WardWatcher

(2020 Version)

Administrator Functions

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Section 1: General

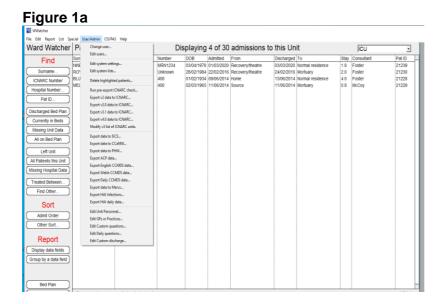
WardWatcher has two main access levels: User and Administrator.

User level is the common level for unit wide generic users allowing data entry and viewing of records, as well as some searching.

Someone entering WardWatcher at an Administrator level has additional access which allows them to modify many aspects of WardWatcher's behaviour.

Access level is decided when setting up a password, with administrator level passwords usually being available to senior nursing/medical staff or audit staff.

This booklet describes some of the additional functions available to anyone with an administrator password. Administrator functions are accessed through the **User/Admin** menu on the **Patient List** (Figure 1a).



If you are logged on to WardWatcher as a 'User' this option changes to Users and prevents access to most of the options we will now discuss.

NB: Remember if accessing WardWatcher in an open area (eg ICU or HDU), to log off as an Administrator and log back on as a User once you have finished.

Section 2: Modifying and Changing Users

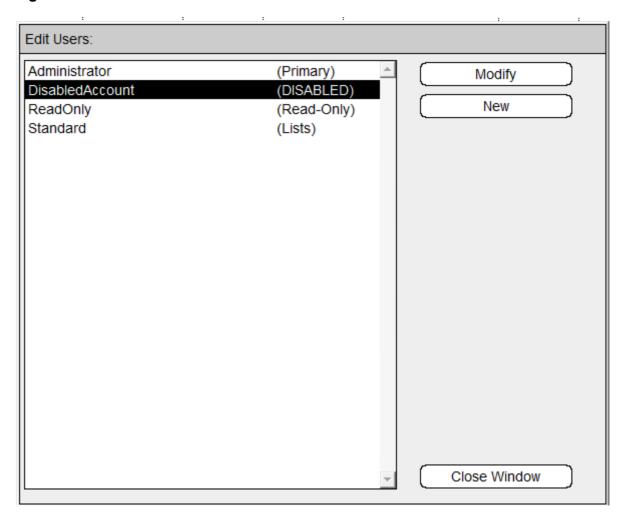
2.1 Change User

Change User (first option in user/admin list, Figure 1a), allows you to re-enter WardWatcher at a different password level without first quitting and restarting the program. Selecting Change User presents the same password dialog box which you encounter when you start WardWatcher by double-clicking the WardWatcher icon on the Windows desktop.

2.2 Edit Users

Edit Users 2nd from top in the user/admin tab allows the Administrator to add new users, delete users and modify passwords and/or access of current users (Figure 2a).

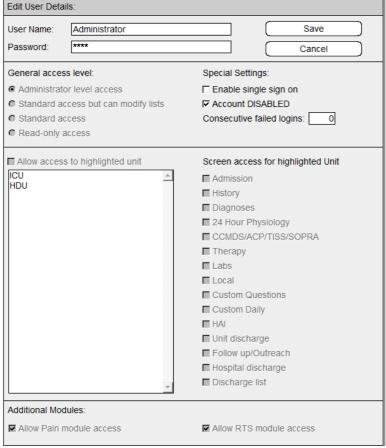
Figure 2a



2.2.1 Deleting a User- users cannot be deleted but their accounts can be disabled if no longer in the unit.

Click on the user to be inactivated once to highlight (Figure 2a), modify. (Figure 2b) then tick the button that says account disabled and save.

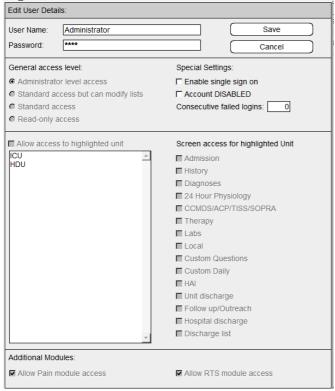
Figure 2b



2.2.2 Adding a New User

Click on New (Figure 2a) select New and the page below (Figure 2c) will appear.

Figure 2c



First enter **User Name**, then the access level you want this user to have (radio buttons and options at top right of screen, Figure 2b):

- Administrator level allows full access to all units as described in this booklet and should be reserved to senior staff that require full access including reports.
- Standard access but can modify lists enables user to update lists such as consultants but limits access to reports.
- **Standard access** generally known as User access, allows User to input data, view records and some access to searching and reporting. This is the common level for unit wide generic Users.
- Read only access has recently been added and would allow a view-only option.

