Patient Flow Portal
Electronic Patient Journey Board (EPJB)

ICU Bed Status Guide:
• Adult ICU
• Paediatric ICU
• Neonatal ICU
• Birthing Unit

V1.2
February 2019
Contacts and Resources

Contact the **NSW Ministry of Health Patient Flow Team** for

- Education and advice around the Patient Flow Systems Framework
- Support and training on the Patient Flow Portal and Electronic Patient Journey Board


Email: patientflow@doh.health.nsw.gov.au

Telephone 02 93919368

**Experts consulted:**

- Dr Michael Nichol – Senior Clinical Advisor, Maternity and Newborn
  Michael.Nicholl@health.nsw.gov.au
- Dr Matthew O’Meara – Chief Paediatrician, Intensive Care NSW, Agency for Clinical
  Innovation matthew.omeara@health.nsw.gov.au

For Application issues:

**State Wide Service Desk** telephone 1300 28 55 33


For **Patient Transport Service** enquiries telephone 1300 233 500


**Further resources:**


**Policy Directive:**

- NSW Critical Care Tertiary Referral Networks and Transfer of Care (ADULTS)
- Critical Care Tertiary Referral Networks (Paediatrics)
- Critical Care Tertiary Referral Networks (Perinatal)


A short video on PTS booking in the PFP is available here:

## Revision History

<table>
<thead>
<tr>
<th>Version</th>
<th>Issue date</th>
<th>Description/Change</th>
<th>Author</th>
</tr>
</thead>
<tbody>
<tr>
<td>V1.0</td>
<td>April 2018</td>
<td>New Release ICU bed status in EPJB</td>
<td>Damian Miners, Richard Yarlett, Danielle Kerrigan</td>
</tr>
<tr>
<td>V1.1</td>
<td>May 2018</td>
<td>Updated access, EDD and W4W steps</td>
<td>Danielle Kerrigan</td>
</tr>
<tr>
<td>V1.2</td>
<td>Feb 2019</td>
<td>Updated with NICU, PICU and Birthing unit content (Release 7.3)</td>
<td>Rory Althorpe</td>
</tr>
</tbody>
</table>
Getting Started

The ability to locate ICU beds across NSW is vital, especially in times of high demand such as a pandemic or disaster.

The Agency for Clinical Innovation (ACI) has been working with eHealth and the Ministry of Health to build ICU fields into the Electronic Patient Journey Board (EPJB), a module of the Patient Flow Portal (PFP). This replaces CCRS/PPRS and provides information on the status of ICU beds across NSW.

The Patient Flow Portal (PFP) also provides an overview of occupancy by ward for a Local Health District or hospital, facilitates the inter hospital transfer process and provides access to a suite of reports.

This user guide shows how to use the ICU bed status fields in the EPJB for improving ICU patient flow and reporting bed availability.

Logging in

All users must have PFP access to use the EPJB. By logging onto the PFP or the EPJB the user is acknowledging that they are abiding by the principles as set out in the NSW Health Privacy Manual and the Electronic Information Security Policy 2013 PD2013_033.

1. Click the PFP login link: http://pfp.healthtech.nswhealth.net/pfp/
2. Enter your Stafflink Log-in Name and Password in the blue “Patient Flow Portal” tab
3. Select StaffLink from the Organisation dropdown menu
Requesting access for the first time

The first time a user logs onto the PFP the Security Administration window opens:

1. Click the Request Access tab
2. Select the Access Level you require from the drop down menu:
   - Ward User – Medical Staff, Allied Health, Registered Nurses (RN’s) and ward clerks/Clinical Support Officers (CSOs).
   - Clinical Manager – Nurse Unit Managers (NUMS), Clinical Nurse Consultants (CNC’s), Clinical Nurse Educators (CNEs) and In-Charge RN’s.
3. Select the LHD, Facility and Ward from the Facility List. Drag and drop across to the Access Table on the right.
4. Click Save
5. Click the approver’s email address to email requesting approval
6. Click My Access to review the progress of your request

Requesting access – deactivated user

After 3 months of inactivity your access will be deactivated. When you log in, you will see the same screen as before your access was initially approved. Follow the same steps as above to re-request access.
Accessing the EPJB Module

1. Click the EPJB icon to view the EPJB module

![EPJB Module Image]

2. Use the dropdown menus to select the **Facility** and **Ward** if required, then click **Select Ward**

![Select Ward Image]

PFP and EPJB User Preference Screen

All Patient Flow Portal (PFP) users, except Ambulance, can set up their own user preferences to take them directly to a frequently accessed ward.

