# Infor Staffing Optimizer for Healthcare User Guide

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# Contents

# About this guide

Infor Staffing Optimizer for Healthcare provides a single easy-to-use solution for managing patient care and employee assignments that supports the Global Risk Assessment and Strategic Planning (GRASP®) methodology for collecting and analyzing data.

This guide provides an introduction to the Infor Staffing Optimizer for Healthcare functionality and the user functions to complete specific tasks. Use this guide as a reference at your site.

**Intended audience**

This guide is written for users who are responsible for patient care and tasks, such as scoring workload, and employee management, such as assigning patients to caregivers.

**Prerequisite knowledge**

To fully understand the information presented in this guide, you should have completed training on how to use Infor Staffing Optimizer for Healthcare.

For information about setup and administration, see the *Infor Staffing Optimizer for Healthcare Administration Guide*.

## Browser requirements

Infor Staffing Optimizer for Healthcare is a web-based application that is viewed through a web browser. The Microsoft Internet Explorer (IE) 10+ and Google Chrome browsers are supported.

## Related documents

You can find these related documents in the Infor Xtreme Support portal:

- *Infor Staffing Optimizer for Healthcare Administration Guide*
- *Infor Staffing Optimizer for Healthcare Available Hours Interface Guide*
- *Infor Staffing Optimizer for Healthcare HL7 Interface Guide*
- *Infor Staffing Optimizer for Healthcare Release Notes*

- *Infor Staffing Optimizer for Healthcare Hardware and Software Recommendations*

# Contacting Infor

If you have questions about Infor products, go to the Infor Xtreme Support portal.

If we update this document after the product release, we will post the new version on this website. We recommend that you check this website periodically for updated documentation.

If you have comments about Infor documentation, contact [documentation@infor.com](mailto:documentation@infor.com).

# Chapter 1: Getting started

These are the basic functions required to start using Staffing Optimizer:

- Open a web browser, launch Staffing Optimizer from the URL for your facility, and log in. On first login, you are prompted to change your password. After you log in, your user name is displayed in the upper left corner. If you step away from the computer and come back, check this to ensure that another user has not logged in while you were away.

    See Login on page 9.

- After Staffing Optimizer has loaded, click **Workload > Patient Workload** to see patients for the current date and shift in either your default unit or the last unit on which you worked. You may need to change the **Unit**, **Date**, or **Shift** values to list the correct patients.

    See Parameter selection on page 11.

- Patients without workload scored are displayed in red. To score workload, double-click the row for the desired patient and instrument. The **Score Workload** page opens. To score workload, scroll through the list of interventions, and select the check box next to the interventions that are applicable. If you are unsure if it is applicable, click the information icon to show the intervention's definition.

    See Patient workload actions on page 26.

- When done, click **Save** to close the page and return to the **Patient Workload** page. The patient's name is now displayed in black which indicates that they have been scored. The workload value hours appear in the Workload Value column.
- To log out of Staffing Optimizer, click **Sign Out** in the upper left corner.
- If you are assigning caregivers to patients, click **Assignments** in the left navigation bar.

## Login

To log in to Staffing Optimizer, specify the user name and password provided by your administrator, and click **Log In**.

After you have logged in, your user name is displayed in the left menu bar under **My Account**. If you step away from the computer and come back, you should check this to ensure that another user has not logged in while you were away.

## Changing your password

If this is the first time that you have logged in to Staffing Optimizer or your password has expired, then you are prompted to change your password. You must specify your user name and current password before specifying and confirming a new password.

If you forget your password, click **Forgot Password?** on the login page. Specify your email address, and then follow the instructions in the email to reset your password.

You can also change your password by selecting **My Account > Change Password**.

The new password may need to meet requirements selected by your administrator. If the new password does not meet these requirements, a warning message is displayed indicating which requirements were not met.

After you have successfully changed your password, an alert indicates the change and provides you with a **Click Here to Log In** link.

## Automated timeout

To prevent misuse of Staffing Optimizer, and to ensure the security of your user account and your patients, Staffing Optimizer will automatically time out after 20 minutes of inactivity. To keep your session active, perform an activity that refreshes data from the server such as clicking your browser's **Refresh** button or pressing the F5 key. Two minutes prior to the timeout, a warning is displayed.

- If you do not acknowledge the warning message before the two minutes elapse, then you are automatically logged out.
- If you acknowledge the warning message but do not perform any activity, then you are automatically logged out.

If you are automatically logged out, you must log in again and restart any tasks.

## Navigation

When you log in to Staffing Optimizer, the Dashboard is displayed. The navigation bar has links to this information:

- **My Account**: Use to change your preferences, session information, change password, or sign out.
- **Workload**: Use to access these pages:
    - **Patient Workload**
    - **Non-Patient Workload**
    - **Indirect Workload**
    - **Questionnaires**
    - **Staffing**
    - **Reports**

- **Scheduled Reports**
- **Patient Search**
- **Assignments**: Use to add jobs, assign caregivers to jobs, assign patients to caregivers, and assign relief caregivers. Details of the workload are also displayed.
- **Administration**: Use to log in to the Administration Console.

The **Help** button is displayed in the upper right corner of all pages of Staffing Optimizer. Click **Help** to access this guide and the administration guide and their version numbers.

# Parameter selection

The **Unit**, **Date**, **Shift**, and **Caregiver** fields are displayed near the top of the **Patient Workload** page. This information is used to determine which data is displayed.

## Unit

When Staffing Optimizer is opened for the first time, a unit may not be selected. To select a unit, click the **Unit** field. If a unit is already selected, you can select a different unit.

When you click to change the unit, a drop down box is shown at the top. Click **+** and **−** to expand and collapse the unit tree.

The list of units is tailored to your hospital. Your administrator may give you access to all units or to only those units in which you will be working.

After you locate the desired unit, click the unit name to select that unit.

## Date

When you open Staffing Optimizer, the date is set to the current date. To change the date, click the date value and select a new date from the calendar.

If the unit that you are working in has been designated as a prospective unit by your administrator, the date may automatically be pushed ahead by one day depending upon the time of day that you log in. For example, if you log in at 20:00 (8:00 PM) and the unit is prospective, you may be expected to score workload on the day shift for the following day. When you log in, the date is automatically changed to the next day, and the **Shift** is automatically set to **Day**.

Data that is entered before a specified date set by the system administrator is archived. If the date that you want to select is shown in gray, then data for this date has been archived and is no longer available.

To view data for archived dates, you must use the Staffing Optimizer reports.

## Shift

When Staffing Optimizer is opened or the unit is changed, the shift is automatically selected based on the time of day. The shift can be changed by clicking on the shift name. When the shift selection is open, move your mouse pointer over the available shifts to see a tool tip with the date and time range for that shift.

If the unit that you are working in has been designated as a prospective unit by your administrator, the shift may automatically be pushed ahead by one shift based on the time of day. Click **Previous** and **Next** to select other shifts.

If the currently selected shift is the first shift of the current date and you click **Previous**, then the selected date changes to the previous day. If the currently selected shift is the last shift of the current date and you click **Next**, then the selected date changes to the next day.

## Caregiver

Caregiver options are displayed at the top of the **Patient Workload** page. By default, this setting is **All Patients**.

Click the **Caregiver** field to select one of these options:

- **All Patients**: Displays all patients regardless of the caregiver assignment
- **My Patients**: Displays only those patients assigned to the currently logged in user
- **Unassigned Patients**: Displays only those patients with no caregiver assignment
- **Caregiver's Patients**: Displays those patients assigned to a selected caregiver

# Preferences

Use the **My Account > Preferences** page to perform these various setup tasks specific to your login and the configuration of your **Patient Workload** page:

- Select a different language
- Change your password
- Change the order of the patient list columns
- Specify patient list sort order
- Specify whether shared instruments are displayed

## Changing language

If your administration has made other languages available, you can change the language that is displayed in the application.

1   Select **Preferences**.
2   Select another language. Your selection is immediately saved.

   The hard text on all pages will reflect that language. Text specified by a user, such as in the **Intervention Description** and **Unit Name** fields, is not translated.

## Configuring Patient Workload columns

Use this procedure to add, remove, and change the order of the columns on the **Patient Workload** page.

1   Select **Preferences > Patient List Columns**.
2   To add a column, click the drop down box next to the column name, and select the order in which you want it to be displayed on the **Patient Workload** page. To remove a column, click the drop down box and select the blank value at the top of the list.

   If two columns have the same value, the first column selected is assigned that value and is placed in that position. The second column with the same value is placed in the next column and all subsequent columns are shifted down by one.

3   Click **Save**.

## Sorting Patient Workload columns

Up to three columns on the **Patient Workload** page can be sorted in ascending or descending alphabetical or numerical order. The sorted columns are displayed with an arrow in the header indicating the sort direction. If more than one column is sorted, then the sort order is displayed after the arrow. You can also sort just one column by clicking the column heading on the **Patient Workload** page.

1   Select **Preferences > Patient List Sort Order**.
2   Select up to three columns to sort.
3   Select whether each column is displayed in ascending or descending order.
4   Click **Save**.

## Showing shared instruments

When **Show Shared Instruments** is selected, instruments from other units that are attached to patients in the current unit are displayed. To simplify the displayed patient information and show only the current unit's instruments, clear the checkbox for **Show Shared Instruments**.