If there is more than one unit on the same server (multi user system) then further access rights must be decided if the level of user is not Administrator level access. So if for instance you wanted to set up a new user with standard access to an ICU member of staff you may wish for them to have access to all screens in ICU but limited access in other units.

Firstly click on ICU in the bottom left hand box (Figure 2b) to highlight, now click in the box above this (to the left of **Allow access to highlighted unit)**. This will change the buttons to the left of the various pages in WardWatcher (long list to bottom right of screen), from grey to white. Now click on all the pages you would like this user to have access to.

Next, click on HDU then **Allow access to highlighted unit**, now click on the pages you would like the user to have access to in this unit. If you do not choose any page options, the user will be able to view the Bed Plan only in HDU. Access levels should be decided locally, please contact SICSAG staff if you have any queries.

Now enter a password by firstly deleting the four stars in the **Password** box and then entering a new password. Click OK. You will be asked to confirm the password, re-enter password and click OK. Click OK to finish.

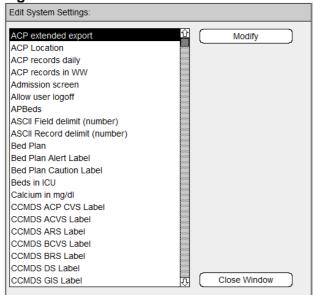
2.2.3 Modifying an Existing User

Click on User name (Figure 2a) then Modify. Change access as required.

Section 3: Editing System Lists

Edit System Settings brings up a list of system settings which the Administrator can modify.

Figure 3a



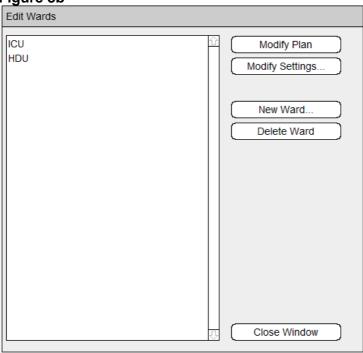
To modify any system parameter, simply click on and highlight the appropriate parameter and then click on the **Modify** button. A dialog box will appear which will allow you to modify the selected parameter. The nature of the dialog box will be determined by the nature of the parameter which you have chosen to modify.

Only current fields relevant to SICSAG are discussed below.

3.1 Bed Plan

This parameter allows you to create, modify and delete Bed Plans and Settings. There is one Bed Plan for each unit (Figure 3b). Most hospitals will have multiple units on a single version of WardWatcher (Multi-user system), with a few hospitals remaining as single-user systems (WardWatcher is only available on one computer).

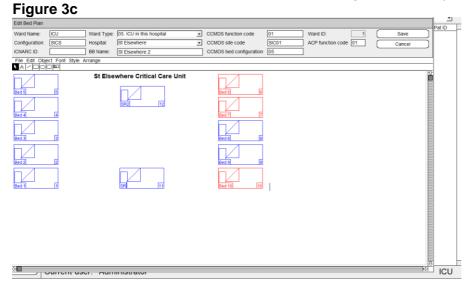
Figure 3b



3.1.1 Modifying the Bed Plan

To modify a Bed Plan, simply select the Bed Plan you wish to modify (left hand box, Figure 3b) to highlight it and then click on the **Modify Plan** button.

The Bed Plan screen presents a drawing environment similar to that used when you create report templates. See Section 4 in the Searching and Reporting booklet for more information about the available drawing and selection tools which would enable you to change text etc on the Bed Plan.



The various fields at the top of the screen (Figure 3c) are set by SICSAG and should not be changed without discussion with a member of the SICSAG team.

At the top of the Bed Plan is a palette of tools which allow you to create and manipulate objects on the Bed Plan. The Bed Plan dialog contains one tool which is not available when creating report templates, the Bed tool. The Bed tool (last tool on the right that looks like a bed, Figure 3c), when selected allows you to draw and define a bed. Click on the bed tool and then click on the Bed Plan where you want the new bed to go and 'draw' out a bed by dragging and holding the left mouse. If you make a mistake and want to delete the bed, click on it to highlight then click on the back arrow button (directly above the return key on your keyboard).

When you draw a bed on the Bed Plan, a further dialog is presented which asks for two settings (Figure 3d).

Figure 3d

	_	
Bed Settings		
Bed Number (unique identifier):		[6]
Bed Name (shown on screen):		Bed 6
Bed Inverted (pillow right / bottom):		
	Cancel	ОК

The first setting (unique identifier) can be any number but it must be unique (ie no 2 beds are allowed to have the same ID). It is this number which WardWatcher uses to link patients to beds.

