

Challenge Theme:

Optimize patient and staff experience through increased efficiencies, automation, and engaging self-help resources.

Problem Statements:

1. Who are you?

Who's in the Room – Currently there is no way for patients to know which staff member walks in and out of their rooms during at their stay at the hospital. The patients don't remember the staff who came to their room. It would be nice to have solution where the staff information is recorded and displayed to patients in their room. The staff information should have the date time/entered, date/time left, picture, name, title of the person, specialty and any other relevant information of the staff that could help the patient identify who the staff is.

2. Hungry? Let me help you!

Food Delivery for Patients – Families/Patients have the ability to order food for a patient via the tablets in the room. The staff do not have that ability as the tablets are for family use only and have a pin code set up. The only way for a staff member to order is to call the 68181 number to place orders and often times the wait can be 15-20 minutes. We waste a significant amount of time with this task. It as well does not look well for us to be on the phone for that long as it may seem we are on a personal call.

3. Status, Please!

Auto-Text Updates - Seeking solutions for patients families who are waiting for a room in the ED to get updates via text. Text updates include information such as estimated wait time, links for commonly asked questions, where the child is in the process. Language options (English/Spanish) is a bonus would be nice to have.

4. How Do I?...

VR Knowledge Base - There is no internal/centralized Knowledge Base for all things VR that encompasses all processes involved in managing and using VR equipment at Children's. This would affect two types of groups - end users and those managing devices (IT dept). The challenge is to create a user-friendly resource guide that includes space to store process documents and training/user guides. The resources will include at least two buckets, managing devices (set up, management-ManageXR, creating new accounts - Meta, etc) and end users (how-to guides on using VR headsets for first timers)

5. Help Teens Stop Smoking!

Vaping cessation - Vaping among teens continues to be an issue, even with age restrictions put in place by laws. Seeking solutions for creating educational content via a game to show what has worked and what hasn't for vaping cessation. What different approaches to vaping cessation vs. traditional tobacco cessation are available and show what works and what doesn't.

6. Scan-A-Rad!

Automate Exam Workflows - Doing the right exam, on the right patient and the right time. We need a way to scan the barcode on the patient's armband (every patient has one) and it should pull up on our workstations the worklist of exams ONLY for that patient in the modality of the area we are in IE

Fluoro, XRAY, CT, IR, MRI, US, Dexa, Nuc Med. This would resemble the way the lab confirms patient identity to patient orders when drawing blood.

7. No More Data Entry!!

MRI Screening Clearance for Employees – When Nurses come down to MRI, everyone that comes into Zone III needs to be screened. We have forms they fill out then verified with the MRI Technologist. This tends to be time consuming. The Problem we have is when fill out these forms we have to manually add their names to a spread sheet. This is so we can verify later if have been filled out screening form or not and have been approved. The entire process of Data entry and then ease of looking people back up is tedious. Seeking solutions for creating a better system for this type of data entry and retrieving information.

8. Radiology Can be Scary!

VR through Radiology - Radiology can be scary, it would be awesome to virtually take patients through our spaces at both Dallas and Plano so it is less frightening.

9. Reduce Insurance Paperwork!

Automating Pre-Authorizations for Providers (APAP) – Seeking innovative solutions to create a process for auto-filling a significant portion of pre-authorization forms by pulling data from EPIC such as patient birthdate, gender, insurance identification number, address, relevant diagnoses, etc. This will reduce time to complete pre-authorization paperwork for patients.