1   Select **Preferences > Shared Instruments**.
2   Select or clear the checkbox for **Show Shared Instruments**.

# Chapter 2: Patient Workload

The **Patient Workload** page shows the patient and caregiver information for a specific unit, date, and shift. It is the page on which most users spend the majority of their time. In most facilities, the list of patients is automatically populated by the Admit-Discharge-Transfer (ADT) system.

Patients whose names appear in black have workload scored for the specified instrument on the selected date and shift. Patients whose names appear in red have not been scored.

The third column displays applicable icons for each patient. If an alert has been assigned to a patient, an alert icon is displayed.

To see which alerts have been assigned, click the alert icon, or click the down arrow to expand the actions for that patient, and select **View / Update > Alert Codes**.

See Alert codes on page 19.

If the patient has been signed out, a yellow clock icon is displayed. To sign in the patient, click the clock icon, or click the down arrow to expand the actions for that patient, and select **ADT Functions > Sign-In**.

If this action is not available, your administrator may have limited your access to this action. This may be because the sign out process is automated by the ADT system. Even if the patient is signed out, you may be able to score workload for the patient if your administrator has made this option available.

If today is the patient's birthday, then a birthday cake icon is displayed.

You can select one of these pages on the **Workload** tab:

## Paging and filtering patient workload

By default, 25 patients are displayed on the **Patient Workload** page. This value can be found at the bottom of the list of patients. To change this value, type the desired numerical value in this box, and press Enter.

To change the selected page, click on the desired page number. If a patient has been selected (for example, by scoring workload for that patient), then the page automatically shows that patient's information.

**Filtering**

A patient filter text box is at the top of the list of patients. Specify text, such as patient's name or encounter number, and press Enter to limit the search results to patients that contain the specified text. To clear the filter, delete the text, and press Enter.

# Patient search

Patient Search function can be used to locate a patient who is not displayed on the **Patient Workload** page. It can also be used to find the history of a patient. The search can be filtered by values as the medical record number to quickly find the patient. The data returned by the search will include such items as the patient's admit date and time and unit.

To navigate to one of the patients returned by the search, click the hyperlink for their medical record number. The terminology may be different for this column at your facility. This returns you to the **Patient Workload** page, automatically changing the unit and highlighting the selected patient. If the patient is not available in the unit on the currently selected date, then the date is changed to the last date that the patient was available on the selected unit.

# Caregiver assignment

Caregiver assignment can be used to provide users with a way to filter the list of patients to just those patients for which they are providing care. Several reports also use the caregiver assignment to show continuity of care. Caregiver assignment is made by instrument, allowing multiple caregivers to be assigned if the care required for the patient includes multiple disciplines. The Caregiver Patient Action Group is used to assign a caregiver for the selected patient or for a group of patients. The user can also view the caregiver history for the selected patient.

Caregiver assignment typically terminates at the end of the shift on which the caregiver was assigned. However, the administrator may configure this assignment to clear once per day or to never clear. This might be found in long term care facilities or some allied health disciplines. Contact your administrator if you have questions about this setting.

## Assigning a caregiver to a selected patient

**1**  Select **Workload > Patient Workload**.

**2** Locate the patient, and click **Show Actions for Patient**.

**3** Click **Caregiver**.

**4** Click **Selected Patient**.

Select **Show all Caregivers** to see those who do not have access to the selected instrument.

**5** Select a caregiver from the dropdown list.

**6** Click **Save**. The Caregiver column on the patient workload page is now populated.

## Assigning a caregiver to a group of patients

**1** Select **Workload > Patient Workload**.

**2** Locate a patient, and click **Show Actions for Patient**.

**3** Click **Caregiver**.

**4** Click **Group of Patients**.

**5** Specify the **Date**, **Unit**, and **Shift**.

**6** Select a caregiver from the dropdown list. To see all caregivers regardless of those for the selected unit, select **Show all Caregivers**.

**7** Click **Next**.

**8** Select the patients to be assigned to the selected date, shift, and caregiver, or select **Select all patients**.

**9** Click **Finish**.

## Caregiver history

Caregiver history shows which caregiver has been assigned to a patient on specific dates and shifts. This is specific to the selected instrument. If the patient has been assigned more than one instrument, then each instrument will show a unique caregiver history. To view the caregiver history for a patient, click **Caregiver > History**.

This opens the read-only **Caregiver History** page for the selected patient.

## Instruments

Instruments are the cornerstone of the GRASP® methodology. An instrument is a set of interventions or actions that are commonly performed during daily practice. Ensuring that the proper instrument is attached to the patient is important to ensure that the workload recorded matches the care provided. Multiple instruments can be assigned to a single patient encounter, allowing Staffing Optimizer to capture workload for the various disciplines required to provide care for the patient.

Select **Patient > Show Actions > Instruments** to view or update active instruments and attach an instrument to a group of patients.

## Adding active instruments

**1** Select **Workload > Patient Workload**.

**2** Locate the patient, and click **Show Actions for Patient**.

**3** Click **Instruments**.

**4** Click **View/Update Active Instruments**.

**5** Click **Insert**.

**6** Specify this information:

**Instrument**
Select the instrument to add.

**Assigned Date & Time**
Specify the date and time on which the instrument will be active.

**Removed Date & Time**
Select the check box, and specify the date and time to stop displaying the selected instrument.

**7** Click **Close**.

## Editing active instruments

**1** Select **Workload > Patient Workload**.

**2** Locate the patient, and click **Show Actions for Patient**.

**3** Click **Instruments**.

**4** Click **View / Update Active Instruments**.

**5** Locate the active instrument, and click **Edit**.

**6** Specify this information:

**Instrument**
Select an instrument. The instrument should be changed only if no workload has been collected.

This may happen if this instrument is the default instrument that is assigned to patients upon admission, but the actual workload differs. An example of this is in a Mother/Baby Unit where the Hospital's Admit-Discharge-Transfer (ADT) System does not differentiate between the mothers and the babies. All patients might be assigned the Mother instrument by default, but it must be changed to the Baby instrument for the babies.

If the selected instrument is already attached, you will be prompted about the duplication. Duplicate entries can exist but only a single row is displayed on the patient workload page for the instrument.

**Assigned Date & Time**
Specify a date and time for which the instrument is active. If the date and time overlaps with the effective start date or the effective end date of one or more instruments of the same type, you are prompted with a suggested modification.

**Removed Date & Time**
Select the check box, and specify the date and time on which to stop displaying the instrument. To completely remove an instrument, click **Delete**.

**7** Click **Save**.

## Attaching an instrument to a group of patients

**1** Select **Workload > Patient Workload**.
**2** Locate a patient, and click **Show Actions for Patient**.
**3** Click **Instruments**.
**4** Click **Attach Instrument to a Group of Patients**.
**5** The **Assigned Date & Time**, **Removed Date & Time**, and **Instrument** default to the currently selected values. Change them as needed.

A note at the bottom of the page indicates how many patients are available for the selected criteria. Patients with the selected instrument already attached on the selected date and shift are not available. If not patients match your criteria, all patients on the unit already have the selected instrument for the desired date and shift.

**6** Click **Next**.
**7** Select the patients to be assigned the instrument, or select **Select all patients**. If a patient name is in gray, the selected instrument has already been assigned.
**8** Click **Finish**.

## View / Update

The **View / Update** patient action group is used to view and update these pages:

• **Alert Codes**
• **ADT History**
• **Patient Information**
• **Workload History**

## Alert codes

Alert codes are used to highlight a patient so that all users know of special needs or issues. Such alerts might include a Name Alert if more than one patient on the unit has the same name, or Choking to indicate that the patient is at risk of choking. When an alert code is assigned to a patient, an alert icon (⚠) is displayed on the patient workload page.

### Assigning and removing alert codes

1  Select **Workload > Patient Workload**.
2  Locate the patient, and click **Show Actions**.
   **Note:** If the patient already has an alert code, you can click it to open the **Alert Codes** page.
3  Click **View / Update**.
4  Click **Alert Codes**.
5  Select check boxes to add alert codes, and clear check boxes to remove alert codes for the patient.
6  Click **Save**.

## ADT history report

The **ADT History** report provides a read-only historical record of all admit-discharge-transfer (ADT) transactions that have been processed for the selected patient. This may not include simple updates performed by the ADT system (processed as ADT A08 messages) that do not change the status of the patient. This includes actions sent to Staffing Optimizer by the hospital's ADT system and ADT transactions completed exclusively within Staffing Optimizer. You can generate this report from the **ADT History Report** page.

### Creating ADT history reports

1  Select **Workload > Patient Workload**.
2  Locate the patient, and click **Show Actions**.
3  Click **View/Update**.
4  Click **ADT History Report**.
5  Make the appropriate changes to the fields, and click **View Report**.
   On the navigation bar of the report, click **Export** to export the report into a different format.

# Patient Information

The **Patient Information** page shows information about the patient and the selected encounter. If you have the correct permissions, you can update this information, but it is often updated within the hospital's HIS system. Patient Information is on the **View / Update** action page.

The **Patient Information page** has these sections:

- Patient Information
- Visit Information
- Extended Information

Patient Information includes:

- Hospital ID
- First Name
- Middle Name
- Last Name
- Birth Date
- Gender
- Religion

Be careful when changing the Hospital ID because this is the common identifier used by other systems throughout the hospital to identify the patient.