The second setting is a label which will identify the bed on the Bed Plan. You can bring up the settings dialog on a previously drawn bed simply by double-clicking on the bed.

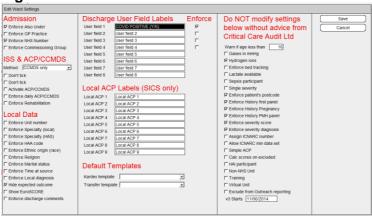
NB: If you are adding new beds, it is generally easier to duplicate an existing bed and then change the settings by double-clicking on the duplicate copy. Duplicating a bed, means that the dimensions of the new bed are identical to already existing beds which makes for a much neater Bed Plan.

To duplicate a bed you simply click on an existing bed and press Control-D. You can then position the new bed wherever you wish by clicking on the left mouse and dragging the bed to your preferred position. Remember to double-click on the new bed to change its settings.

3.1.2 Modifying Settings

To modify the settings for a unit, select the Bed Plan (unit) you wish to modify (left hand box, Figure 3b) to highlight it and then click on the **Modify Settings** button. The following page will show:

Figure 3e



Only fields relevant to SICSAG will be discussed below.

NB: It is recommended discussing any changes to any of these settings with a member of the SICSAG team. **Please do not** change any of the settings from the right hand column or ACP settings without discussion with the SICSAG team first.

Admission

Optional settings, a tick in the box to the left of the option makes this field mandatory. NHS Number and DHA code are not relevant in Scotland.

TISS & ACP/CCMDS

TISS is no longer mandatory- it has therefore been removed from the ACP page, if it is decided locally to continue collection of this data, tick the relevant box(s).

ACP data is mandatory and both the Activate ACP/CCMDS and Enforce Daily ACP/CCMDS buttons should be ticked.

Local Data

This enforces collection of fields on the local page. This data is not mandatory and it should be decided locally whether or not to collect/enforce this information.

Discharge User Field Labels

User field 1 to User field 4: These parameters determine the labels which are displayed beside the four Yes/No boxes on the **Unit Discharge screen** which are located just above the Discharge Comments. Ticking the box to the right of the question will make this question mandatory. **User field 5 to User field 8:** These parameters determine the labels which are displayed beside the four *numeric* boxes on the **Unit Discharge screen**. These questions cannot be made mandatory.

NB: The search question entered into these fields is lost if the question is changed or deleted therefore SICSAG recommend setting a question up on the research or daily page instead (see Sections 8 and 9). If you have set up a question in these fields, please keep a note of what the question is and when it was started and finished.

Local ACP Labels

No longer used.

Right Hand Column: Do not alter the settings in this column without seeking advice from a member of the SICSAG team or Critical Care Audit Ltd.

3.2 Beds in ICU

This parameter determines the default number of beds which will be presented with reports which calculate bed occupancy (such as the report 'Activity Time').

3.3 Calcium in mg/dl

This parameter should be checked if your laboratory reports Calcium values in milligrams per decilitre rather than the more common millimoles per litre.

3.4 Gases in mmHg

This parameter should be checked if your blood gas analyser reports blood gases in millimetres of mercury rather than the more common kilopascals.

3.5 Shift Labels

This parameter is used to define the number of nursing shifts normally operated in each 24 hour period, together with their labels and their start and end times. This is relevant if your unit is collecting data on nurse allocation (see section 2.5 of the 'Getting Started' booklet).

Figure 3f

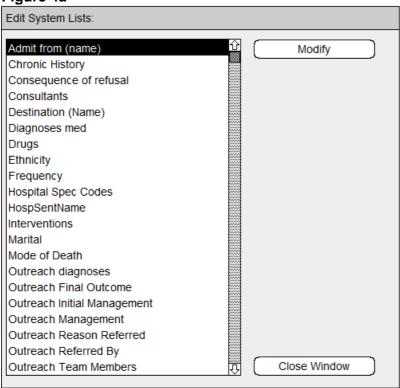
Number of shif	ts per day for: ICU		2
Shift Label	Time starts	Time ends	
Day	08:00	20.30	
Night	20.00	08.30	
			Cancel
			ок

Enter relevant labels/times in manually. Ensure the box in the right hand corner has the correct amount of shifts then click OK.

Section 4: Editing System Lists

Edit System Lists displays the names of lists which are used within WardWatcher and whose elements the Administrator can modify.

