

All Staff: C&W CST Daily Practice Update



Date: March 11, 2022

Daily Practice Updates → [What's New in CST Cerner Help](#)



Zoom support is available 24/7 via *Launchpad*  and *Citrix Storefront/Enterprise Apps*  [Details](#)

<https://zoom.us/join> Meeting ID: 652 5721 0705 Password: 084973

Key Issues

[8] New Practice topics including:

- Daylight Savings Sunday March 13th at 2:00am
- Team Communication - Situation Awareness
- Closed Loop Medication Management Good Habits

View past Daily Practice Updates → [What's New in CST Cerner Help](#) 

| Topic | Why Is It Important? | Practice |
|----------------------|--|---|
| Daylight Time Change | What to expect with the CST Cerner system during Daylight Time change. | <p>CST Cerner - Daylight Time Change. At 2 a.m. PST on Sunday, March 13, the time will leap forward to 3 a.m. PDT, due to the daylight time change. CST Cerner will be available and fully functional during the time change.</p> <p>For providers who order PowerPlans with days of treatment, read this memo regarding an alert that may be observed in the days preceding daylight savings time.</p> <p>There will be no changes in system functionality after the time change.</p> |

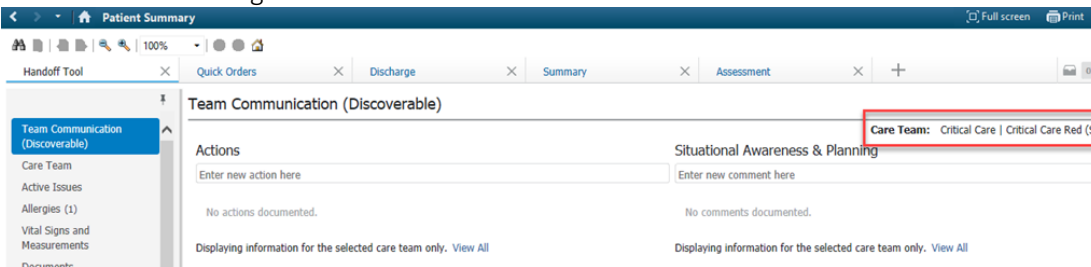
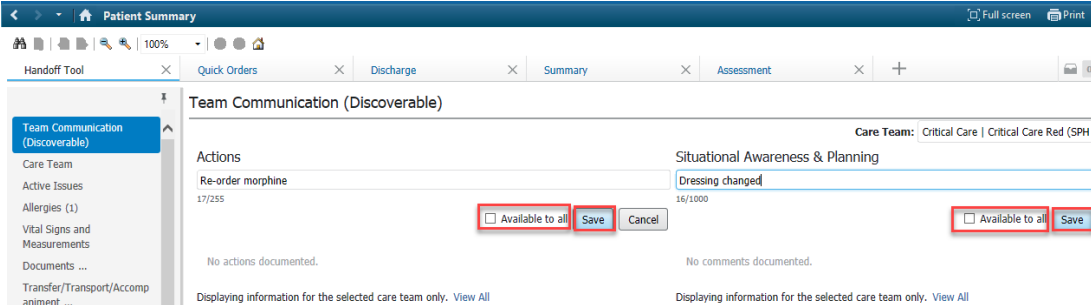
Click here for the latest update [CSTCernerHelp](#)

