

**TO ENHANCE NURSING WORKFLOW: ASSESSING
CHALLENGES AND IMPROVIZATION WITH THE
NAMAH APPLICATION**

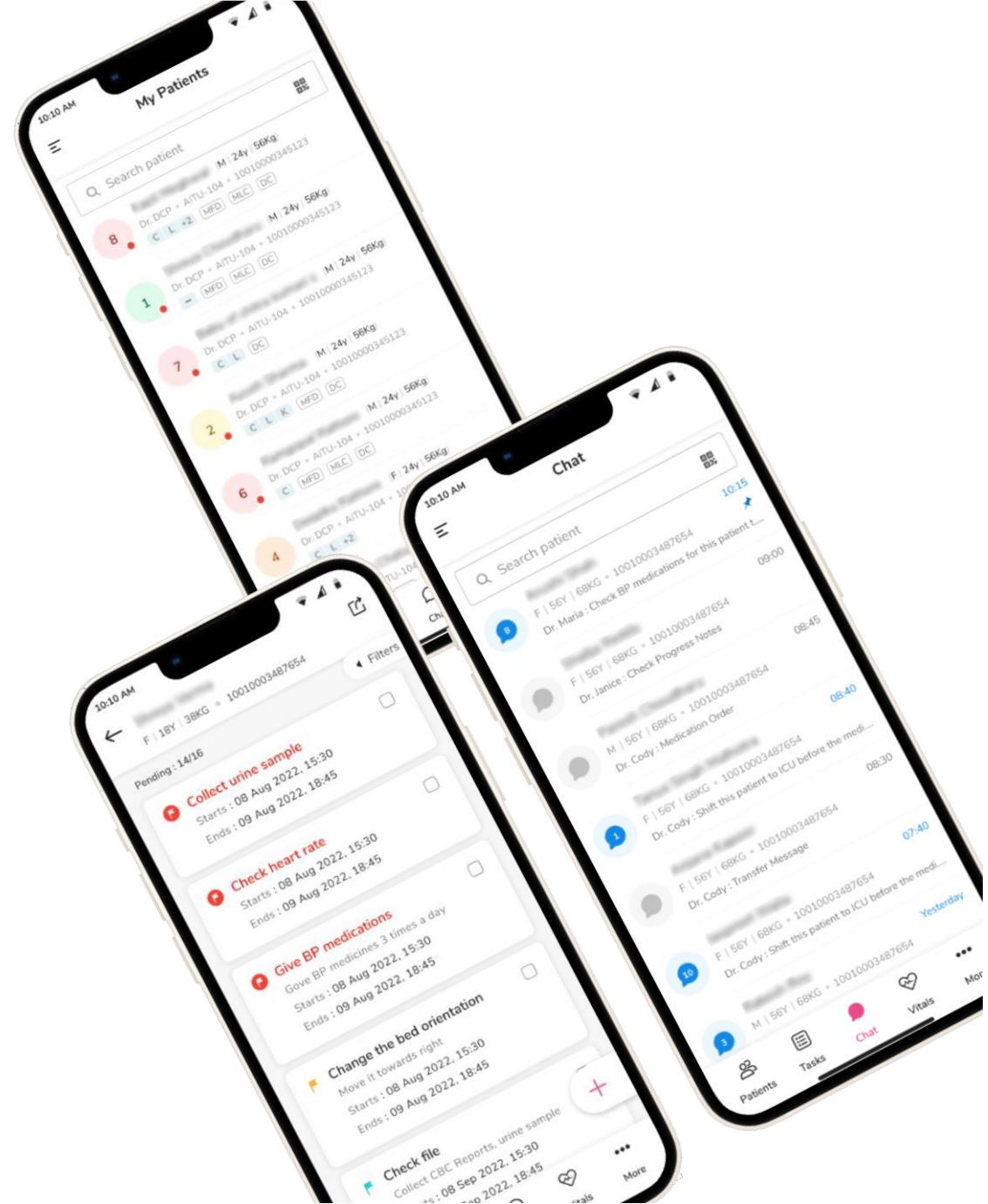
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NAMAH

NURSING AUTOMATION & MEDICATION ADMINISTRATION HUB



Why NAMA?