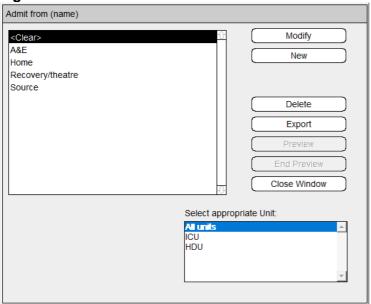
Figure 4a



To modify the elements of any list, you must first identify the list by clicking on it and then clicking on the **Modify** button.

This will bring up the selected list and show each of its current elements:

Figure 4b



You can delete an element from a list by clicking on and highlighting it and then clicking on the Delete button. You should be cautious about deleting elements of a list, especially where that element has been used in the database, since the element will no longer be made automatically available as an

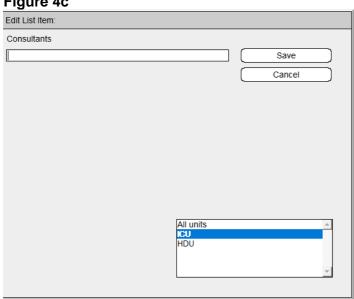
option when you wish to perform an action like searching. For example, if we deleted "Jones" from the list of consultants and then wished to perform a search for all patients treated by Jones, we would

to type in the name rather than choosing it as an option from the list which we could have done prior to deleting it. Deleting elements from a system list DO NOT have any impact on the patient information stored in the database (ie Jones will still be stored as the consultant for all patients for whom that selection was made, even when the name is deleted from the list).

You can modify an element in a list by clicking on and highlighting it and then clicking on the Modify option.

You can add a **new** element to a list by clicking on the **New** button. Clicking on the New button brings up the following dialog box (Figure 4c) into which you can type the new entry:





Enter the new entry in the Value box. This value will be added to All units unless another option is chosen. If you would only like it added to one unit, click on the appropriate unit (bottom right hand box) and then OK.

The most common lists that need updated locally are:

- Consultant: updates referring and unit consultant lists on the admission page
- Source: Admit from (name) field on the admission page
- Sent to: Discharge from (name) field on the discharge page

NB: Most of the 'standard' lists pre-set by SICSAG are inaccessible by the Administrator. If updating a list for the first time (other than the 3 mentioned above), please contact a member of the SICSAG team to discuss first.

<Clear> is set up in most lists and can be used as a special list element. It allows a user to clear a previously selected option on any of the screens where the list is being used. For example, if the name of the consultant on Admission & Identity screen had erroneously been set to Jones, you could clear it (without choosing another option) by choosing <Clear>.

NB: Please do not delete the clear value from any list you are updating.

Section 5: Delete Highlighted Patient

Please contact SICSAG staff to discuss deleting a patient.

Section 6: Exporting Data to SICS

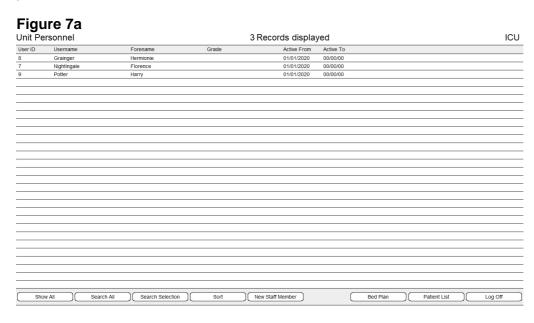
Export data to SICS allows the administrator to select the details of patients admitted during a given time period ready for export to SICSAG. Six pre-set text files containing all mandatory data and HAI data are created.

Data is exported to SICSAG monthly (via a secure internet portal) by the National Audit Coordinator from your hospital or a member of staff who has been trained by SICSAG staff.

Section 7: Editing Nurses and GPs

7.1 Edit Nurses

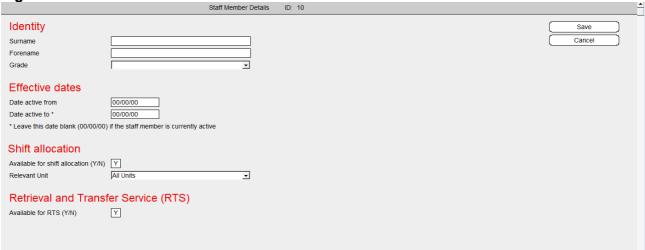
Edit Unit Personnel displays a list of nurses who have worked, or are currently working, in your Unit. This list of nurses is used from buttons accessed from the Bed Plan (Latest shift entered) which allow you to indicate on a shift by shift basis who was on duty, as well as who was looking after given patients.



Nurses are either "Active" (meaning that they are part of the current staff complement) or inactive (meaning that they have previously worked on the unit but are not part of the current staff complement).