Visit Information includes:

- Encounter Number
- Visit Number
- Room/Bed
- Admit Code
- Patient Type
- Patient Service
- Admit Date & Time
- Discharge Date & Time
- Transfer-In Date & Time
- Transfer-Out Date & Time

Be careful when changing the encounter number because this is the common identifier used by other systems throughout the hospital to identify the patient's encounter. Care should also be exercised when modifying the **Admit**, **Discharge**, **Transfer-In & Transfer-Out**, **Date & Time** values. These values are provided by the hospital's ADT system.

Extended Information is typically blank, but can be used to display things such as the attending physician and allergies. The administrator determines which information is shown in this section. This information is always read-only and is populated exclusively by the ADT system.

## Changing patient information

Special permission is required to make changes on the **Patient Information** page. Extreme care should be used when changing the Hospital ID and Encounter Number because these are common identifiers used by other systems throughout the hospital. Talk to your administrator for more information.

1  Select **Workload > Patient Workload**.
2  Locate the patient, and click **Show Actions**.
3  Click **View / Update**.
4  Click **Patient Information**.
5  Make the appropriate changes to the Patient Information, Visit Information and Extended Information sections. You may have to click the **Maximize** arrow to view them.
6  Click **Save**.

# Workload History Report

The Workload History Report provides a historical record of all workload transactions for the selected patient. This includes workload captured by all instruments to provide a complete view of the workload performed.

## Creating Workload History Reports

1  Select **Workload > Patient Workload**
2  Locate the patient, and click **Show Actions**.
3  Click **View / Update**.
4  Click **Workload History Report**.
5  Specify the appropriate information, and click **View Report**.
6  To export the report to a different format, click Export on the report navigation bar, and select a format .

# Delete actions

The Delete patient action group is used to delete erroneously entered information. This information can be deleted:

• Score Workload
• Score Interrater Monitor
• Score Percent of Care Delivered
• Destination (This action should be used with caution. We recommend that all ADT actions be carried out by the ADT system.)

- Encounter (This action should be used with caution. We recommend that all ADT actions be carried out by the ADT system.)
- Patient (This action should be used with caution. We recommend that all ADT actions be carried out by the ADT system.)

All delete actions should be used with extreme caution. Items that you are not permitted to delete are gray.

# ADT Functions

All admit-discharge-transfer (ADT) functions should be carried out by the hospital's ADT system. This ensures that a consistent list of patients is maintained between Staffing Optimizer and other applications at the hospital. However, Infor recognizes that not all hospitals have an ADT system and that there are times when it is necessary to perform an ADT action separate from the hospital's ADT system. Therefore, Staffing Optimizer provides the **ADT Functions** action page that provides access to this information:

- Discharge
- Transfer
- Swap Beds
- Sign-Out
- Merge Patients
- Merge Encounters
- Cancel Admit
- Cancel Discharge
- Cancel Transfer

## Admit

The admit new patient function can be used to add a new patient t oStaffing Optimizer or add a new encounter for an existing patient. This correlates to the HL7 A01 function. For more information on HL7 functions, see the *Infor Staffing Optimizer for Healthcare HL7 Interface Guide*.

Because this function is not directly related to an existing patient, it is not displayed in the**ADT Functions** patient action. The **Admit New Patient** button is shown at the top of the**Patient Workload** page.

**Note:** Talk to your system administrator to verify whether you should use your hospital's ADT system to admit patients.

### Admitting new patients

Verify whether you should use your hospital's ADT system to admit new patients.

**1** On the **Patient Workload** page, click **Admit New Patient**.

**2** Specify the required patient information, and click **Next**. If the patient already exists, you are prompted about updating the fields with the information.

**3** Specify the **Encounter Number** (Required), **Unit**, **Room/Bed**, **Admit Date & Time**, and **Discharge Date & Time**, if applicable. If the Encounter Number you specify already exists, then you are prompted about updating the fields with the information.

**4** Click **Next**.

**5** Specify an **Visit Number** (optional), **Admit Code**, **Patient Type**, and **Patient Service**.

**6** Click **Next**.

**7** Select the instruments that will be used to collect workload for this patient admission.

**8** Click **Finish**.

If you have selected the current unit and date for the new patient, then they will be displayed on the **Patient Workload** page. However, if you selected different parameters, you may need to change the **Unit**, **Date**, or **Shift** to find the newly admitted patient.

## Discharging patients

Verify whether you should use your hospital's ADT system to discharge patients. The Discharge ADT Function is used to end a patient's encounter. This correlates to the HL7 A03 function. The patient remains on the current patient workload page until the end of the shift that contains the specified discharge date and time.

**1** From the **Patient Workload** page, locate the patient, and click **Show Actions**.

**2** Click **ADT Functions**.

**3** Click **Discharge**.

**4** Specify the **Discharge Date & Time**, if different from the current date and time.

**5** Click **Save**.

## Transferring patients

Verify whether you should use your hospital's ADT system to transfer patients. The Transfer ADT Function is used to move a patient's encounter to another unit. This correlates to the HL7 A02, A09 and A10 functions.

**1** From the **Patient Workload** page, locate the patient, and click **Show Actions**.

**2** Click **ADT Functions > Transfer**.

**3** Specify the appropriate **Unit**, **Room/Bed** (optional), and **Transfer-Out Date & Time**.

**4** Select **Keep Patient Active on Current Unit** if you want the patient to be listed under both the current unit and the new unit. This may be used when a patient is transferred to X-Ray and is expected to return to the current unit prior to the end of the current shift.

**5** Select the instruments that will be used to collect workload for this patient.

**6** Click **Save**.

The patient remains on the current patient workload page until the end of the shift that contains the specified transfer-out date and time. The patient will be listed on the patient workload page for the new unit starting on the shift that contains the transfer-out date and time.

## Swapping beds

Verify whether you should use your hospital's ADT system to swap beds. The Swap Beds ADT Function can be used as a double transfer to move one patient's encounter into the room/bed of an existing patient and also to move the second patient into the first patient encounter's room/bed. This correlates to the HL7 A17 function.

1   From the **Patient Workload** page, locate the patient, and click **Show Actions**.
2   Click **ADT Functions > Transfer**.
3   Select the **Secondary Patient** to participate in the bed swap and the date and time of the swap.
4   Click **Save**.

Each patient remains on the current patient workload page in the current room and bed until the end of the shift that contains the selected swap beds date and time. The patients will be listed on the patient workload page in the new room/bed starting on the shift that contains the swap beds date and time.

## Signing out and signing in patients

Verify whether you should use your hospital's ADT system to sign out and sign in patients. The Sign-Out / Sign-In ADT Function can be used to place a Patient on a leave-of-absence. This is sometimes used on mental health or long term care units where patients are allowed to leave the hospital with family members. This correlates to the HL7 A21 and A22 functions.

1   From the **Patient Workload** page, locate the patient, and click **Show Actions**.
2   Click **ADT Functions > Sign-Out**.
3   Specify the **Sign-Out Date & Time**.
4   Click **Save** and then **Close**.

The **Patient Workload** page now shows an icon that resembles a clock in the patient's row. To sign in the patient, either click the clock icon or click **ADT Functions > Sign-Out**.

## Merging patients

Verify whether you should use your hospital's ADT system to merge patients. The Merge Patients ADT Function may be necessary when a patient is accidentally added to the system because the hospital patient ID was entered incorrectly or the patient's name was misspelled. This correlates to the HL7 A18, A34, A36, and A40 functions.

1   From the **Patient Workload** page, locate the first patient to be part of the merge, and click **Show Actions**.
2   Click **ADT Functions > Merge Patients**.
3   Select the **Secondary Patient** to participate in the merge.
4   Click **Save**.

The update is immediately reflected including all historical records. If the encounter numbers do not match, then multiple records may still exist under the unique encounter numbers. If the encounter numbers match, then the encounters will also be merged. The same applies for locations and instruments. If the same instrument is attached and both instruments have workload collected, then the primary instrument is maintained and the secondary instrument is abandoned.

## Merging encounters

Verify whether you should use your hospital's ADT system to merge encounters. The Merge Encounters ADT Function may be necessary when a patient's encounter is accidentally added to the system because the Hospital Patient ID was entered incorrectly or the patient's name was misspelled. This correlates to the HL7 A35 and A41 functions.

1   From the **Patient Workload** page, locate the patient, and click **Show Actions**.
2   Click **ADT Functions > Merge Encounters**.
3   Select the **Secondary Encounter** to merge with the Primary Encounter.
4   Click **Save**.

The update is immediately reflected including all historical records. If the locations do not match, then multiple records may still exist under the unique locations. The same applies for instruments. If the same instrument is attached and both instruments have workload collected, then the primary instrument is maintained and the secondary instrument is abandoned.

## Canceling admits

Verify whether you should use your hospital's ADT system to cancel admits. The Cancel Admit ADT Function may be necessary when a patient is accidentally admitted. This correlates to the HL7 A11 function.

1   From the **Patient Workload** page, locate the patient, and click **Show Actions**.
2   Click **ADT Functions > Cancel Admit**.
3   Click **Save**.

The update is immediately reflected on the **Patient Workload** page including all historical records.

## Canceling discharges

Verify whether you should use your hospital's ADT system to cancel discharges. The Cancel Discharge ADT Function may be necessary when a patient is accidentally discharged or the discharge is processed too hastily and the patient's condition changes. This correlates to the HL7 A13 function.

**1** From the **Patient Workload** page, locate the patient, and click **Show Actions**.

**2** Click **ADT Functions > Cancel Discharge**.

**3** Click **Save**, and then click **Close**.

The update is immediately reflected on the **Patient Workload** page including all historical records.

