Developing a decision support system to meet nurse managers' information needs for effective resource management.

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Abstract: This article describes the development of a decision support system called CLASSICA, which assists nurse managers in financial management, resource allocation, activity planning, and quality control. CLASSICA integrates information about patient flow and activity, staffing, and the cost of nursing care at the nursing-unit level. The system provides assistance in planning activities, balancing the budget, and identifying barriers to unsatisfactory resource management. In addition, CLASSICA contains forecasting and simulation options to analyze the influence of factors that affect nursing costs. This article describes the system's development process steps to tailor it to the needs of nurse managers and their existing work practices. Nurse managers actively participated in defining their tasks and responsibilities; identified barriers and difficulties in managing these tasks; defined information needs, data input, and output and interface requirements; and identified expected benefits. Clear communication of project goals, strong user involvement, and purposeful benefit planning was used to achieve the goals for CLASSICA: (1) to provide essential information and decision support for effective financial management, resource allocation, activity planning, and staffing; (2) to improve nurse managers' competence in financial management and decision making; (3) to improve cost containment; and (4) to provide a helpful and easy to use tool for decision support.

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Developing a module for nursing documentation integrated in the electronic patient record.

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Humans
Inservice training
Interinstitutional Relations
Medical Records Systems, Computerized - organization & administration
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Nursing Records
Patient Care Team - organization & administration
Program Development
Program Evaluation
Software
Total Quality Management - organization & administration

Abstract:
Norway's regional teaching hospitals are working together on a project to develop an interdisciplinary electronic patient record (EPR). This paper presents the results of a project to develop nursing documentation as part of an integrated EPR to improve the quality and continuity of patient care. The project used a consensus process as a working norm. The most important result is that the five hospitals have agreed on a framework for nursing documentation, and on the main components that need to be implemented in the electronic patient record.

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Evaluating the Beta version of the International Classification for Nursing Practice for domain completeness, applicability of its axial structure and utility in clinical practice: a Norwegian project.

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Terminology as Topic
Vocabulary, Controlled

Abstract: The purpose of this Norwegian project was to evaluate the International Classification for Nursing Practice (ICNP) Beta version for domain completeness, applicability of its axial structure and utility in clinical practice. A subset of terms addressing the areas of circulation and elimination were abstracted from the nursing records of a cardiac intensive care unit and a nursing home. Abstracted terms were mapped to terms in the ICNP. In the ICNP, the same or similar terms were found for 47% of the documented circulation terms and 69% of the documented elimination terms that addressed nursing phenomena. For nursing interventions, 27% of the documented circulation terms and 35% of the documented elimination terms mapped to the ICNP. The research team encountered difficulty in coding terms with the ICNP that expressed patients' perspectives, preferences, behaviours and experiences, and terms that represented signs-and-symptoms. Recommendations for further development of the ICNP include improvement in granularity, precision and conceptual definitions of terms; inclusion of time-related terms for representing nursing phenomena; and an easier method for navigating around the ICNP.

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