1. Click on the **StaffLink** number to open the Security Administration window

![StaffLink Image]

2. Click the **User Preference** tab

3. Use the **Login Module** dropdown menu to select EPJB

4. Use the **LHD**, **Facility** and **Ward** dropdown menus to select options as required.

5. Click **Save**
EPJB Actions
There are a number of different ways to perform many of the tasks to be actioned in the EPJB.

Right Click menu
Right Click anywhere in a patient’s row and select an action from the pop-up menu to:

- Add an Inter-Hospital Transfer
- Add an Inter-Ward Transfer
- Add or Edit a Patient Transfer Service request
- Add or Edit a Waiting for What
- Edit the Nursing Handover notes.

Direct data entry
Fields such as EDD, Discharge Plan, Non-clinical Notes and Isolation Requirement can be edited by clicking directly into the field and entering free text, or selecting from available options.

Open the Patient Details window
Double-click anywhere in a patient’s row to open the Patient Detail Window. This contains a series of tabs which can be used to update detail or request services.
ICU EPJB Column Template

There are multiple data columns available for your EPJB display. Below is the standard template example for each type of ICU/Birthing Unit:

Neonatal ICU

Paediatric ICU

Adult ICU

Birthing Unit

Refer to the EPJB User Guide for a comprehensive description of all EPJB data fields available.
# Updating the EPJB

## Summary of updates required by ward type

The below information within the EPJB must be updated as changes occur and checked every four hours as a minimum to ensure it is current and correct.

<table>
<thead>
<tr>
<th>Ward type</th>
<th>Bed Availability / Consultant Details</th>
<th>Important EPJB Columns</th>
<th>STEP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult ICU</td>
<td>• Enter bed availability for all Nurse Dependency ratios.</td>
<td>• Estimated Discharge Date (EDD)</td>
<td>Update ward STEP at least every 4 hours</td>
</tr>
<tr>
<td></td>
<td>• Enter the name and mobile number of the ICU Consultant on duty.</td>
<td>• Respiratory Support Status (Resp)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Nursing Dependency (Nur Dep)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Fit for Discharge (Fit for DC)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Waiting for What (W4W)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Inter Ward or Inter Hospital Transfer (IWT/IHT)</td>
<td></td>
</tr>
<tr>
<td>Paediatric ICU</td>
<td>• Enter bed availability for 1:1 and 1:2 Nurse Dependency ratios.</td>
<td>• Planned Discharge Date (PDD)</td>
<td>Update ward STEP at least every 4 hours</td>
</tr>
<tr>
<td></td>
<td>• Enter the name and mobile number of the Consultant/Fellow on duty.</td>
<td>• Respiratory Support Status (Resp)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Nursing Dependency (Nur Dep)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Fit for Discharge (Fit for DC)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Waiting for What (W4W)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Inter Ward or Inter Hospital Transfer (IWT/IHT)</td>
<td></td>
</tr>
<tr>
<td>Neonatal ICU</td>
<td>• Enter bed availability for all Nurse Dependency ratios.</td>
<td>• Post Menstrual Age (PM Age)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Enter the name and mobile number of TWO ICU Consultants on duty.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Birthing Unit</td>
<td>Enter the name and mobile number of TWO Consultants on duty.</td>
<td>• Estimated Discharge Date (EDD)</td>
<td>Update ward STEP at least every 4 hours</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Respiratory Support Status (Resp)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Nursing dependency (Nur Dep)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Waiting for What (W4W)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Inter Ward or Inter Hospital Transfer (IWT/IHT)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Good to Go (G2G)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Plurality (Plu)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Labour Status (Labour)</td>
<td></td>
</tr>
</tbody>
</table>
Updating the Bed Availability and Consultant Details

The ward team of Adult ICU, Paediatric ICU, Neonatal ICU, and Birthing Units must update the Bed Availability and/or Consultant Details in the EPJB when changes occur.