## Canceling transfers

Verify whether you should use your hospital's ADT system to cancel transfers. The Cancel Transfer ADT Function may be necessary when a patient is accidentally transferred. This correlates to the HL7 A12 function.

**1** From the **Patient Workload** page, locate the patient, and click **Show Actions**.

**2** Click **ADT Functions > Cancel Transfer**.

**3** Click **Save**, and then click **Close**.

The update is immediately reflected on the **Patient Workload** page including all historical records.

## Patient workload actions

On the **Patient Workloads** page, locate a patient, and click the **Show Actions** arrow to view the list of patient workload actions. Click the **Hide Actions** arrow to minimize the list. The currently selected patient's action menu automatically collapses when you expand the actions menu for a different patient.

## Scoring patient workload

**1** Select **Workload > Patient Workload**, or double-click the patient row.

**2** Locate the correct patient, and click **Show Actions**.

**3** Click **Workload**.

**4** If necessary, select a different shift.

**5** Select the interventions to include in the score, specifying values when necessary. To remove an intervention, clear its check box.

**6** Click **Save**.

# Required interventions

Interventions displayed with a grayed out check box are required interventions configured by the administrator and cannot be cleared. These interventions are always included when workload is scored.

# Intervention descriptions

Click the information icon next to the intervention name to see a description. To close the description box, click the X.

# Count and minutes interventions

Interventions that are hard to estimate have a type of Count or Minutes. Each one requires the user to specify a value. Count intervention **Value** fields are highlighted in blue, and minutes intervention **Value** fields are highlighted in green.

### Count intervention

An intervention is often marked as a count intervention if it is known how long the intervention takes to complete, but the number of times that it is performed is variable. Specify the number of times that the intervention was completed. The default is one. This value can be updated later.

### Minutes intervention

An intervention is marked as a minutes intervention when the time to complete the intervention is not predictable. Specify the number of minutes required to complete the intervention. The default is one. This value may be updated later.

# Mutually exclusive interventions

The mutually exclusive capability prevents two interventions that might overlap in their definitions from being selected at the same time. For example, if the Assessment section of the instrument includes both of these interventions, you probably want to select just one:

- Shift/update assessment 1-3 active problems
- Shift/update assessment 4 or more active problems

If **Shift/update assessment 1-3 active problems** is selected, and you click **Shift/update assessment 4 or more active problems**, an alert message is displayed.

Click **OK** to clear the selected intervention. Click **Cancel** to leave the intervention selected. In this example, clicking **OK** would clear **Shift/update assessment 1-3 active problems** and select **Shift/update assessment 4 or more active problems**. Clicking **Cancel** would leave **Shift/update**

**assessment 1-3 active problems** selected and **Shift/update assessment 4 or more active problems** cleared.

## Group mutually exclusive interventions

Group mutually exclusive capability prevents a single intervention from being selected when any of a selected group of interventions is selected. This may be found when one intervention is defined as a larger process that incorporates several other processes that are listed individually. If you select the parent intervention, and some or all of the child interventions are currently selected, you are presented with an alert beginning with: `Parent Intervention is a Group Mutually Exclusive Parent of: …`

Follow the instructions of the alert. Click **OK** to clear any applicable child interventions and keep the parent intervention. Click **Cancel** to cancel the change and make no changes to the selected items.

If you select a child intervention and the parent intervention is currently selected, you are presented with an alert beginning with: `Child Intervention is a Group Mutually Exclusive Child of: …`

Follow the instructions of the alert. Click **OK** to clear the parent intervention and keep the child intervention(s). Click **Cancel** cancels the change and leaves only the parent intervention selected.

## Mutually inclusive interventions

Mutually inclusive interventions facilitates the selection of levels or protocols. If an intervention has been designated as a mutually inclusive parent, an up/down arrow is displayed.

Selecting a mutually inclusive parent automatically selects all of the interventions that have been designated as mutually inclusive children of that parent. You can select one intervention to provide itemized data for later analysis. For example, the liver transplant protocol might be made up of 15 interventions, but you only have to select **Liver Transplant Protocol**.

When you select the mutually inclusive parent, the children of that parent are automatically selected, and the Workload Value is automatically calculated. If you clear any of the child interventions selections, the Workload Value is automatically recalculated to accommodate the change.

Clicking the up/down arrows allows the mutually inclusive children to be hidden or displayed, respectively. This allows the length of the instrument to be made shorter for quicker usage or for you to see all of the interventions that have been automatically included.

## Statistics

Some interventions will be marked as statistics by the administrator. The workload values for these interventions will be displayed in gray.

The workload value of an intervention that is marked as a statistic is not included in the total workload value. However, these interventions are important to the GRASP® methodology.

## Variable indirect workload

Variable indirect workload may be automatically included by the administrator. If so, it will be listed at the bottom of the list of interventions.

See Indirect workload on page 32.

Click **Save** to close this page and return to the patient workload page. The workload value in hours appears in the Workload Value column. If another user has updated Workload Value since you opened the **Score Workload** page, you will receive an alert.

Click **OK** to save your changes, or click **Cancel** to return to the **Score Workload** page.

## Interrater monitors

Interrater monitors (IRM) ensure the reliability of Infor instruments by providing a two-step check and review process. The **Rater Mode** option is not active until the score workload process has been completed. The **Reason Mode** is not active until the Rater Mode has been completed.

### Rater Mode

In the first step of the process, a staff member who has been trained in the IRM process selects **Patient Workload > Show Actions > Rater Mode** and specifies the workload for the patient that is based on documentation. This is compared to the workload that was specified by the provider in step two of this process on the **Interrater Monitor Reason Mode** page. A minimum of 10% of the average daily census per week is evaluated by using IRMs. The percent agreement between the provider and rater should be between 90% and 110%.

The process of scoring IRM workload is the same as scoring regular patient workload.

When done, click **Save** to close this page and return to the **Patient Workload** page. The IRM Status column will now show Rater Scored and **Reason Mode** will now be active.

### Reason Mode

In the second step of the process, the workload specified by the provider and the rater is compared and evaluated. This typically involves a face-to-face meeting. Any discrepancies are given a reason such as "Care Plan Differed" to explain why the workload did not match. A minimum of 10% of the average daily census per week is evaluated using IRMs. The percent agreement between the Provider and Rater should be between 90% and 110%.

To score Interrater Monitor Reason Mode for a patient, select **Patient Workload > Show Actions > Rater Reason**. This option is not active until the score workload and score Interrater Monitor Rater Mode processes have been completed.

The **Score IRM Reason Mode** page is displayed. Only the interventions that were selected by either the provider or the rater are displayed. Any discrepancies between them are highlighted in red. These items have a drop down list in the Disagreement Reason column. Click this drop down list and select the appropriate reason for the discrepancy.

When done, click **Save** to close this page and return to the **Patient Workload** page. The IRM Status now shows Completed and the IRM score now shows the percent agreement between the caregiver and the rater. If these columns are not visible, they can be added by selecting **Preferences > Patient List Columns**.

See Preferences on page 12.

## Percent of Care Delivered

Using Percent of Care Delivered (PCD) is another way to evaluate the reliability of an instrument. PCD is a one-step process that is simpler than IRMs, but does not always provide the face-to-face review of the IRMs. PCDs are frequently used for retrospective instruments and IRMs are frequently used for prospective instruments.

To score PCD for a patient, select **Patient Workload > Show Actions > Percent of Care Delivered**. This option is not active until the score workload process has been completed.

All interventions are displayed on the **Score Percent of Care Delivered** page. If an intervention was selected by the Provider, then a checkbox is shown in the Provider column. The rater can specify the percentage of how much of that intervention was completed in the PCD column. This might be more or less than 100%.

The rater can then select a Disagreement Reason for why the care delivered was not 100%.

When done, click **Save** to close this page and return to the **Patient Workload** page. The PCD Status column now shows Completed, and the PCD score shows the PCD as specified by the rater. If these columns are not visible, they can be added by going to **Preferences**.

## Workload for Group of Patients

Score Workload for a Group of Patients provides a quick way to score workload that is the same for multiple patients. This is particularly useful for group sessions where a single provider might provide services for a large number of patients.

### Scoring workload for a group of patients

1  Select **Workload > Patient Workload**.
2  Locate the correct patient, and click **Show Actions**.
3  Click **Workload for Group of Patients**.

**4**  Specify the date, instrument, and shift. These fields show the values for the currently selected patient but can be changed.

**5**  Select a caregiver to narrow the list of patients.

**6**  Click **Next**.

**7**  Select the patients for which to score workload.

**8**  Click **Finish**.

**9**  Score the workload for the patients, and click **Save**.

The Workload Value column now shows the hours for each of the selected patients.

# Non-patient workload

Non-patient workload consists of instruments with interventions that capture work performed during the shift that is not related to patients. These are most frequently variable items that cannot be predicted as part of indirect workload, such as phone calls, special projects, and staff meetings.

**Non-Patient Workload** is displayed on the **Staffing** tab and is used to calculate staffing according to the GRASP® methodology.

To access **Non-Patient Workload**, select **Workload > Non-Patient Workload**.

You can select the applicable unit, date, and shift for the non-patient workload data to be displayed below the navigation bar.

See

To access the non-patient workload actions for a selected instrument, click the down arrow. When the **Non-Patient Workload Actions** menu is open, it can be minimized by clicking the up arrow.