You can enter the details of a new nurse by clicking on the **New Staff Member** button (Figure 7a). This displays the following dialog box:

Figure 7b



Each nurse is given a unique ID by WardWatcher which you cannot change. Enter the nurse's surname and forename in the appropriate boxes. The "Title" box can be used to record the nurse's title (such as Charge Nurse, Staff Nurse). The Identifier, Password and Sort Order boxes are not currently used.

If necessary, you can change the details of an existing nurse by highlighting her/his name in the list (Figure 7a) and clicking on the **Modify** button.

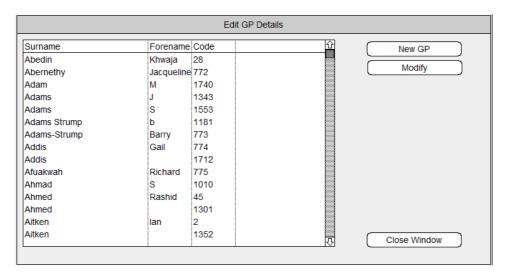
It is also possible to delete a nurse from the list. This facility is provided so that details of a nurse which have been entered in error can be removed. **Under normal circumstances, you should never delete a nurse from the list**. If the nurse has stopped working in your unit, then you should choose the **Modify** option and uncheck the **Active** check box.

If you delete a nurse from the list, then you will also delete any record associated with his/her duty, or any allocation to a patient

7.2 Edit GPs or Practices

Edit GPs or Practices displays a list of GPs under whose care your patients are being treated in the community.

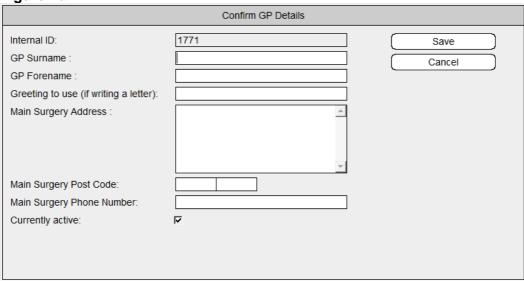
Figure 7c



This list is used on the Admission & Identity screen when you select the patient's GP. To stop you having to re-enter a GP's details for each patient looked after by that GP, you merely select the GP's name on the Admission & Identity screen and the other details are automatically entered for you.

You can enter details of a new GP by clicking on the **New GP** button to display the box below. This can also be done directly from the Admission and Identity page:

Figure 7d



Each GP is given a unique ID by WardWatcher which you cannot change. Enter the GP's details in the appropriate boxes. The "Salutation" box is useful if you are writing a letter to the GP and you want to use a less formal term of address.

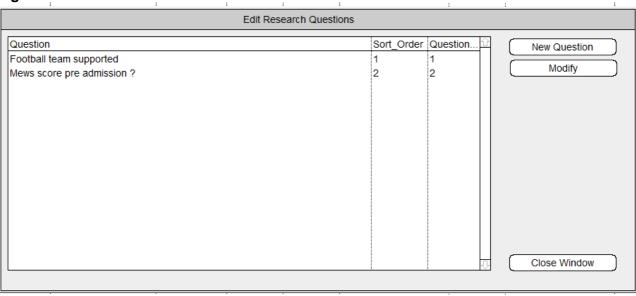
You can modify the details associated with an existing GP by clicking on the GP to highlight and then the **Modify** button (Figure 7c) beside the list of GPs and subsequently amending the necessary boxes.

Section 8: Editing Custom questions

A research question is asked once during the patients stay and can have a selection of answers.

When you click on **edit research questions** the following screen will appear. It may be blank or it may list questions already set up.

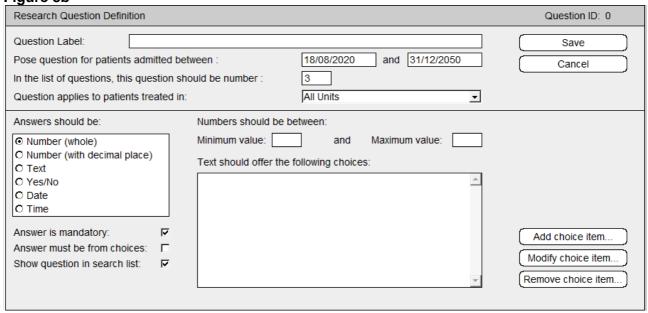
Figure 8a



8.1 Setting up a new research question

Click on New Question (Figure 8a) and the following screen will appear:

Figure 8b



To set up a question to gather information on patient's discharge GCS (Figure 8c) enter the details as follows:

- Question: enter the question you want to ask (eg GCS on discharge?).
- Enter start and end dates The start date is automatically entered as the date you are setting up the question and the stop date is one month later. Change dates if required. If you want a question to go on indefinitely enter the end date as 01/01/2050. This can be modified later if necessary, see Section 8.2.
- List question number: this will be completed automatically by WardWatcher.
- Question applies to current unit only: ensure this is ticked by clicking in the box.
- Answers should be: In this example, we require the answer to be a whole number between 3 and 15, as the GCS scale runs from 3-15. Click on the radio button to the left of Number (whole). Enter a Minimum value of 3 and a Maximum value of 15. This will prompt WardWatcher to query any numbers below or above 3-15, limiting the chances of a wrong entry.
- Answer is mandatory: ensure this is ticked if you want this question to be answered prior to discharging a patient (SICSAG advise all questions are mandatory).
- Answer must be from the choices; tick this box if you have added standardised choices in the box Text should offer the following choices. See example of this in Section 9.1.1. In this case the answer is not from choices so this box does not require to be ticked.
- Show question in search list: this box will be ticked automatically.
- Click Save.

Figure 8c

Research Question Definition		Question ID: 2
Question Label: Mews score Pose question for patients admitted b In the list of questions, this question s Question applies to patients treated in	hould be number : 2	Save
Answers should be: O Number (whole) Number (with decimal place) Text Yes/No Date Time Answer is mandatory: Answer must be from choices: Show question in search list:	Numbers should be between: Minimum value: and Maximum value: Text should offer the following choices:	Add choice item Modify choice item Remove choice item

8.2 Modifying a Research Question

To modify or stop a research question click on edit research questions and the screen on Figure 8a will appear. Click on question you want to modify to highlight then click on modify.

To **stop a question**, change the stop date to the present date. The question will no longer be asked on patients admitted after that date. You can **re-start a question** at any time by changing the start and stop dates.

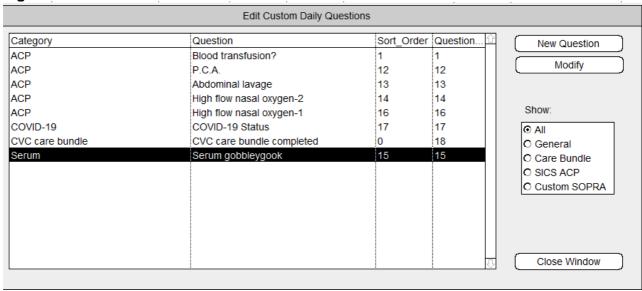
All other fields can be **modified** as necessary. If changing the question significantly it is best to stop this question and start a new question.

*Please contact SICSAG staff if you require any help with setting up or stopping research questions.

Section 9: Editing Daily Questions

When you click on edit daily questions the following screen will appear. It may be blank or it may list questions already set up (Figure 9a).

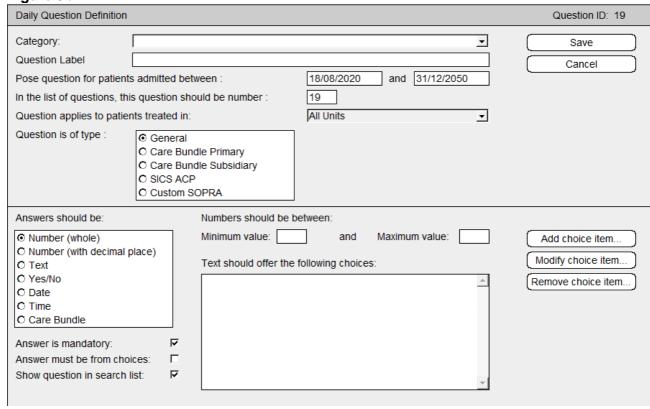
Figure 9a



9.1 Setting up a New Daily Question

Click on **New Question** (Figure 9a) and the following screen will appear:

Figure 9b



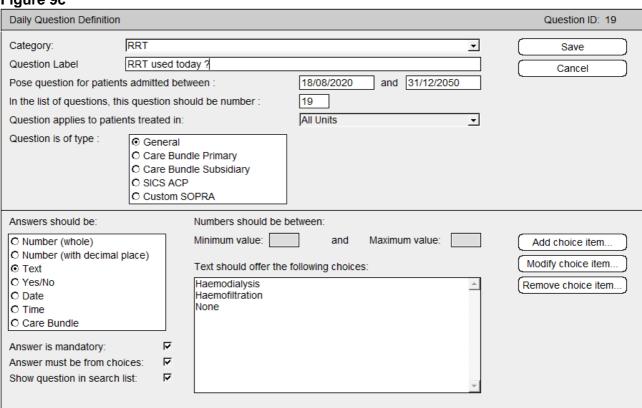
There are four types of daily questions you can set up:

- 1. **General:** a question asked daily via the daily page (eg: type of renal replacement therapy). Answers can be numerous eg choices from a list, a date, a number etc.
- 2. Care Bundle Primary: a question asked daily via the daily page which identifies whether a patient fulfils the Care Bundle criteria (eg New central line inserted in the unit today). This is a Yes/No question. If Yes is answered then the subsidiary bundles questions (or elements to this bundle) will also be asked. If No is answered then the subsidiary questions will be bypassed as they are seen as not relevant.
- 3. **Care Bundle Subsidiary**: a question asked daily via the daily page ONLY if the Care Bundle Primary question with the same category name is answered as Yes.
- SICS ACP: a question asked daily via the ACP page (eg Barrier Nursed). Answer must be yes or no.

Firstly, choose which question is needed to collect the data you require. Please contact SICSAG staff for help and advice if you are not sure.

9.1.1 Setting up a general question

Figure 9c



A general question could be used if you want to gather daily data on what type of renal replacement therapy was used (Figure 9c), as this requires an answer from a preset list. To set this up:

- Category: enter relevant category (eg RRT).
- Question: enter the question you want to ask (eg RRT used today?).
- Enter start and end dates (enter end date of 2050 if you want to ask question indefinitely, this can be altered if needed).
- **List number**: this will be done automatically by WardWatcher.
- Question applies to current unit only: ensure this is ticked by clicking in the box

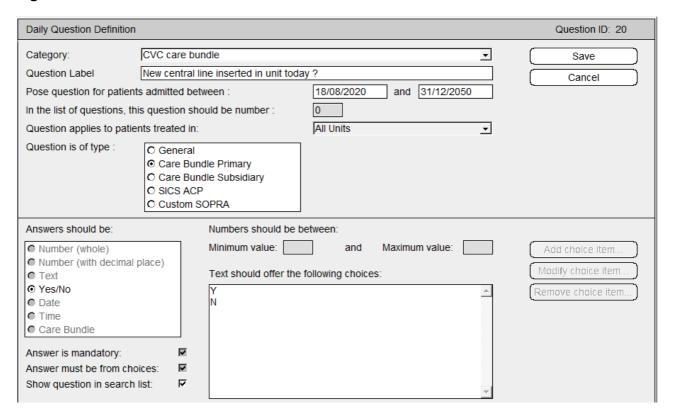
- Question type is General.
- The answer should be: In this example the answer will be from a list of 'text' options so click on the Text radio button. To add options click on Add (bottom right of Figure 9c) and enter option (eg Haemodialysis), then click OK. Your new option will show in the box named Text should offer the following choices. You can add as many options as you need.
- Answer is mandatory: ensure this is ticked if you want this question to be answered prior to discharging a patient (SICSAG advise all questions are mandatory).
- Answer must be from the choices; tick this box if you have added standardised choices in the box Text should offer the following choices.
- Show question in search list: this box will be ticked automatically.
- Click Save

9.1.2 Setting up a Care Bundle (Primary and Subsidiary)

Setting up a Care Bundle requires setting up multiple daily questions. One **Primary** question, which establishes whether this patient fulfils the Care Bundle requirement, and several **Subsidiary** questions depending on how many elements the Care Bundle has.

In the example below we are trying to monitor compliance with the CVC 'insertion' bundle. We can only monitor compliance in patients who have had a line inserted within the ICU or HDU, therefore the primary question asks whether the patient had a new central line inserted in unit today. This then allows WardWatcher to go on to ask the elements of the bundle (subsidiary questions) if yes is answered or to not progress any further if no is answered.

Figure 9d



- Category: enter relevant category (eg CVC Bundle).
- Question: enter the question you want to ask (eq New Central line in unit today?).
- Enter start and end dates (enter end date of 2050 if you want to ask the question indefinitely, this can be altered if needed.

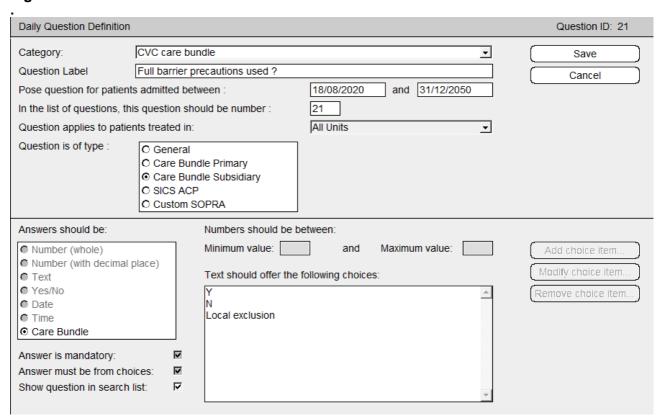
- **List number**: this will be done automatically by WardWatcher.
- Question applies to current unit only: ensure this is ticked by clicking in the box
- Question type is Care Bundle Primary
- All other sections will be filled in automatically as bundles are always mandatory and Yes/No answers.
- Click Save.