A new icon displays in the top, right corner of the EPJB for these wards. The icon is red when it requires updating, and changes to green if it has been updated within the minimum timeframe.

- Adult, Paediatric and Neonatal ICUs must be updated at least every 4 hours.
- Birthing Units must be updated at least every 8 hours.

The ICU NUM/MUM or team leader is required to enter and update the information, which will then output on the state-wide report.

To ensure that others have visibility of your ICU availability, update the status as soon as the change occurs. This will reset the timer for another 4 or 8 hours.

<table>
<thead>
<tr>
<th>Step</th>
<th>Action</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Click the icon in the EPJB</td>
<td>A pop-up window displays (see example below)</td>
</tr>
</tbody>
</table>
| 2.   | Enter the current possible number of available beds for each nurse dependency ratio (ICU Units only). See important note below. | Leave blank if none  
Not applicable for Birthing Unit |
| 3.   | Enter the name(s) and mobile number(s) of the current consultant(s) in charge (ICU & Birthing Units) | Birthing Unit and Neonatal ICU require 2 consultant contacts  
If there is no change since the last update, click No Changes. The icon will display green, and the timer is reset for another 4/8 hours. |
| 4.   | Click Save | The icon changes to green |
Example Bed Status update window for a Neonatal Ward

**Important Note:** the Bed Availability number is NOT the total number of physical beds, but the number of beds that you *could* currently service based on:

- Actual physical beds
- Nursing/medical officer staffing capacity
- Other factors such as ventilation equipment and current patient acuity

For example, if you have 2 physical beds, and 1 available nurse, you *could* accommodate:

- 1 patient with a 1:1 Nurse Dependency, OR
- 2 patients with a 1:2 Nurse dependency.

So you would enter ‘1’ against the 1:1 Nurse Dependency, and ‘2’ against the 1:2 Nurse Dependency.

**Estimated/Planned Date of Discharge (EDD or PDD)**

The Estimated Discharge Date (EDD) (in Adult and Paediatric ICUs), or Planned Discharge Date (Neonatal ICU) is the likely date that a patient will be transferred from ICU. This may be to; an inpatient ward as an Inter Ward Transfer (IWT), Inter Hospital Transfer (IHT) or Discharge (Good to Go (G2G)) from ICU to home.

If a patient is clinically ready to be transferred but is delayed due to an issue with service/diagnostic/etc., then their EDD *should not be changed*. This is so the delay to transfer can be captured. By identifying delays, transfer processes can be improved. The most common delays for patients should be tracked. This data can be then aggregated to understand the main constraints in the system.

1. Click the EDD/PDD box for the required patient
2. Select the EDD/PDD date from the calendar
3. Click **Update**

   - Note: the EDD/PDD # field will automatically display the number of days before/after the EDD Date.
• Expired EDDs will display in a red cell and the EDD # will be negative (-).
• They must be either clinically redefined to match the patient's plan of care, or have a W4W entry added (see below for details)

• To display EDD information mouse-over the EDD field in the EPJB.
• This can be changed directly in the EPJB or the Patient Details window.

**Respiratory Support status**
Use the Respiratory support status field to indicate the type of respiratory support the patient receives as required.

• Click the Resp field beside the required patient and select from the options in the dropdown menu.

• This may also be selected from the Patient Details window > Patient Info tab.

**Nursing Dependency status**
The nursing dependency status indicates the nurse to patient dependency ratio. This may be 1:1, 1:2, 1:3, 1:4 or <1:1 (more than 1 nurse for a patient)

• Click the Nur Dep field beside the required patient and select from the options in the dropdown menu.

