

A virtual path providing help to on-the-move clinicians

Remote implementation and go-live of CareEvent helps support easy access to timely patient status information for multi-tasking caregivers on the go

Who

Hospitals and acute care facilities.

What

Virtual implementation and launch of CareEvent.

Why

Restricted access to facilities, travel limitations and increased pressure on staff can make it difficult to implement new programs and solutions onsite.

Remote activation and training provide more flexibility and shorter timelines so care systems can get up and running quickly even during times of extreme stress and pressure.

Summary

Hospitals eager to implement CareEvent – an enterprise event management solution that sends alarm notifications from bedside monitors to smart devices – were abruptly faced with immediate and ongoing restrictions to their physical sites due to COVID-19. At the same time, it became even more important for caregivers to have critical alarm data at their fingertips, making it imperative to find a way to implement and activate CareEvent quickly and from afar.

Challenge

Programming CareEvent virtually is possible without significant process adjustments because it does not require new hardware and Philips experts are able to remote into the software to program and test functionality. The primary challenge was how to transfer the offline processes such as clinical assessments, workflow design and training to a virtual format.

"We were uncertain about how the training would be received as our staff is used to in-person sessions. However, when we completed the education component, our staff told us, of all the training they have had for the new hospital, this was by far the best."

Leader, Clinical Integration Systems



"Our customers were fighting to save lives when COVID-19 reached their local regions, there wasn't any time to waste. It was imperative to adjust quickly and find a way to deliver CareEvent remotely without increasing the burden for customers, especially given the significant strain on resources and staff." Larissa Dmytriw, Nurse Clinical Specialist, Philips.

Approach

The traditional CareEvent implementation model typically includes a five-to six-week onsite project schedule from clinical assessment through go-live. Philips was able to efficiently pivot to a remote model by partnering closely with the individual hospitals to shift all critical steps to a virtual delivery model. In addition to building the server, programming the solution and completing the rigorous testing protocols remotely, the following site-based components were fulfilled through close collaboration with each hospital's clinical education team:

 Clinical assessment – Philips completed virtual walk-throughs of the facilities and provided input forms for the clinical education team to efficiently share key data regarding demand, use and configuration.

- Equipment evaluation Philips worked closely with the facilities to understand their existing equipment and device footprint.
- Workflow analysis Through collaboration sessions, the hospitals and Philips mapped and documented the current clinical workflows.
- Education Using an onsite clinical educator to help set up classrooms and proctor training sessions, Philips provided fully remote education using a collaboration platform, webcams and existing customer equipment.

Keys to success

- Close collaboration with onsite support from the hospitals is critical
- Establish a communication protocol up front to help ensure it works for all team members
- Make training sessions as flexible as possible so that all staff can easily participate
- Build in refresher courses at appropriate posttraining intervals
- Embrace the advantages and opportunities virtual provides – they are many!

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