1

Around 50% of nurses' time per shift goes into documentation

2

Very less time for actual patient care (Primary duty)

3

Constant running around in the hospitals. Sometimes, more than 10000 steps are covered in 1 shift

4

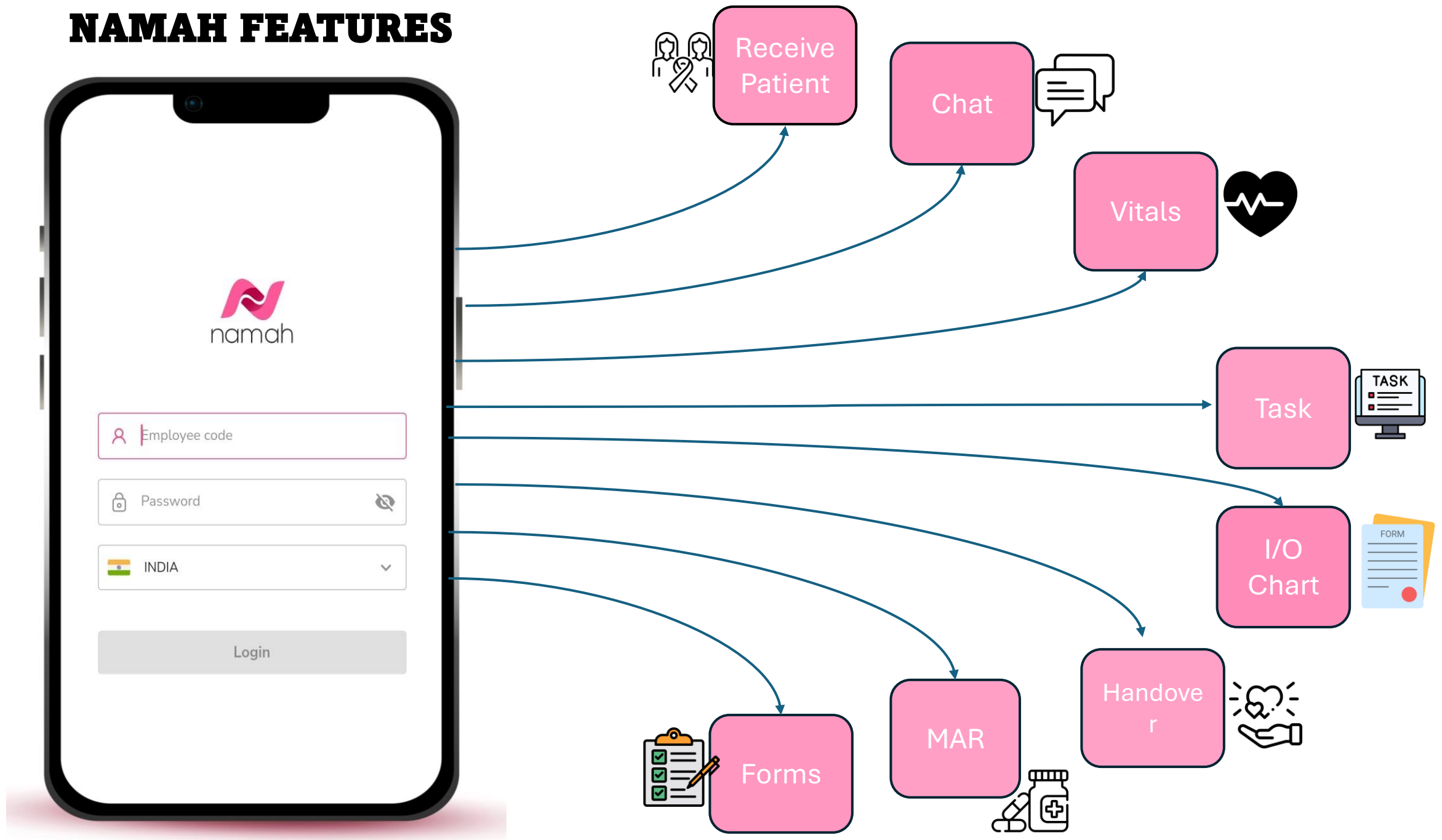
A lot of data points that are filled in forms aren't utilized by anyone in the system