## Scoring non-patient workload

To score non-patient workload, either click the **Score** link or double-click the row for the instrument. The **Score Non-Patient Workload** page is displayed.

The process of scoring non-patient workload is the same as scoring patient workload.

See

## Deleting non-patient workload instruments

The delete action for a non-patient workload instrument is only available when the selected date and shift match the instrument's scored date and shift. After clicking **Show Actions > Delete**, you are prompted to confirm or cancel the action.

# Indirect workload

Indirect workload consists of interventions that support the care of the patient population, but are not directly applied to an individual patient. Indirect workload varies by day-of-week and shift. This is a read-only view to show indirect interventions and their values.

To access indirect workload, select **Workload > Indirect Workload**.

You can select the applicable unit, date, and shift for the indirect workload data that can be displayed below the navigation bar. If there are multiple worksheets, click a worksheet to view it.

See

The values above the Indirect Workload table are set by your administrator, including:

• Patient Count
• Days Per Week
• Variable Minutes (or Tenths of an Hour) Per Patient Per Day

The Patient Count and Days Per Week are used to calculate the indirect workload values. The Variable Minutes (or Tenths of an Hour) Per Patient Per Day is calculated from the Indirect Workload table. The Variable Minutes (or Tenths of an Hour) Per Patient Per Day is further divided according Shift Percentages and applied to each patient that is scored.

The table headers (including bold rows) show total values for each of the value columns, such as Standard Time and Minutes Per Day. In the Shift columns, the percentage is applied to the shift.

Click the ⓘ (Information) icon to view the description of the individual indirect workload intervention.

Indirect workload interventions may be variable or constant. Variable interventions depend on the patient census, and the total value of the indirect workload will vary. Constant interventions are independent of the patient census and only vary according to the day-of-week and shift.

# Chapter 3: Staffing

The **Staffing** page provides a summary of group and skill data disseminated from the workload data and processed according to the GRASP® methodology. Staffing data is broken down first by group and then by skill. The group data relates closely to the total values that are specified in workload. The skill data is calculated using the group data in conjunction with the standards established by the administrator. For more information on the GRASP® methodology, see the *Infor Staffing Optimizer for Healthcare Administration Guide*.

Select the applicable unit, date, and shift for the staffing data to be displayed.

These calculated values provide a quick overview of the status of staffing on the shift and are displayed above the Staffing table:

*   Actual Hours per Patient per Day (HPPD)
*   Budgeted HPPD
*   Required HPPD
*   Utilization
*   Occupancy

## Group staffing

The top table on the **Staffing** page shows staffing for unit groups. Click the information icon to view the standards set by the administrator for a particular group.

If shared instruments are available in the selected unit, then group name, instrument unit and shift are displayed.

Shared groups are displayed in a different color such as blue. The required hours and census for the shared groups are included in the total data row at the bottom of the table. These values are not included in the unit total and are not used in calculating job staffing. The shared data is reported back to the instrument unit and is used to calculate job staffing in that unit.

Your administrator may allow you to update the data in the **Required Hours** and **Census** fields. This might be done when workload is being collected prospectively, to predict the care required, when the admit-discharge-transfer (ADT) system does not populate the patient list until patients are actually admitted. To specify a value, click the appropriate text box and specify the numerical value, then click **Save**. The page turns gray while the data is updated. After a value has been saved, the **Last Modified Date** and **Last Modified By** fields are populated.

Required hours and census values that do not display a value in the **Last Modified Date** and **Last Modified By** fields have been calculated from Workload. To remove a manually entered value, either click the text box and press the Delete key, or click the ⋉ (Clear Values) icon to clear all of the values.

You may also specify values for all rows, and then click the **Save** button below the table to save data one time for all rows. To clear data from all rows, click the **Clear Values** button below the table.

## Non-patient workload

Non-patient workload consists of interventions that are not directly linked to patients but require the caregivers' time. An example of this type of intervention is taking telephone calls. Non-patient workload tasks are specified on the **Non-Patient Workload** page and displayed in **Staffing** under the Non-Patient Workload group. The values are used in job staffing to calculate the required hours for each job.

## Indirect constant

Indirect workload consists of interventions that support the care of the patient population, but are not directly applied to an individual patient. Some of these interventions are considered to be constant, meaning that they do not vary based on the patient census. The indirect constant group shows the value from indirect workload that has been marked as constant. The value that is displayed is used in skill staffing to calculate the required hours for each skill.

See Indirect workload on page 32.

## Job staffing

The lower table on the **Staffing** page shows Shift Summary by Job. Click the information icon to view the standards set by the administrator for a particular job.

The key icon (🔑) indicates that the skill is an Infor job or that this job is unit producing. For more information about jobs, see the *Infor Staffing Optimizer for Healthcare Administration Guide*. The total at the bottom of the table is a summary of these values.

The **Required Staff** and **Required Hours** values are calculated from the information presented in the Group Staffing table, which follows the standards of the GRASP® methodology. For more information, see the *Infor Staffing Optimizer for Healthcare Administration Guide*.

The **Actual Hours** values may be populated in one of these ways:

• Manually specified on this page
• Specified as standard hours by the administrator
• Imported from the scheduling, staffing, or payroll system

Your administrator may allow you to update the data in the **Actual Hours** field. To specify a value, click the text box and specify the numerical value, then click **Save**. The page will briefly turn gray while the data is updated. After a value has been saved, the **Last Modified Date** and **Last Modified By** fields are populated.

To remove a manually specified value, click the text box and press the Delete key or click the **Delete** icon (×) to clear all of the values.

You can also specify values for all rows, and then click **Save** below the table to save data one time for all rows. To clear data from all rows, click **Clear Values**. **Actual Hours** values that do not show a value in the **Last Modified Date** and **Last Modified By** fields have been specified by the administrator as standard hours.

**Actual Hours** values that are imported from a scheduling, staffing, or payroll system are displayed in a similar manner to manually specified values. The **Last Modified By** user will often be listed as administrator or another administrative user.

The variance is the difference between the actual hours and the required hours. If the value is greater than zero, it is displayed in green indicating that you have adequate staffing for this job. If the value is less than zero, it is displayed in red indicating that you have inadequate staffing for this job. The total rows at the bottom of the table also follow this logic to indicate whether you have adequate overall staffing.

Your administrator may choose to display the budget and actual cost values. These values can help you to understand how much is budgeted for each skill on the selected shift and the cost for each job on the selected shift.

# Chapter 4: Assignments

The **Staffing** page lets you assign a caregiver to one or a group of patients. You can use the **Assignments** page to make assignments for multiple caregivers and patients at one time. You can assign caregivers to jobs and patients to caregivers on a manual or automated basis. You can also perform these functions:

• Add jobs
• Upload a list of caregiver user names
• Copy caregivers from another date and shift
• Add assignments
• Copy assignments from another date and shift
• Automate assignments
• Assign teams
• Assign relief caregivers

You can also view this information as it relates to the shift displayed:

• Number of assigned and unassigned patients
• Assigned and unassigned workload
• Average assigned workload

You must be attached to the unit to make assignments for it. See your administrator for details.

## Available caregivers and patients

**Available Caregivers section**

The Available Caregivers section on the **Assignments** page shows which caregivers can be assigned to patients. You can add caregiver names to the list one at a time, by uploading a list of user names, or by copying names from another shift.

The color of the icon next to each name in the Available Caregivers section indicates the person's job. This is set in the Administration Console.

When you hover your mouse on a name, icons are displayed that let you delete the name from the section, view caregiver competencies, and view contact information.

**Available Patients section**

The Available Patients section shows the admitted patient's name, ID number, bed number, and unit. When you place your mouse on a name, that information plus their admit date and time is displayed. A clock icon is also displayed. Click it to view the patient's assignment history.

## Adding jobs

Use this procedure to add a job to the Available Caregivers section on the **Assignments** page.

1   Below the Available Caregivers section, click **Add a Job**.
2   Select the job to be added and click **Save**.

## Adding a caregiver

Use this procedure to add a caregiver to the Available Caregivers section on the **Assignments** page.

1   Click a job title in the Available Caregivers section. If none are listed, click **Add a Job** and add the job.
2   In the **Select Caregiver** window, select the caregiver name.
3   Click **Save**.

## Uploading a list of caregivers

Use this procedure to upload a list of caregivers to the Available Caregivers section on the **Assignments** page. The file being uploaded, which may be created by a third party application, should contain a list of caregiver user names, with each name on its own line. The caregiver's job can optionally be added, separated by a comma or another delimiter, for example:

```
jdoe, RN
```

1   Below the Available Caregivers section, click the **Upload Caregivers** icon.
2   Specify the delimiter used in the file.
3   Click **Choose File** to select the file.
4   Select **Clear Current Caregivers** to remove the caregivers currently in the Available Caregivers section. To just add to the existing caregivers, leave the check box blank.

## Copying caregivers from another shift

Use this procedure to populate the Available Caregivers section on the **Assignments** page with caregiver names from another shift.

1 Below the Available Caregivers section, click the **Copy Caregivers from Another Date & Shift** icon.
2 Select the date of the shift being selected.
3 Select the shift to be copied.
4 Select **Clear Current Caregivers** to delete the current caregivers shown in the Available Caregivers section and replace them with the ones being copied.
5 Click **Copy**.

# Adding assignments manually

Use this procedure to manually assign a caregiver or a team of caregivers to a patient. You can also assign the charge nurse, secretary, and relief caregivers. Click the **Notes** icon to add specific instructions or notes about the shift or assignments.