Once you have set up the primary question you then go on to set up the subsidiary questions to this bundle.

NB: The **Category** is a way of linking the Primary and Subsidiary Care Bundle questions so this has to be identical in all the questions set up for a particular Care Bundle. The easiest way to ensure this is to copy and paste the category. Although you may think you are typing in the same category name this is not always the case (from experience!).

Click on the primary care bundle question to highlight (see Figure 9a) then click on **modify**. The category question is already highlighted, go to **Edit** and click on **Copy**. Now click on save to take you back to the page in Figure 9a. Click on **New** to complete the first **Care Bundle Subsidiary** question:

Figure 9e



- Category: The cursor will be flashing in the category field. Click on Edit then Paste to enter the copied category
- Question: enter the question you want to ask eg Full barrier precautions used?
- Enter start and end dates: dates should be the same as the dates entered in the primary bundle question for this category.
- List number: this will be done automatically by WardWatcher.
- Question applies to current unit only: ensure this is ticked by clicking in the box.
- Question type is Care Bundle Subsidiary.
- All other sections will be filled in automatically as bundles are always mandatory and yes/no answers.

Click Save.

Repeat this step for all of the Care Bundle subsidiary questions, so in this example the questions:

- documented in notes
- chlorhexidine 2% used to clean skin
- Site = Internal jugular/sub clavian or femoral with clinical reason documented

would also need to be added (SICSAG CVC Insertion Bundle, 2007).

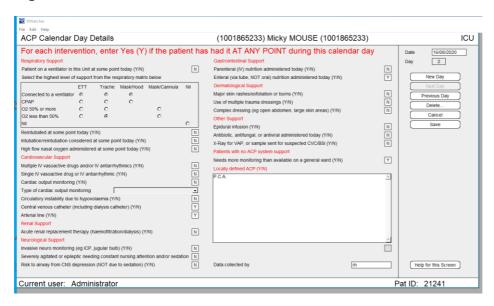
Instructions on how to complete Care Bundle data can be found on the SICSAG website www.sicsag.scot.nhs.uk on the HAI page.

9.1.3 Setting up an ACP question

An ACP question could be used if you want to gather daily data that requires a Yes or No answer. As the ACP page is already completed daily, this is the preferred option if the question fits the criteria, as it prevents staff having to remember to enter another page to enter data.

An ACP question will appear on the ACP page under Locally defined ACP (Figure 9f):

Figure 9f



Firstly click on:

• Question is of type: SICS ACP. This automatically fills in various fields as shown in Figure 9g

Figure 9g

Daily Question Definition			Question ID: 12
Category: ACP		2	Save
Question Label P.C.	A		(Cancel)
Pose question for patients adm	nitted between :	01/05/2005 and 19/09/2020	
In the list of questions, this que	estion should be number :	12	
Question applies to patients tre	eated in:	All Units	<u> </u>
0.0	General Care Bundle Primary Care Bundle Subsidiary SICS ACP Custom SOPRA		
Answers should be:	Numbers should be b	etween:	
Number (whole)	Minimum value:	and Maximum value:	Add choice item
 Number (with decimal place) Text 	Text should offer the	following choices:	Modify choice item
© Yes/No	N	Tollowing choices.	Remove choice item
Date	Y		Remove choice item
€ Time			
Care Bundle			
Answer is mandatory:	₩		
Answer must be from choices:	V		
Show question in search list:	V		
•			

- Question: enter question eg PCA?
- Enter start and end dates
- List number: this will be done automatically by WardWatcher.
- Question applies to current unit only: ensure this is ticked by clicking in the box
- Click Save

9.2 Modifying a daily question

To modify or stop a daily question click on edit daily questions and the screen (Figure 9a) will appear. Click on the question you want to modify to highlight, then click on **modify**.

To **stop a question**, change the stop date to the present date. The question will no longer be asked on patients admitted after that date. You can **re-start a question** at any time by changing the start and stop dates.

A question 'type' cannot be altered therefore if you have set up the wrong type of question, you will need to delete this question and start again.

NB: A question cannot be deleted once it has been answered in the database.

*Please contact SICSAG staff if you require any help with setting up or stopping daily questions.