5

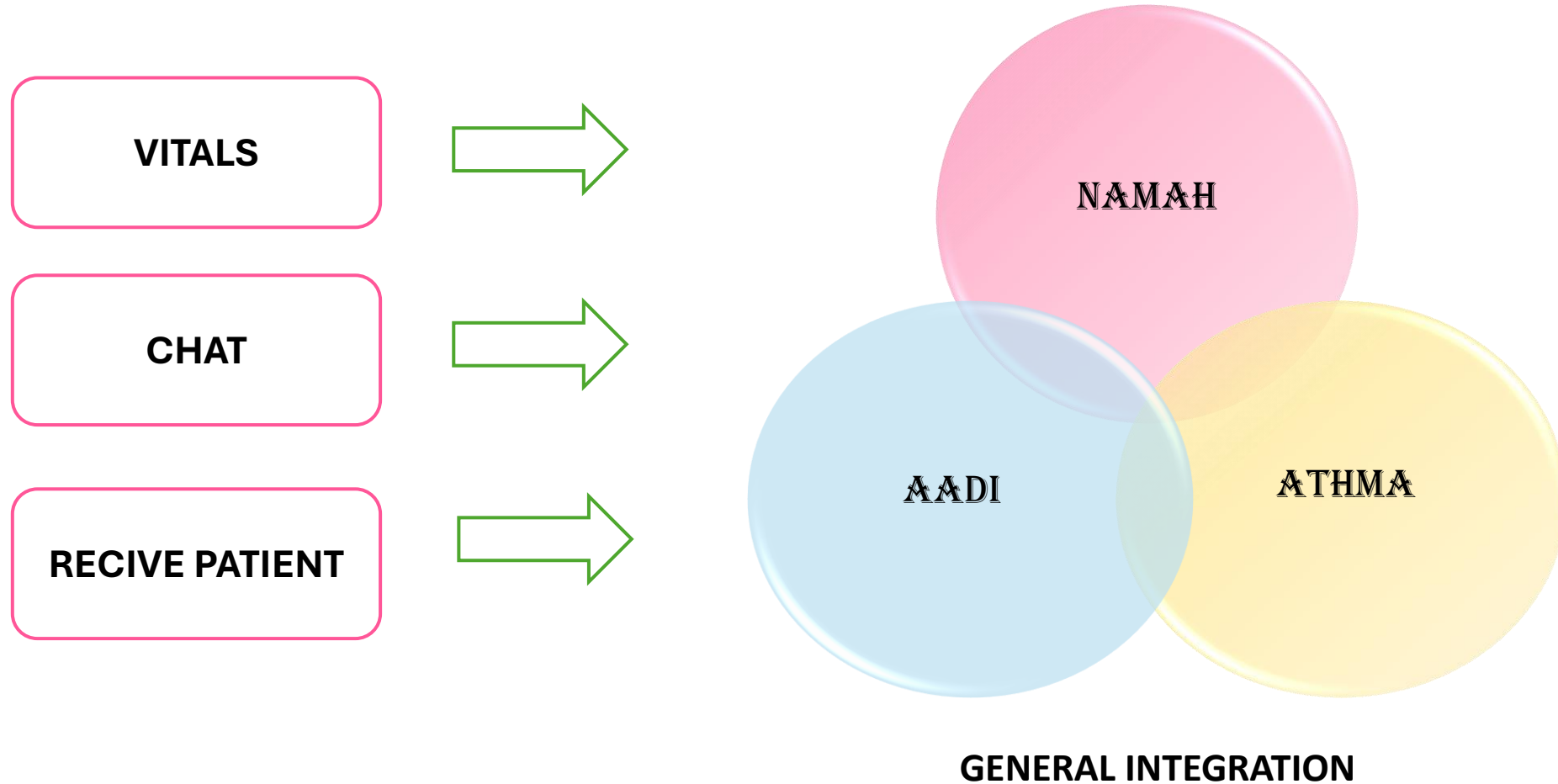
Nurses need digital empowerment so that they don't have to run to a single system in the ward



