collaboration with the CHAMPS training team to design training content. Support of the training team during super user and end-user training ' 24/7 onsite support during implementation phase; including troubleshooting, rapid redesign, and ongoing end user education. Outcomes Over a four year period, the processes surrounding ordering and transcription, medication administration, and clinical documentation have been merged into a fully integrated Electronic Health Record. This allows for enhanced safety, more efficient patient transfers, and ease in sharing and reviewing patient data.

**Next Steps/Lessons Learned:** Important lessons learned include the benefit of using a staged, gradual approach to implementation. Nursing SME representation from all of the ICUs also proved to be invaluable throughout the design, build, testing, training, and implementation process. Collaboration with all disciplines was critical to the success of the project. The CHAMPS ICU team will continue its work to adopt new functionality and fine-tune Power Chart documentation.