

Enhancing Patient Engagement with iPad at Bedside



Organisation(s) Involved

Tan Tock Seng Hospital

Project Lead and Members

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Project Period

Start Date: 01/09/2023
End Date: 21/08/2024

Background

Whenever, patients are admitted into hospital, their daily routine activities will be disrupted, and it will be based on healthcare professional availability and the institutional working hours. This means that patients will be in a new environment with different routines from their pre-morbid routine. As a result, patients have limited ownership over their daily routine in the hospital, resulting in disengagement and adopting a passive role in their recovery.

In this new model of care, patients will be engaged by their healthcare professionals to co-develop individualised schedules that can be integrated into a home routine upon discharge. Engaged patients have higher levels of satisfaction, increased understanding of their care, more engagement in health improving behaviours, and improved health and outcomes. Hence, having a schedule will encourage individuals to build healthy habits which will affect their overall health wellness status.

Aims

The project aims to enable patients to co-develop their individualised schedule with their healthcare provider based on the following:

- With consideration to patient's pre-morbid routines to plan their rehabilitation schedule.
- Plan and synchronize different therapeutic and rehabilitation programs based on patient's needs.
- Provide an overview of patient's engagement level during the inpatient stay.

Patient related outcome:

- % of patient who view their scheduler at least once per day
- % of patient who have positive experience in using MyChart@bedside application

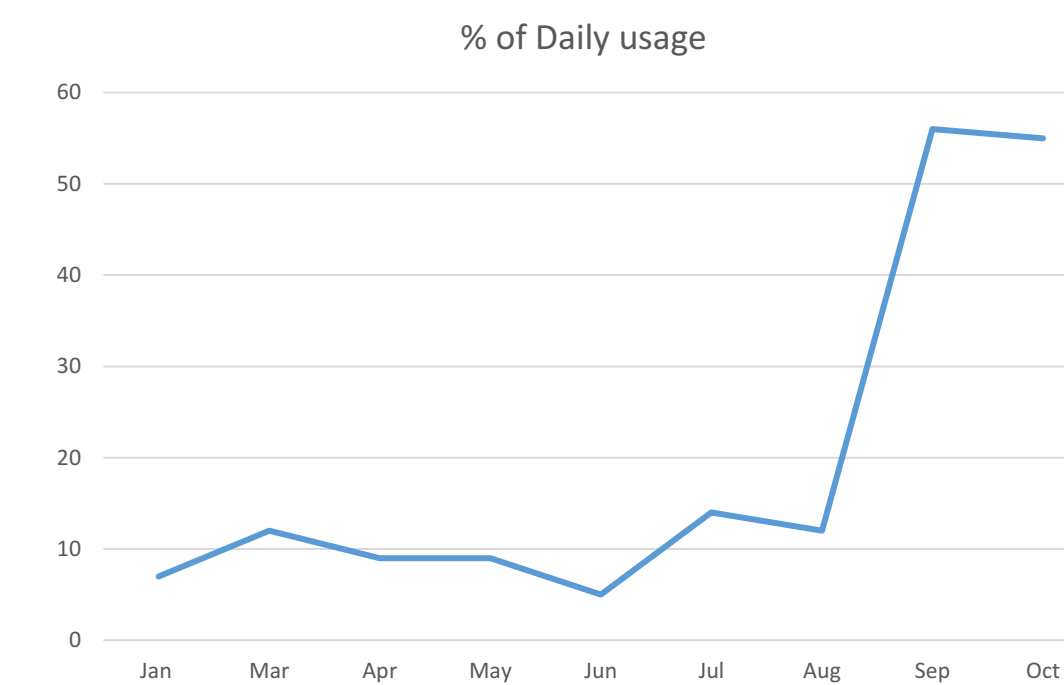
Provider related outcome:

- Overall compliance of AHS in scheduling patient for activities.
- Provider experience and satisfaction using the electronic scheduling system.