NAMAH FEATURES



Technical Integration Of NAMAH : Feature Wise



OBJECTIVE 1

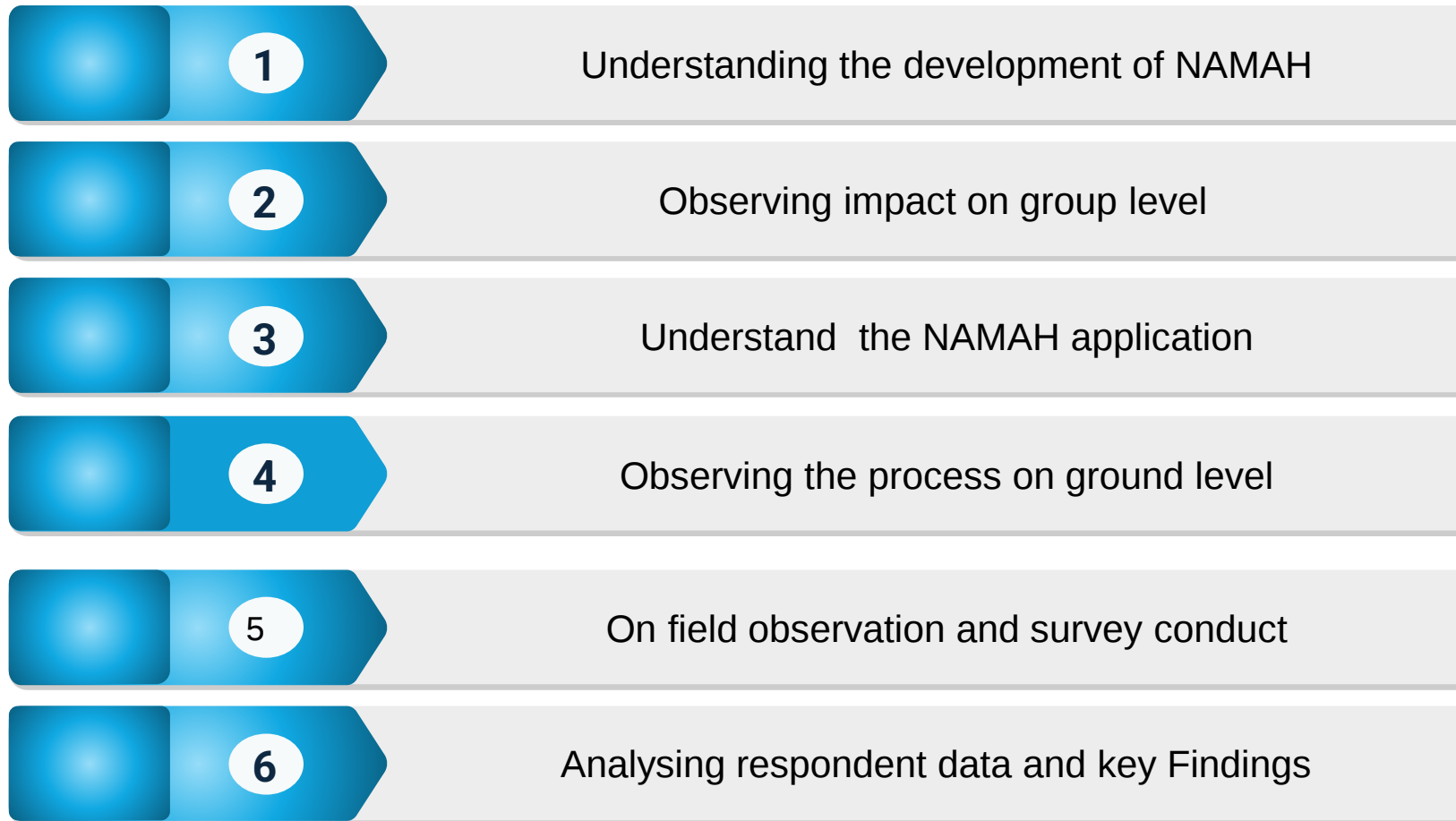
To understand the challenges face by the nurses and how NAMAHA is contributing to overcome these challenges.

OBJECTIVE 2

To identify the existing gaps in NAMAHA functionality and workflow from the perspective of its users.