1 Below the Assignments section, click **Add an Assignment**. Fields are displayed within the Assignments section.
2 Drag and drop a caregiver name from the Available Caregivers section to the appropriate field (**Charge**, **Secretary**, **Team**, or **Relief**). Only one caregiver can be assigned to the **Charge** and **Secretary** fields.

   **Note:** Click the blue Manage Relief Activity icon in the assignment fields to

3 Drag and drop a patient name from the Available Patients section to the **Patients** field. You can also remove the patient from an assigned field by dragging and dropping it to another caregiver's field or back into the Available Patients section.
4 In the **Assignment Change Confirmation** window, select the reason for the new assignment.
5 Click **Save**.

## Managing relief activity

Use this procedure to add, edit, or delete relief activities for caregivers.

1 When a caregiver is assigned to relief activity, click the **Manage Relief Activity** blue clock icon.
2 In the **Relief Activity** window, click **Add Activity** or the user name, and specify this information:

   **Relief Caregiver**
   Optionally, select a different caregiver.

**Start**

Click the calendar icon to select a date and specify a start time during the shift indicated, and then press Enter.

**Stop**

Select to view the **Stop** field. Click the calendar icon to select a date and specify a stop time during the shift indicated, and then press Enter.

**Notes**

Optionally, specify notes or click Break, Meal, Meeting, or Off Unit Procedure to have the field filled in automatically.

**3** Click **Save**.

**Note:** To remove an activity, click the **Delete** icon in the row of the activity to be deleted.

## Copying assignments from another date and shift

**1** Below the Assignments section, click **Copy Assignments** icon.

**2** In the **Copy Assignments** window, select the date of the shift and the shift to be copied.

**3** Click **Copy**.

**Note:** The copied information will overwrite all existing data in the target shift.

## Importing caregivers automatically

If you are using a Cloverleaf interface, caregivers can be automatically imported into Staffing Optimizer. Cloverleaf will be configured during installation and an automated process will be created on the sending site to place the accounts file in the correct folder for Cloverleaf to retrieve. The folder is polled every 30 minutes and when a new file is detected, it is processed.

**1** Create a .csv file that contains this information in this format:

```
USERNAME,SKILL,UNIT,SHIFT_START,SHIFT_STOP,HOURS,STATUS
```

STATUS can be blank or Delete. Actions include add, delete, and update.

**2** Put this file in the import folder at `Cloverleaf\cisn.n\integrator\ISOHsite\data\` where *n.n* is your Cloverleaf version number and *ISOHsite* is the name of your Staffing Optimizer site.

This table describes the information to be specified in the .csv file:

| Seq | Name | Type | Length | Required | Valid values | Sample |
|-----|------|------|--------|----------|--------------|--------|
| 1 | USERNAME | String | 100 | Yes | Must map to valid user | JDOE2 |

| Seq | Name | Type | Length | Required | Valid values | Sample |
|---|---|---|---|---|---|---|
| 2 | SKILL | String | 50 | Yes | Must map to existing skill | |
| 3 | UNIT | String | 50 | Yes | Must map to existing unit | |
| 4 | SHIFT_START | String | | Yes | Must parse to date time | 2018-03-17 07:00 |
| 5 | SHIFT_STOP | String | | Yes | Must parse to date time | 2018-03-17 15:30 |
| 6 | HOURS | Number | | Yes | | |
| 7 | STATUS | String | | Yes | "" or Delete | |

## Using Automate Assignments to assign caregivers

The Automate Assignments option lets you select multiple caregivers and have the system assign patients to them. After the assignments have been made, you can make adjustments by manually moving patients to other caregivers.

**1** Below the Assignments section, click **Automate Assignments**.

**2** Select the caregivers to which patients will be assigned.

**3** Click **Automate**. The unassigned patients in the Available Patients section will be assigned to the caregivers that you selected and be displayed in the Assignments section.

# Chapter 5: Questionnaires

Questionnaires are used primarily during the pilot or testing period for an instrument to determine if the instrument meets the needs of the staff. It is important that the staff fill out the questionnaires completely for each shift during the pilot period. Questionnaires may also be used at other times to help determine if the level of staffing is appropriate when compared to the workload. Questionnaires are an important part of the GRASP® methodology. For more information on the GRASP® methodology, see the *Infor Staffing Optimizer for Healthcare Administration Guide.*

To access questionnaires, select **Workload > Questionnaires**.

Select the applicable unit, date, and shift for the questionnaire that you want to view.

More than one questionnaire may exist. To change the selected questionnaire, click the current **Questionnaire** name to show a list of the available questionnaires. Click on the desired questionnaire, and the page will refresh with information for the selected questionnaire. Your administrator may set the questionnaire to be completed by you as an individual or as a team. Request this information from your administrator.

Questionnaires are completed anonymously. If you are filling out a questionnaire as a team, other team members will see your answers but not your identity. However, your administrator can see who answered questions by running a report.

See Reports on page 44.

Each questionnaire consists of these sections:

- Ranked Questions
- Free Text Questions
- Staffing

Complete each section in order as required. If the questionnaire has not been completed, the incomplete sections will be highlighted in red and a note will be displayed at the top of the page to provide direction on what is required to complete the questionnaire.

When the questionnaire has been completed, all headers are displayed in green, and a note is displayed at the top of the page that indicates that "The results of this Questionnaire are valid".

Questionnaires are intended to be completed during the current shift. Do not complete a questionnaire for a shift that occurs in the future. Your administrator may also limit the number of past shifts for which you may complete a questionnaire. If you open a past questionnaire, it is displayed in read-only mode, and a note is displayed at the top of the page.

# Ranked questions

Ranked questions are used to get an overall picture of the level of workload on the shift. The questions generally align with the elements that were defined in the instrument. For more information on instruments and elements, see the *Infor Staffing Optimizer for Healthcare Administration Guide*.

You can select one of these answers for a ranked question:

* Inadequate / Work Left Undone
* Barely Adequate / Minimally Acceptable
* Adequate / Acceptable
* More Than Adequate / Time To Spare
* N/A (Not Applicable)

Select the appropriate answer by selecting the check box in its column. To save your answer, click **Save** on an individual row or to save all answers at once, click **Save** at the bottom of the list of questions.

To clear an answer, click on an individual row, or to clear all answers, click **Clear Values** at the bottom of the section.

If any of the ranked questions are answered as Inadequate / Work Left Undone or Barely Adequate / Minimally Acceptable, then you are required to answer at least one free text question to provide an explanation as to why the staffing was less than adequate. You are also required to complete the Staffing section of the questionnaire to specify changes that would have enabled the staffing to be Adequate / Acceptable.

# Free text questions

Free text questions allow you to explain why the level of Staffing was not Adequate / Acceptable. You are not required to complete this section unless at least one ranked question is answered as Inadequate / Work Left Undone or Barely Adequate / Minimally Acceptable.

Enter your answer by typing into the text box. When one question is complete, click **Save**. You may also continue answering questions and save all answers by clicking the **Save** button at the bottom of the section.

To clear an answer, click the ⨯ (clear) icon. You can clear all answers by clicking the **Clear Values** button at the bottom of the section.

# Staffing changes

Staffing allows you to show what changes to staffing would have enabled the Workload to be Adequate / Acceptable. You are required to complete this section if at least one ranked question is answered as

Inadequate / Work Left Undone, Barely Adequate / Minimally Acceptable, or More Than Adequate / Time To Spare.

Specify Actual Hours or +/- Hours as a numerical value in the appropriate text box. When one skill is complete, click **Save**. You can also continue specifying values, and then save all by clicking **Save** at the bottom of the section.

To clear an answer, click the **clear** icon. You can clear all answers by clicking **Clear Values** at the bottom of the section.

If all ranked questions are answered Adequate / Acceptable, then the +/- column of Staffing will not be applicable. This column will be displayed as read-only, and any values that are specified in this column will not be used to calculate the Total Assessed Hours. However, you may still specify values in the Actual Hours column as needed.

Your administrator may choose to have the Actual Hours populated automatically based on the values displayed in Staffing. If so, you may see values in this field even though you did not specify these values.

See

If ranked questions were answered as More Than Adequate / Time To Spare, then the +/- Hours is expected to be negative because you have indicated that the Shift Staffing was more than Adequate. If the values that are specified in the +/- Hours column are not negative, they are highlighted in blue.

If Ranked Questions were answered as Inadequate / Work Left Undone or Barely Adequate / Minimally Acceptable then the +/- Hours is expected to be positive because you have indicated that the Shift Staffing was less than Adequate. If the values that are specified in the +/- Hours column are not positive, they are highlighted in blue.

# Chapter 6: Reports

Reports provide the ability to view and print current and historical data. Staffing Optimizer includes a number of built-in reports that allow for data analysis according to the GRASP® methodology.

These tables list the built-in Staffing Optimizer reports and provide a description of each report.