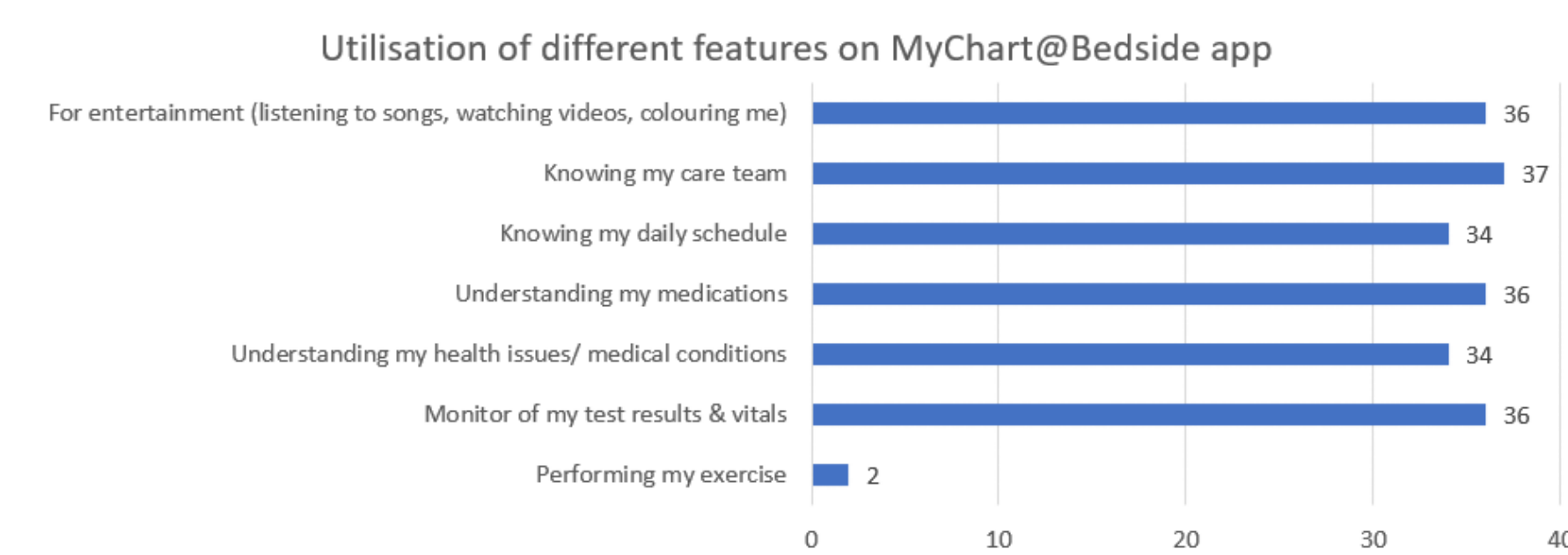
Results

Patient related outcome:

- % of patient who view their scheduler at least once per day.
 - Patients will view their schedules via MyChart@bedside application only. Hence the surrogated outcome will be based on percentage of daily usage of MyChart@bedside application.
 - The team developed initiatives based on the survey results to encourage patients to access their MyChart@bedside application.



- % of patient who have positive experience in using MyChart@bedside application
 - The survey showed that **75% of patient had positive experience** in using MyChart@bedside application to check / review information related to their rehabilitation program schedules.
 - 85%** of them will recommend Mychart@bedside application to other patients.
 - An average of **30 mins daily** using MyChart@bedside application. The average daily usage of entertainment apps such as YouTube and colouring apps is about 3 hours. (Below is a breakdown of the amount of time spent on different features of the MyChart@bedside application.



Provider related outcome:

- Overall compliance of AHS in scheduling patient for activities
 - We had managed to achieve 100% compliance of AHS in scheduling all inpatients for their activities.
- Provider experience and satisfaction using the electronic scheduling system
 - Generally, more than 80% of the allied health professionals have positive experience in using electronic scheduling system.