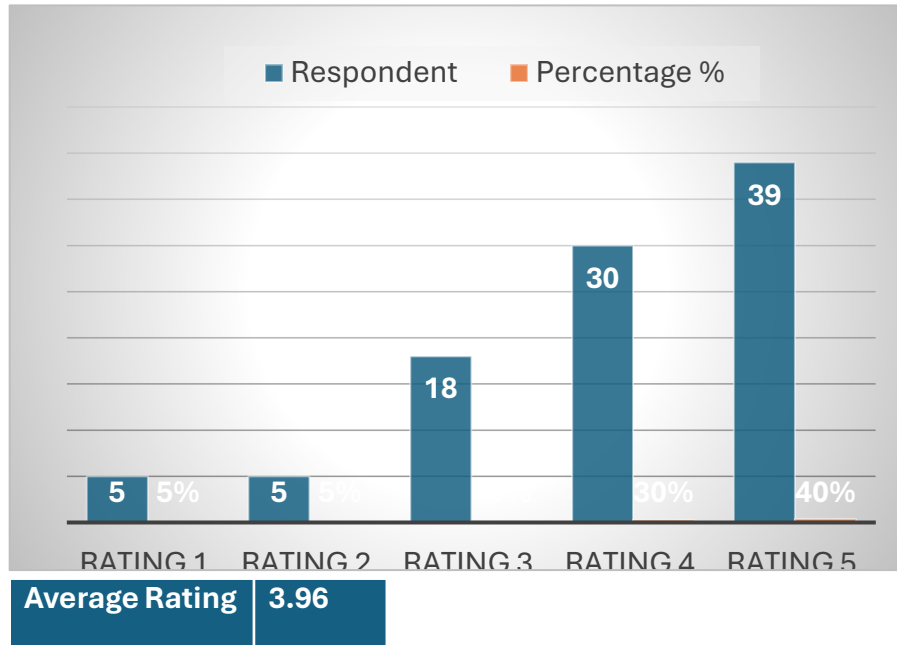


METHODOLOGY

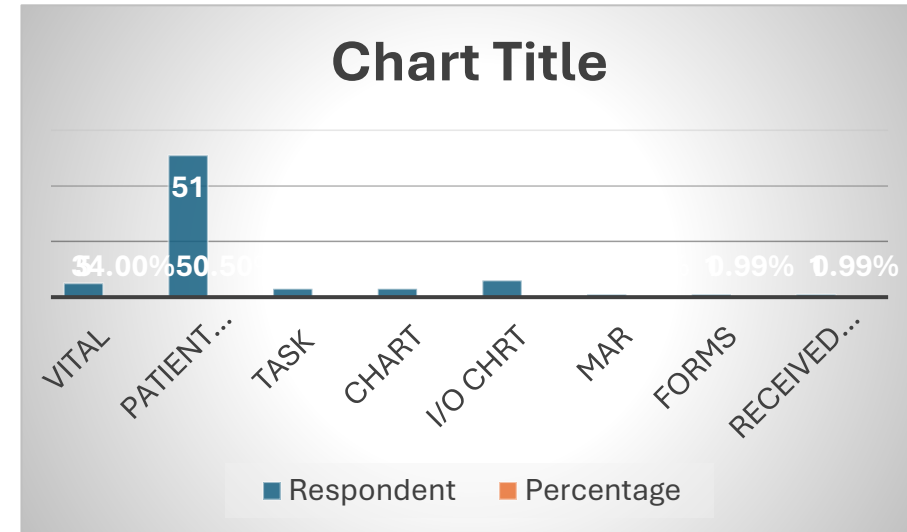


RESULT

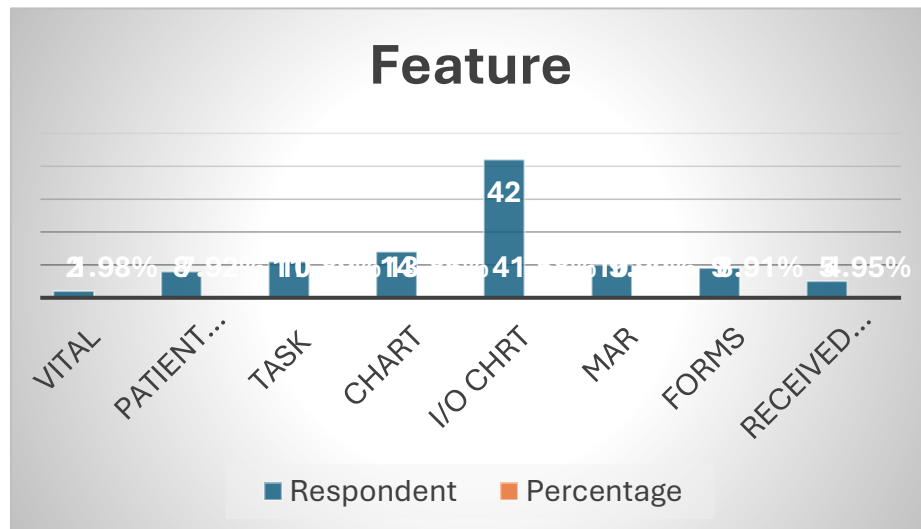
How user-friendly do you find the NAMAH application



Most Help full Feature



Features difficult to use or understand



Adequate training



RESULT

Time spend to enter patients' vitals

Time	Paper	NAMAH
Less than 1min	19.3%	84.9%
More than 1 min	80.7%	15.1%

Time spend to enter Nursing progress note

Time	Paper	NAMAH
Less than 2 min	17.4%	69.9%
More than 2 min	82.6%	30.1%

Time take for the Patient Handover

Time	Paper	NAMAH
30 sec	15.9%	52.7%
40 sec	51.2%	24%
1 min	17.1%	18%
Above 1 min	15.9%	4.3%



Features

Current gap

Improvement

VITAL



Fall score section:

User directly enters the Fall Risk Level from the options given in NAMAHA.

Input a score for each specified variable as per NABH Standards.

Staff Nurse Digital Signature

SNDT is not present in the Vitals Feature.

To integrate SNDT into the vitals feature of NAMAHA.

Pain Score & Pain Location

Pain Score & Pain Location section present in Vitals assessment.

Eliminate both section, Pain Assessment form already exists

Handover



Inter-departmental handovers

Inter-departmental handovers are not available in NAMAHA.

Option to transfer the patient within the application

Dashboard



Shift In charge Dashboard

Must manually add all the patient in the ward under the watchlist.

Automate the watchlist feature by syncing with staff nurses

CHAT



Feature currently does not have the facility to view past medical records and OP record like AADI.

Medicine Card: overview features are not added

To integrate patient's past medical records including OP records in "Chat" feature.

Features should be added in the MAR, as it is mostly used by the nurses

MAR



Difficulty for users while searching for an item in MAR. such as medicine and IV fluid.

Generating the color codes based on the categories.