## Staffing reports

| Num | Name | Description |
|---|---|---|
| 110 | Daily Staffing | Daily Staffing information as seen on the Staffing page, including a breakdown by group and skill for each shift. Can be used in a prospective setting to determine if planned staffing requires adjustments on a particular units. |
| 120 | Daily Utilization | Daily breakdown by unit and shift of the census, required and actual hours, variance, utilization, and transfer staff (number needed or available). Can be used in a prospective setting to determine if planned staffing requires reallocation of staff to different units. |
| 130 | Staffing Summary | Summarized staffing information similar to that on the **Staffing** page and the Daily Staffing report including a breakdown by group and skill for each shift over a period of time. Can be used to review whether a unit has an appropriate skill mix and patient:staff ratio. |
| 131 | Shift Detail by Day of Month | Daily breakdown of the census, required and actual hours, HPPDs, variance, utilization, and transfer staff (number needed or available) typically run for a full month to show trending by day-of-month. |
| 132 | Shift Detail by Day of Week | Daily breakdown of the census, required and actual hours, HPPDs, variance, utilization, and transfer staff (number needed or available) to show trending by day-of-week. |

| Num | Name | Description |
|---|---|---|
| 133 | Hours over Time | Displays a line graph of the required, budgeted, and actual hours over a period of time. |
| 134 | Hours by Day-of-Week | Displays a bar graph of required, budgeted and actual hours by day-of-week. |
| 135 | HPPDs over Time | Displays a line graph of the required, budgeted, and actual hours per patient per day over a period of time. |
| 136 | HPPDs by Day-of-Week | Displays a bar graph of required, budgeted and actual hours per patient per day by day-of-week. |
| 137 | Staffing over Time | Displays a line graph of each skill's required and actual hours over a period of time. |

## Workload reports

| Num. | Name | Description |
|---|---|---|
| 210 | Patient Totals | Daily breakdown by unit, shift, and instrument of the required workload for each patient. |
| 212 | Patient Workload History | Complete listing of all workload scored on a patient including IRMs. |
| 213 | Workload History | Displays a line graph of the Workload for selected patients over a period of time. |
| 222 | Workload by Patient and Caregiver for Assignments | List of caregivers with their respective p assignments and corresponding workload including percentage of workload for the shift. Can be used to ensure that staffing assignments are equitable. |
| 224 | Continuity of Care | List of patients with their respective caregivers over a period of time. |
| 226 | Workload by Caregiver | List of caregivers with total hours of care and census as assigned. |
| 228 | Workload by Provider | Collation of required hours and census by instrument for individual providers (as scored). |
| 230 | Patient Intervention Detail | Displays those interventions that were selected for each patient by date and shift including individual intervention workload values and the overall workload value. |

| Num. | Name | Description |
|------|------|-------------|
| 231 | Patients with Selected Interventions | Displays the count and total workload Value for selected interventions across instruments including the patients scored. |
| 232 | Intervention Workload over Time | Displays a line graph of the workload for selected i over a period of time. Each data point also shows the selected count for the intervention on that date. |
| 240 | Patients Out on Pass | Lists the signed-out/in date and time for patients that have been out on pass including the duration of time that they were gone. |
| 250 | Missing Workload | Shows patients that did not get workload scored for a particular shift. Highlights those patients that have a workload value applied from a previous shift counting towards the total workload value. |
| 251 | Compliance | Displays compliance as census (number of patients scored) divided by patient count along with utilization and IRM information. Results can be returned as daily details, an executive summary, or a unit trend of data summed monthly. |
| 252 | Compliance by Unit | Displays a bar graph of the compliance as census (number of patients scored) divided by patient count for the selected units. |
| 253 | Compliance over Time | Displays a line graph of the compliance as census (number of patients scored) divided by patient count for a period of time. This report includes the average value and -3 * standard deviation. Any values exceeding the standard deviation should be investigated. |

## Management reports

| Num. | Name | Description |
|------|------|-------------|
| 310 | Weekly Utilization | Shows a weekly view of census, required and actual hours, variance, utilization (required hours / actual hours), and HPPDs for all shifts. |
| 311 | Utilization by Unit | Displays a bar graph of the utilization for the selected units. |
| 312 | Utilization over Time | Displays a line graph of utilization over a period of time including the average and +/- 3 * standard deviation. Any values exceeding the standard deviations should be investigated. |
| 313 | Utilization by Day-of-Week | Displays a bar graph of utilization by day-of-week. |
| 315 | Care Potentially Delivered | Shows a weekly view of census, required and actual hours, variance, potential care (actual hours / required hours) and HPPDs for all shifts. |

| Num. | Name | Description |
|---|---|---|
| 320 | Cumulative Intervention | Lists each instrument's interventions showing the individual workload value along with the count of patients, total workload value, percent of patients, and percent of workload for that intervention. Can be used to identify interventions that are rarely used and can be eliminated and to identify the impact and cost of proposed process improvements. |
| 321 | Cumulative Intervention Unit Trend | Lists the monthly percent of patients and percent of workload data from the Cumulative Intervention report to identify trends in intervention usage. |
| 330 | MIS Code Totals | Summarizes the patient care required h including statistics into MIS categories as required by the Canadian Ministry of Health. |
| 340 | VANUC | VANUC (volume, actual staffing, nursing workload, utilization, costs) displays actual and budgeted patient days, actual, required, and budgeted hours, actual, required, and budgeted HPPDs along with actual and budgeted FTEs, actual and budgeted cost, and IRM information. Can be run as an Executive Summary or as a Trend report showing changes over a period of time by month. |
| 341 | Variance over Time | Displays a line graph of Variance over a period of time including the average and +/- 3 * standard deviation. Any values exceeding the standard deviations should be investigated. |
| 350 | Test "Pilot" Weekly Utilization | Shows a weekly view of census, required, actual and assessed hours, and Infor utilization (required hours / actual hours) and assessed utilization (assessed hours / actual hours) for all shifts and HPPDs as recorded during the pilot for the instrument. |
| 355 | Test "Pilot" Analysis | Summarizes the data from the instrument pilot to aide in the refinement process. |
| 356 | Questionnaire Detail | Summarizes staffing adequacy questionnaire data to aide in the refinement process. |
| 360 | Downtime Workload Form | Provides a printed copy of the instrument in the event that Staffing Optimizer is not available. |
| 370 | Unit Reference Manual | Provides a printed copy of the *Unit Reference Manual* including all information about the unit setup and detailed analysis of the instrument including clinical and Infor math definitions for each intervention including normal time and frequency. |

| Num. | Name | Description |
|------|------|-------------|
| 380 | Indirect Analysis | Provides a printed copy of the indirect care worksheet. |
| 390 | Instrument Definition | Provides a printed copy of the instrument interventions and how they were defined. |

## Quality reports

| Num. | Name | Description |
|------|------|-------------|
| 410 | IRM Totals | Displays detailed Interrater Reliability Monitor (IRM) data indicating if each unit met the threshold for percent agreement. The IRM score is calculated as (total number of agreements) / (total number of agreements + disagreements). |
| 420 | IRM Totals By Provider | Displays detailed IRM data indicating if education on the instrument is needed for an individual provider. |
| 430 | IRM Totals By Rater and Provider | Displays detailed IRM data indicating if there is a significant difference between the rater and provider or between different raters indicating where education is needed. |
| 431 | IRM Reasons for Review | Provides a printed copy of the completed IRM showing the reasons for review allowing the rater to discuss the IRM with the provider and determine if more education and/or review is necessary. |
| 435 | IRM Item Analysis | Displays a detailed analysis of each workload intervention and the number of IRM agreements and disagreements with the reason for the disagreement. Can help to identify if specific interventions and disagreement reasons are contributing disproportionately to inadequate IRM scores. |
| 440 | PCD Totals | Displays detailed percent of care delivered (PCD) data by unit and patient providing data as to the accuracy of the documentation. The PCD score is calculated by adding together the percentage for each intervention and dividing by the number of interventions scored. |
| 441 | PCD Item Analysis | Displays a detailed analysis of each workload intervention and the number of PCD disagreements with the reason for the disagreement. Can help to identify if specific interventions and disagreement reasons are contributing disproportionately to inadequate PCD scores. |
| 490 | Export National Database | Provides data for submission to the Infor national database. |

| Num. | Name | Description |
|------|------|-------------|
| 491 | GRASP National Database time andfrequency | Provides data for submission to the Infor time and frequency database. |

## Statistical reports

| Num. | Name | Description |
|------|------|-------------|
| 510 | Active Carryover | Shows new referrals, active carryovers, and active service recipients in compliance with Canadian MIS guidelines. Results can be returned as monthly details, monthly statistics, or quarterly Statistics. |
| 520 | ADT over Time | Displays a stacked bar graph of admissions, discharges, transfer in, and transfer out over time. |
| 521 | ADT by Day-of-Week | Displays a bar graph of admissions, discharges, transfer in, and transfer out by day-of-week for a period of time. |
| 522 | ADT by Hour-of-Day | Displays a bar graph of admissions, discharges, transfer in, and Transfer out by hour-of-day for a period of time. |
| 530 | ADT History | Displays a list of ADT messages that have been received. |

## Administrative reports

| Num. | Name | Description |
|------|------|-------------|
| 800 | System Options | Lists all System Options |
| 810 | User Management | Displays detailed user information optionally including security settings |
| 820 | Security Profiles | Displays security profiles by category and class |
| 850 | Program Definition | Displays program information |

To run a report, click on the report name, set the parameters, and click **View Report**.

Staffing Optimizer uses a data warehouse to store and organize data for quick access. The data warehouse is populated on a regular schedule, typically once per day. The data warehouse may not include data entered on the current date. For reports that may require data entered on the current date, an option exists to run the report against the transactional database. It is generally recommend to run the reports against the data warehouse whenever possible because these reports will generate much more quickly than those run against the transactional database.