• This may also be selected from the Patient Details window > Patient Info tab.
Fit for Discharge

Fit for discharge is used to record patients that are medically cleared for discharge/transfer from Adult/Paediatric or Neonatal ICU

- Click the **Fit for DC** field beside the required patient and select yes or no in the dropdown menu.
- This may also be selected from the **Patient Details window > Patient Info** tab.

Waiting for What (W4W)

Waiting for What (W4W) is used to record delays to care or discharge so that they can be fixed and analysed to improve patient care.

All expired EDDs should have a W4W. Do not change an EDD if the patient is clinically ready to be discharged or transferred.

Add a new Waiting for What

1. Right-click anywhere in the patient’s line in the EPJB and select Add/Edit W4W from the pop-up menu.

2. Click the Green Plus to add a new W4W reason.

3. Select the required tab, then click the appropriate Waiting for What reason.

Notes:
- The **Referrals** tab has sub-tabs available to select from
- Some Reasons (e.g. Cardiac) have sub-reason options to select from.

4. Enter **Notes** and a **Start Date**.
5. Click **Save**
Edit or Close an existing Waiting for What

1. **Right**-click anywhere in the patient’s line in the EPJB and select Add/Edit W4W from the pop-up menu.

2. Edit using any of the following options:
   - Click 🖌️ to edit the notes
   - Click 🗑️ to delete the W4W (e.g. if created in error/no longer applicable)
   - Enter a Close Date and time to remove the W4W when it has been resolved

Inter Ward Transfer (IWT) and Inter Hospital Transfer (IHT)

An Inter Ward Transfer (IWT) or an Inter Hospital Transfer (IHT) can be requested, updated or cancelled by the EPJB summary or the patient details window.

Request a transfer in the EPJB summary:

1. **Right**-click anywhere in the patient’s line in the EPJB and select Add IWT or Add IHT

2. Complete the fields shown and click on Save
   
   **Note:** Mandatory fields are marked with an *

3. For IHTs, click Add Facility.
4. Use the search field to locate the required Facility and Doctor
5. Click Save
6. A pop-up message displays if there is no PTS booking. Select Yes or No as required.

Request a transfer in the patient details window:

1. Double-click anywhere in the patient’s line in the EPJB
2. Click the Transfer/PTS tab
3. Click the green plus icon for IWT or IHT

View the status and/or edit an IWT or IHT

1. Double-click anywhere in the patient’s line in the EPJB
2. Click the Transfer/PTS tab
3. To cancel or edit, click the edit icon next to the open transfer in the IWT or IHT section
4. Update as required, or click Cancel IHT/IWT
**Good to Go (G2G)**

Good to Go (G2G) can be used to highlight today's confirmed discharges so that the whole team are aware, and the Patient Flow manager can see discharges at facility level.

G2G should only be entered when a patient is for discharge home or transfer to another facility.

G2G can be completed by clicking the G2G field in the EPJB summary, or the G2G section in **Patient Details > Patient Info** tab

From the Patient list view

1. Click the G2G column and select from the drop down menu

The entry will be seen in the following colours

- Mousing over a “?” or “Yes” entry will show the who last updated and when.
**Post Menstrual Age (PM Age) (Neonatal Wards Only)**

PM age in weeks and days is automatically updated if there is a gestation age in the Mother’s data in EPJB. If this column is not automatically populated, enter it manually.

PM Age can also be entered directly into the PM Age section in **Patient Details > Patient Info** tab.

1. Click the **PM Age** column and enter the number of weeks and days by typing in the number, or using the up/down arrows.
2. Press the **Enter** key to confirm

![PM Age Table](image)

**Plurality (Plu) (Birthing Unit Only)**

Use the Plurality field to enter the number multiple births.

Plurality can also be selected directly in **Patient Details > Patient Info** tab.

1. Click the **Plu** column and select the number of babies from the dropdown menu

![Plurality Dropdown](image)

**Labour Status (Labour) (Birthing Unit Only)**

Labour status is reported in the Neonatal and Birthing Unit Bed Status Snapshot, so it’s important to keep it up to date in the EPJB.

Labour status can also be updated directly in the **Patient Details > Patient Info** tab.
1. Click the **Labour** column and select the current status from the dropdown menu.