I/O Chart

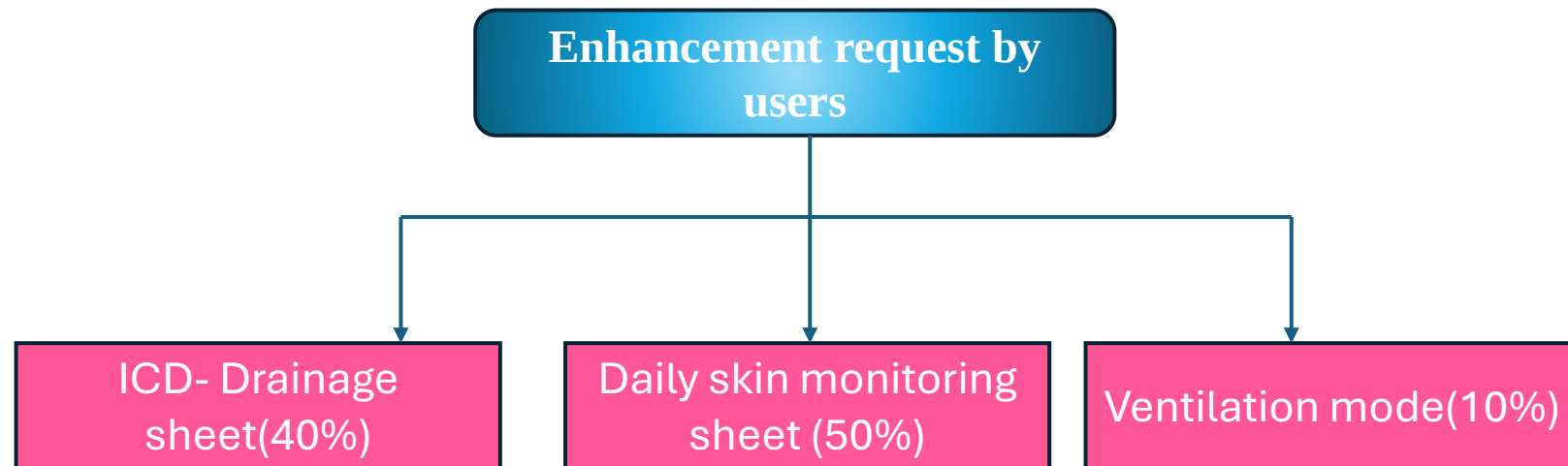
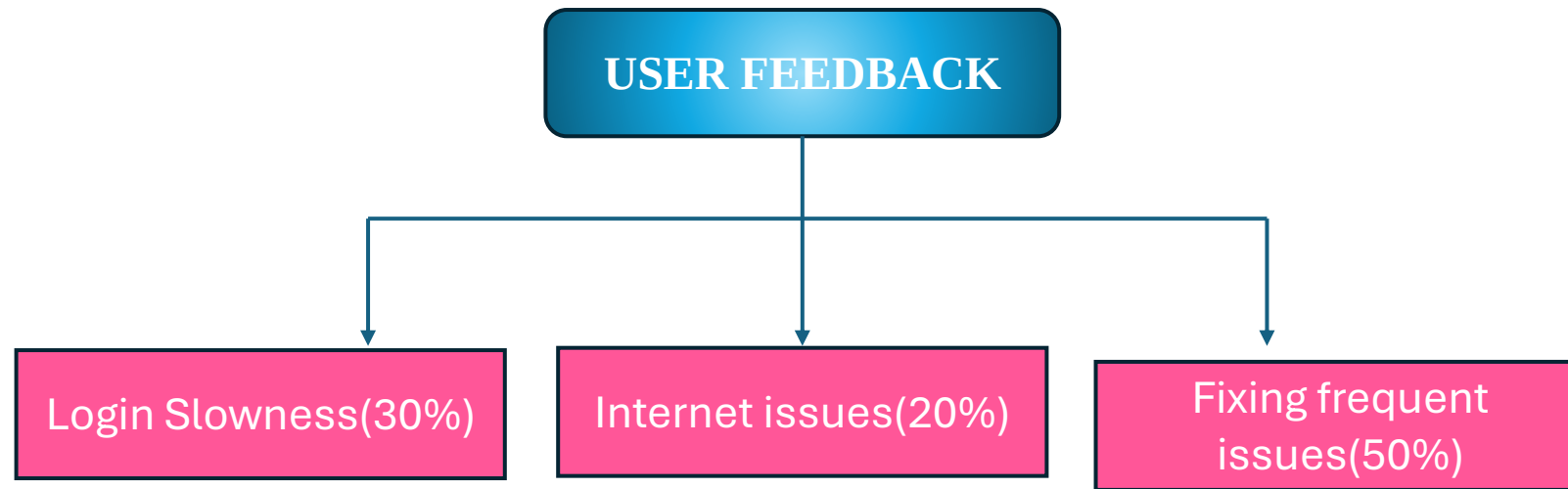


Intake and Outake chart; Users entered the value don't have option to correct the value.

lack of yesterday's total balance visibility, (24 hr)

Users must have option to amend the entered value .

Include patient's I/O chart Balance history can be added.



CONCLUSION

1

Minimize Documentation Tasks

Simplify and streamline documentation processes.

Reduce time spent on administrative tasks for nurses.

2

Ensure Secure Patient Record Storage

Implement robust security measures for patient confidentiality

Safeguard sensitive medical information within the app.

3

Enhance Access to Patient Information

Provide streamlined access to vital patient data.

Digitally manage patient records to improve efficiency

4

Empower Nurses Digitally

Offer mobile access for flexibility in patient care..

Equip nurses with tools to manage tasks

5

Equip nurses with tools to manage tasks efficiently

Enable seamless communication through chat features.

Improve coordination and collaboration among nursing staff.



THANKYOU