CSTcw@cw.bc.ca our.CSTproject.ca/cw

CST is a joint initiative of VCH, PHSA and PHC

All Staff: C&W CST Daily Practice Update



| | | |
|---|--|--|
| <p>Team Communication: Selecting applicable care team and “Available to all” before adding actions/ comments</p> | <p>Some patients are assigned to more than 1 Care Team, selecting applicable Care Team ensures relevant Actions and Comments are displayed. Selecting “Available to all” is necessary for other interdisciplinary care team members to access actions/comments</p> | <ul style="list-style-type: none"> In the Handoff Tool, Team Communication (Discoverable) is available to document Actions/ Comments. If a patient is assigned to more than 1 care team, selecting the applicable care team is necessary for specific care team comments to display in “Actions” and “Situational Awareness & Planning”  <ul style="list-style-type: none"> Selecting “Available to all” before saving comments ensures all interdisciplinary care team members can review the actions/comments, edit as necessary, and delete comments no longer applicable.  |
| <p>Team Communication: Situational Awareness & Planning Documentation</p> | <p>Documentation in Team Communication is discoverable and part of the client’s health record (chart)</p> | <p>Documentation in Team Communication (Discoverable) remains in the client’s record/chart. Content in Team Communication is patient centered, clear, concise, factual, objective, and timely to align with documentation practice standards and principles. For more information, please refer to VCH/PHSA/PHC Documentation Policy</p> |

Click here for the latest update [CSTCernerHelp](#)

CSTcw@cw.bc.ca our.CSTproject.ca/cw CST is a joint initiative of VCH, PHSA and PHC

All Staff: C&W CST Daily Practice Update



| Disposal of FormFast printer ink rolls | FormFast printer ink rolls include patient information | For clerks and others with FormFast printers: FormFast printer ink rolls should be disposed in confidential recycling | | | | | | | | | |
|--|---|---|--|--|--|--|--------------|-------------------|-------------------|------------------------------|------------|
| Do not copy and paste images into documentation | <i>Cutting and pasting images</i> into the system is not currently supported and causes multiple downstream issues, such as Excelleris distribution failures. | Only text is to be inputted into dynamic documentation. Documents with images, pictures, or other visuals should continue to be placed in the patient's chartlet. Images placed into the chartlet can be scanned by Health Records. | | | | | | | | | |
| Medication/Omniceil Tips | | | | | | | | | | | |
| Closed Loop Medication Management (CLMM) Good Habits | Using CLMM is proven to reduce medication errors and promote medication safety | Please remember that following the steps of CLMM is best practice. Avoid bad habits and workarounds to improve patient care. This included using loose ID bands/stickers for scanning instead of scanning the ID band on the patient. Practice Pointer Reference: Med Safety Practice Pointer CLMM | | | | | | | | | |
| Medication Labels from Omnicell | Understanding information on Omnicell printed labels decreases frustration | Labels from Omnicell reflect the product and not the patient's specific dosing information and require additional steps when signing off a medication. For full clear steps on multidosed orals and injectables see: CST CERNER Help: Scan Multidosed Medications | | | | | | | | | |
| Lab Tips | | | | | | | | | | | |
| Sunquest Order Visibility | Both Nursing and Lab staff use Sunquest Collect to view, collect, and generate labels for specimen collection. The information each group is able to see on the screen differs. | Below is a comparison table to clarify what users are able to view on their Sunquest Collect screens. <table border="1" data-bbox="821 1175 1997 1354"> <thead> <tr> <th colspan="3" data-bbox="821 1175 1997 1240">Sunquest (SQ) Order Visibility: Comparison of Nurse vs Lab Views</th> </tr> <tr> <th data-bbox="821 1240 1087 1297"></th> <th data-bbox="1087 1240 1507 1297">Nursing View</th> <th data-bbox="1507 1240 1997 1297">Phlebotomist View</th> </tr> </thead> <tbody> <tr> <td data-bbox="821 1297 1087 1354">Applications Used</td> <td data-bbox="1087 1297 1507 1354">CST Cerner SPTL & SQ Collect</td> <td data-bbox="1507 1297 1997 1354">SQ Collect</td> </tr> </tbody> </table> | Sunquest (SQ) Order Visibility: Comparison of Nurse vs Lab Views | | | | Nursing View | Phlebotomist View | Applications Used | CST Cerner SPTL & SQ Collect | SQ Collect |
| Sunquest (SQ) Order Visibility: Comparison of Nurse vs Lab Views | | | | | | | | | | | |
| | Nursing View | Phlebotomist View | | | | | | | | | |
| Applications Used | CST Cerner SPTL & SQ Collect | SQ Collect | | | | | | | | | |