---

**Short Term Escalation Plan (STEP)**

EPJB users can view the STEP level for their Facility, Ward and ED in the top right of their EPJB screen.

Clinical Managers can change the STEP level on the EPJB by clicking on the drop down arrows when they are logged in.

Mouse over the STEP colour will show the level, description and update details.

---

**STEP Levels relate to your local facility business rules.**

<table>
<thead>
<tr>
<th>STEP Number and Colour</th>
<th>Level</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td><strong>Business as Usual</strong></td>
<td>Adequate Capacity to sustain core business; patient flow systems functioning and maintaining performance.</td>
</tr>
<tr>
<td>1</td>
<td><strong>Moderate Compromise</strong></td>
<td>Moderate compromise to core business activities as identified by Demand or Capacity mismatch triggers; Thresholds Breached.</td>
</tr>
<tr>
<td>2</td>
<td><strong>Severe Compromise</strong></td>
<td>Severe Compromise to core business activities as identified by Demand or Capacity mismatch triggers; Disruption intensified.</td>
</tr>
<tr>
<td>3</td>
<td><strong>Extreme Compromise</strong></td>
<td>Extreme compromise to core business activities; All contingencies fully operational.</td>
</tr>
</tbody>
</table>
ICU Bed Status Reports

The PFP Report Module provides summary reports of ICU bed status which can be downloaded in PDF or Excel formats. This will display the information in real time.

1. Click the Reporting Icon to access the reporting module

2. Click Executive Reports to expand the section

3. Click the required report.

Select from:
- ICU Bed Status
- ICU Bed Status Overview
- Neonatal and Birthing Unit Bed Status
- Paediatric ICU Bed Status
4. Use the radio button to select either PDF or Excel

5. Click Open Report

Adult ICU Bed Status report

- The report totals include available beds that have not been updated in the last 4 hours
- Grey coloured cells mean data has not been updated in the last 4 hours
- Green coloured cells mean more than one bed is available

ICU Bed Status Snapshot

<table>
<thead>
<tr>
<th>Ward Code</th>
<th>Total number of beds...</th>
<th>Total number of patients...</th>
<th>Consultant</th>
<th>Last Updated By</th>
<th>Last Updated Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Agreed ICU Platform</td>
<td>Physical Capacity</td>
<td>Available 1:1 Beds</td>
<td>Available 1:2 Beds</td>
<td>Pending Admit</td>
</tr>
<tr>
<td>State Total</td>
<td>493</td>
<td>666</td>
<td>26</td>
<td>41</td>
<td>11</td>
</tr>
<tr>
<td>Tertiary - Level 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Concord Hospital</td>
<td>2N ICU</td>
<td>16</td>
<td>11</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>John Hunter Hospital</td>
<td>ICU</td>
<td>24</td>
<td>29</td>
<td>2</td>
<td>2</td>
</tr>
</tbody>
</table>

ICU Bed Status Overview

- Provides a snapshot of the STEP status and 1:1 bed availability of each adult ICU ward across the state.
- Sub ward type is included
- Only the Ward STEP is colour coded (not facility)
Neonatal and Birthing Unit Bed Status Snapshot

- Provides a snapshot of the bed availability of each Neonatal and Birthing Unit ward across the state.
- Wards are displayed in alphabetical order by hospital name.
- The Sydney Children’s Hospital at Randwick Paediatric ICU ward can accommodate Neonatal ICU patients. Bed status is available via the Paediatric ICU Bed Status Snapshot report.

![Image of Neonatal and Birthing Unit Bed Status Snapshot]

<table>
<thead>
<tr>
<th>Facility and Ward colours reflect the current STEP (or white if not updated).</th>
<th>Available beds that have not been updated in the last 4 hours are included in totals.</th>
<th>Wards with 1 or more available beds are coloured green.</th>
</tr>
</thead>
</table>

Paediatric ICU Bed Status Snapshot

- Provides a snapshot of the bed availability of each Paediatric ICU Unit ward across the state.
- Fields are colour coded according to the same rules as above.

![Image of Paediatric ICU Bed Status Snapshot]