To change the database that is used to generate the reports, select the appropriate option from the drop down list. A note is displayed below the selection indicating the effects of the current selection.

Some reports also provide the option to run the report organized by unit or program. To change this, select the appropriate option from the drop down list. The **Report Viewer** page shows a list of parameters for the selected report.

Each Parameter drop down list is populated based on the previously selected value(s). After selecting parameters, the page performs a post-back to the server to populate the next parameter. After making a selection, it is recommended to click in the white space between parameters before clicking the next parameter to give Staffing Optimizer the opportunity to refresh data for the next parameter. After the appropriate parameter selections have been made, click **View Report**.

Staffing Optimizer stores the selected parameters to expedite running future reports. The next time that a report is run, all but the last parameter is automatically populated based on your previous selections. The last parameter is not selected so that the report is not automatically run when it is opened, allowing you to review the selections. If you must change a parameter, make the change, and then click **View Report** again to refresh the report data.

When a report is viewed, a toolbar is displayed below the parameters. It can be used to:

- Change Page (if the report has more than one page)
- Find Text
- Export
- Refresh

If the report has more than one page, use the **Previous** and **Next** buttons to navigate the pages. Note that the report's pages will not align with the printed pages because that is dependent on the individual printer. To change the zoom level, click on the drop-down list, and select the appropriate option.

- Use the search field to locate text.
- To export the report, select the format, and click **Export**. You will be prompted to open or save the file.
- To refresh the data on the report, you can either click **View Report** or **Refresh**.

Note that the **Print** button may have been hidden by the administrator. This functionality utilizes an Active-X control that may not be allowed to run by your I.T. department.

## Generating reports

**1**  Select **Reports > Reports**.
**2**  Locate the type of report that you want to generate, and click its name.

**3** Specify the parameters for the information to include in the report.

**4** Click **View Report**.

# Scheduled reports

Staffing Optimizer reports can be scheduled to run on a repeated or one time basis. This may be useful for reports that are run on a daily basis or large reports that require an extended amount of time to run. Scheduled reports can be output to a file share or sent to users via email. If you have permission to modify scheduled reports, you can modify reports that have been scheduled by all users.

**Note:** Use care when updating or deleting a scheduled report because the owner of the report may be using it.

Scheduled reports can be delivered to users by email or be saved to a Windows file share.

## Report delivery options

Scheduled reports can be delivered to users via email or can be saved to a Windows file share.

**Email report formats**

This table describes the formats that are available for scheduled reports.

| Format Name | Description |
| --- | --- |
| XML file with report data | An Extensible Markup Language file commonly used to move data between disparate databases |
| CSV (comma delimited) | A comma delimited file that is commonly used to move data between disparate databases |
| TIFF file | An image file |
| Acrobat (PDF) file | A Portable Document Format file commonly used to provide a printer friendly read-only view of the data |
| Web archive | An HTML file |
| Excel | A Microsoft Excel file |

**Windows file share report formats and overwrite options**

Reports that are saved to a Windows file share can be accessed by users with permission to that file share. For more information, contact your system administrator.

This table describes the formats that are available for scheduled reports.

| Format Name | Description |
| --- | --- |
| XML file with report data | An Extensible Markup Language file commonly used to move data between disparate databases |
| CSV (comma delimited) | A comma delimited file that is commonly used to move data between disparate databases |
| TIFF file | An image file |
| Acrobat (PDF) file | A Portable Document Format file commonly used to provide a printer friendly read-only view of the data |
| Web page for IE 5.0 or later (.htm) | An HTML file designed specifically for users of Internet Explorer 5.0 or later |
| Web page for most web browsers (.htm) | An HTML file designed to be rendered in most web browsers |
| Web archive | An HTML file |
| Excel | A Microsoft Excel file |

This table describes the overwrite options.

| Option Name | Description |
| --- | --- |
| Overwrite an existing file with a newer version | Overwrites existing files. Use this option if the data in the report is only useful for a limited period of time. |
| Do not overwrite the file if a previous version exists | Report will not be saved if a file with the same name exists. |
| Increment file names as newer versions are added | Adds "_#" to the end of the file name creating a new file each time the scheduled report is run. |

## Subscription processing options

The subscription processing options can be used to determine how frequently the scheduled report is run. A scheduled report can be run just once or it can be repeated by hour, day, week, or month.

The **Start Time** is used by all of the options as the time at which the report is run. Optionally, the date for **Stop this schedule…** can be used to set an end date for the scheduled report.

• Scheduling a report to run by hour provides an interval option of hours and minutes.
• Scheduling a report to run by day provides the flexibility to run the report on specific days of the week, each weekday, or on a recurring schedule based on the number of days between each run of the report.
• Scheduling the report to run by week allows the user to choose the days of the week and the number of weeks between each run of the report.
• Scheduling the report to run by month allows the user to select the months that the report will run plus the week of the month and days of the week or the calendar days on which to run the report.

## Report parameter values

If you have previously run the selected report, the selected parameters are automatically populated in this section. If not, you will have to manually select all of the parameters.

The parameters vary by report. Some parameters are dependent upon the selection of the previous parameter. After all settings are complete, click the **Save** to save the data and schedule the report.

## Scheduling emailed reports

**1** Select **Reports > Reports**.

**2** Locate the report, and click **Schedule Report** at the end of the row.

**3** On the **Edit Scheduled Reports** page, specify a short description of the report.

**4** In the Report Delivery Options section, specify delivery by **E-Mail**.

**5** Specify this information:

**To:**
Specify the email address of the recipient(s). Use a semi-colon to separate addresses.

**Cc**
Specify the email address of recipients to receive a copy of the email.

**Bcc**
Specify the email addresses of recipients to receive a blind copy of the email.

**Reply-To**
Optionally, specify an email address so that the email appears to be from a user other than the system administrator.

**Subject**
This field is pre-filled with *@ReportName* was executed at *@Execution Time*. *@ReportName* and *@Execution Time* are reserved keyword variables that indicate the name and execution time of the report.

**Priority**
Specify the priority level of the report.

**Report Format**
Select the format for the report.

**Comment**
Optionally, provide a description of the report.

**6** In the Subscription Processing Options section, select **Hour**, **Day**, **Week**, **Month**, or **Once**. Then specify the appropriate information for the selection.

See

**7** Specify the **Start Time** for the report generation.

**8** Specify the **Start** and **End Dates** for the report generation schedule.

**9** If you have previously run the selected report, the Report Parameter Values section is automatically populated. If not, you must manually select all of the parameters.

See Report parameter values on page 53.

**10** Click **Save**.

## Scheduling Windows file share reports

Ensure that users have permission to the file share.

**1** Select **Reports > Reports**.

**2** Locate the report, and click **Schedule Report** at the end of the row.

**3** On the **Edit Scheduled Reports** page, specify a short description of the report.

**4** In the Report Delivery Options section, specify delivery by **Windows File Share**.

**5** Specify this information:

**File Name**
Specify the name of the file to be saved.

**UNC Path**
Specify the address of the file share that will be used to save the file. For example, `\\Server Name\ShareName\FolderName`.

**Report Format**
Select the format for the report.

**Credentials used to access the file share**
Specify the active directory login under which the report will be saved. This user must have read and write access to the UNC path.

**Overwrite options**
Select the overwrite option for the report.

**6** In the Subscription Processing Options section, select **Hour**, **Day**, **Week**, **Month**, or **Once**. Then specify the appropriate information for the selection.

See Subscription processing options on page 52.

**7** Specify the **Start Time** for the report generation.

**8** Specify the **Start** and **End Dates** for the report generation schedule.

**9** If you have previously run the selected report, the Report Parameter Values section is automatically populated. If not, you must manually select all of the parameters.

See Report parameter values on page 53.

**10** Click **Save**.

# Glossary

**budget set**
Date range that applies to a specific unit or budget fiscal period.

**discipline**
A broad job title category that incorporates a definable set of skills. Used to organize jobs.

**division**
A grouping of units.

**fatigue and delay factor**
Based on the layout of the unit, location of supplies, and so on, this is the calculated percentage of time that it takes, for example, to walk a long hall to get supplies or fatigue at the end of the day.

**group**
A collection of patients based on a common characteristic. Similar to patient types in that they can be defined by the kinds of care that patients require.

**indirect analysis**
A list of supplementary activities that staff perform for the patient's care such as cleaning, checking supplies, and attending meetings. Used in the calculation of unit workloads.

**indirect worksheet**
List of interventions that are done in support of the patient instead of directly to the patient.

**instrument**
A defined set of health care tasks, interventions, and protocols that characterize the care that is given to a patient.

**intervention**
An activity that a patient being treated during a shift in a unit might require.

**job**
A skill or set of skills a caregiver can perform. Includes the title of a position and the number of hours it requires annually. Used in conjunction with disciplines and shifts.

**location**
The physical location of a hospital or floor. A location is used to organize divisions.

**non-patient instrument**
An instrument that is used to track indirect analysis activities.

**patient type**
The type of patient based on the type of expected required care. For example, a patient type could be created for patients who require emergency care. You can add and configure the patient types that are assigned to a unit. A patient can be assigned only one patient type at a time, but a patient may be assigned different patient types over the course of care.

**program**
Collection of units, instruments, and disciplines that define a category of care that a facility provides.

**shift**
A time period during which staff are on duty.

**unit**
A department in a hospital, such as a neurology unit or an intensive care unit.

**unit definition**
Characteristics that determine unit behavior.