Click here for the latest update [CSTCernerHelp](#)

CSTcw@cw.bc.ca our.CSTproject.ca/cw

CST is a joint initiative of VCH, PHSA and PHC

All Staff: C&W CST Daily Practice Update



| | | | | |
|--|--|---|---|--|
| | | <p>Blood Orders</p> <ul style="list-style-type: none"> Look Back /Look Forward | <p>Orders that are BOTH Unit Collect and Lab Collect</p> <p>20 hours into the Past 12 hours into the Future</p> <p>Not customizable by the user.</p> | <p>ONLY orders that are Lab Collect</p> <p>20 hours into the Past 8 hours into the Future</p> <p>Customizable to smaller time windows, based on user settings.</p> |
| | | <p>Non Blood Orders (e.g. urine, sputum, swabs)</p> <ul style="list-style-type: none"> Look Back /Look Forward | <p>72 hours into the Past 12 hours into the Future</p> | <p>Non-Blood Orders default to Unit Collect when ordered. (Not visible to lab on SQ Collect)</p> <p>If ordered as Lab Collect, default is 20 hours into the Past 8 hours into the Future</p> |
| | | <p>Priorities – STAT, SHA, Urgent, Timed, AM Draw, Routine</p> | <p>All</p> | <p>All</p> |
| | | <p>Order Statuses Visible in CST Cerner SPTL Only</p> | <p>CST Cerner SPTL only:</p> <p>Ordered Ordered (Pending Collection) Ordered (Collected) Future (On Hold) Discontinued</p> | <p>N/A</p> |
| | | <p>Order Status Visible in CST Cerner SPTL & SQ Collect</p> | <p>Uncollected Orders (e.g. Ordered)</p> | <p>Uncollected Orders (e.g. Ordered)</p> |

Click here for the latest update [CSTCernerHelp](#)

CSTcw@cw.bc.ca our.CSTproject.ca/cw

CST is a joint initiative of VCH, PHSA and PHC

All Staff: C&W CST Daily Practice Update



Note:

- SPTL refers to Single Patient Task List in CST Cerner
- SHA refers to Special Handling

Practice and Workflows Under Review

While transitioning to CST Cerner, some changes in practice have been identified and are being looked into including investigating the impact, understanding areas affected and identifying best solutions for safe practice. This also includes aiding in the creation or revision of needed supporting clinical documents and educational materials.

The following issues have been raised and work is being lead or supported by professional practice:

- Orders Management
 - Clarity will be coming around roles and responsibilities in managing orders within CST Cerner. This includes what is within scope of nursing practice in modifying or canceling/re-entering orders and it remains a provider responsibility.
- Chart Hygiene
 - A [Chart Check Checklist](#) has been created to guide staff in maintaining chart hygiene in lieu of the previous paper checklist used.
 - Additional work will be done after clarity around Orders Management is completed.
- PEWS/Sepsis Alert Age Parameter
 - To provide a better standard of care, changes were made as literature and expert opinion supports the use of CTAS age ranges. The CTAS age ranges are narrower and more specific; therefore, more accurate than the current paper based 6 age ranges and will result in less false positives for heart rate, respiratory rate, PEWS, etc. A paper system could not support additional age ranges; however, a computer system can.
- Patient Transfers
 - Transfers have always been a complex workflow and continue to be challenge. Additional information will be shared as available.

Please continue to reach out to CW practice email with questions/concerns/insights/resources at email: CWCSTPractice@cw.bc.ca

Click here for the latest update [CSTCernerHelp](#)

CSTcw@cw.bc.ca our.CSTproject.ca/cw

CST is a joint initiative of VCH, PHSA and PHC