Methodology

<p>Phase 2A (at TTSH Rehab services)</p> <ul style="list-style-type: none"> Electronic scheduling for group therapy 	<p>1. Preparation (April to September 2023)</p> <p>1.1) Training:</p> <ul style="list-style-type: none"> To identify 6-8 super users to be trained using cadence snapboard features (Apr - May 2023). To develop training slides with tips sheets for inpatient snapboard training (June 23) Super users to train all staff @ TTSH Rehab and Renci Trial ward L8 (by using tips sheets) to schedule patients for group therapy and individual therapy using snapboard. (July – September 23) <p>1.2) Workflow discussion (Apr to July 2023):</p> <ul style="list-style-type: none"> Discussion with Rehab and Trial ward team to configure snapboard scheduler based on the different professional needs to match group therapy and individual therapy slots, and to standardize provider electronic scheduling workflow (April – May 23) Discussion with Cadence team to confirm snapboard scheduler configuration for group therapy and individual therapy needs for ICH with team coordinators and program lead (May – June 23). <p>2. Trial of group therapy schedule using snapboard (August to September 2023):</p> <ul style="list-style-type: none"> Rehab team to start trialing inpatients scheduling for 2 group activities. Target group: estimate 2-8 inpatients participating in these group activities from TTSH Rehab at any one time. <p>3. A exploration study on how to increase patient's engagement in using MyChart @ Bedside "What's happening soon" feature (June – Aug 2023)</p> <ul style="list-style-type: none"> Aim: to explore patient's perspective in using an electronic scheduler and strategies to enhance patient's active participation in viewing and co-developing their scheduler with clinicians. Target group: 10 Inpatients at TTSH Rehab services at Ang Mo Kio Thye Hua Kwan Hospital Methodology: <ul style="list-style-type: none"> Phase 1: A survey to cognitively intact inpatients to understand their perspectives of using an electronic scheduler.
<p>Phase 2 B (at ICH)</p> <ul style="list-style-type: none"> Electronic scheduling for group and individual therapy 	<p>1. Preparation</p> <p>Training (September 2023 – June 2024):</p> <ul style="list-style-type: none"> Super users to train new AHS joiners @ ICH to schedule patients for group and individual therapy using snapboard <p>2. Implementation of group and individual therapy schedule using snapboard</p> <ul style="list-style-type: none"> Sep – Oct 2023: implementations of electronic schedule for all patients @ Tertiary Rehab (TR) Oct – Dec 2023: implementations of electronic schedule for 4-6 IR wards @ Intermediate Rehab/Subacute Rehab (IR/SA) Dec 2023 – June 2024: implementation of electronic schedule for all patients @ ICH (depending on ramp up bed numbers) Total target group: all eligible inpatients from the 3 care settings at ICH (i.e. TR, IR and SA)

Lessons Learnt / Discussion

Good Practice

- It is important for team to have common agreement on the target to achieve and to have understanding on the operation of the iMyChart@bedside application (inpatient portal).
- Buy in and support from senior management help to facilitate this transition.
- Division of the tasks based on team member's knowledge and skills. (ie. Team members who are good with EPIC system will help to design the snapboard features, other team members who are good at analysis will assist in thematic analysis of the survey results)

Challenges

- It's difficult to get patients and their caregivers to voice "What is important to me" in their care as they often play a passive role in their recovery journey. It is important for patients to be able to share their perspectives in their ideal care standard.
- It is challenging to track specific patient related outcomes such the level of patient engagement due to the tedious manual ongoing data collection methodology.

Conclusion / Plans Ahead

From the survey results, we will use the insights from the challenges of implementing MyChart@bedside application to plan for future initiatives to engage hospitalised patients and their caregivers in the use of MyChart@bedside application to take advantage of the potential benefits of this emerging technology

With the results from the survey, we use similar principles to design outpatient scheduler app. We also reviewed existing MyChart@bedside application to retain specific features that is valued by patients and their caregivers.

Healthcare Family Group(s) [optional]

Allied Health and Nursing

Specialty or Discipline(s) [optional]

[Insert text here]

Funding Source [if any]

NTF HIP