

Clarity Monthly Update

November 2020

General Information

The 3rd Sunday of every month Visonex updates Clarity with fixes to issues reported and enhancements based on client feedback. Following is a general overview of those fixes and enhancements that occurred on November 15, 2020.

What's Fixed in Clarity

1. **Fixed Truncation Issue in "Clinic Hospitalization-Short Form" report.** Prior to the fix, if a hospitalization admission diagnosis was selected and was over a character limit, the report would not run.
2. **Fixed Nursing Home History.** Prior to fix, staff were unable to add a new event in Registration>Patient Nursing Home History.
3. **Fixed Patient Chart View.** Prior to the fix on 10/21/20, the Treatment History and Document Management tabs were not working in PCV.

What's New in Clarity

1. **Clarity made multiple changes to the Hospitalization & Consultation screen.**
 - a. **The grid on the Hospitalizations & Consultations form has been updated to now display the Last Updated by.**

Start Date	End Date	Physician	Hospital	Type	Type of Visit	LOS	Discharge Order Date	Discharge Diagnosis	Notes	Updated By
11/03/2020	11/03/2020		UCLA Ronald Reagan	Hospitalization	Hospitalization	0				Patient Event, Message
09/28/2020	10/03/2020	PAINE, CARY HUBBARD MD	UW Medical Center	Hospitalization	Hospitalization	5				Nurse

- b. **Clinic Preference for Hospitalization field-continue to dialyze at clinic:** The question, "Will the patient continue to be dialyzed at this clinic while their status is Inpatient" question has changed to, **"Will the patient remain on their current schedule while hospitalized?"**
- c. **Added Infection Section:** A question was added; **"Was the Hospitalization a result of an infection?"** If the nurse answers, "Yes,"

they are prompted to go to Patient>Patient Infection to document the infection.

d. Links to other screens have been added.

- i. Patient Infection**
- ii. Medications**
- iii. Hemodialysis Prescription**
- iv. Peritoneal Dialysis Prescription.**

Discharge orders received and reviewed	<input type="text"/>	Obtained By	Select value
Hospital Admission from Dialysis Facility	Select value		
Will the patient remain on their current schedule while hospitalized?	<input checked="" type="radio"/> Yes <input type="radio"/> No		
Was Hospitalization a result of an infection?	<input type="radio"/> Yes <input type="radio"/> No (If yes, go to Patient > Patient Infections)		
<input type="checkbox"/> Patient Is Now Unstable			
<input type="checkbox"/> Transplant Referral?			
Add			

Links
Patient Infection
Medications
Hemodialysis Prescription
Peritoneal Dialysis Prescription

2. **Display Reports on the Primary Nephrologist Page.** A report link can now be added to the Physician Dashboard and the Primary Nephrologist Dashboard. The change requires coordination between NKC and Visonex to implement. This work is being scheduled and will be communicated to Physicians when it is completed.
3. **Patient by Transplant Status-Added Percentages.** The Patients by Transplant Status Report will now display the status percentages next to the totals.

Totals

Not Listed, Declined- Extra Follow Up Needed	2	4.00%
Not Referred, Extra Follow Up Needed	9	18.00%
Not Referred, Not Currently Eligible	24	48.00%
Referred, Listed, Active	1	2.00%
Referred, Listed, Hold	1	2.00%
Referred, Not Listed, Declined	10	20.00%
Referred, Not Listed, Work Up	3	6.00%

4. **Standardized “E-Signature” Reports.** The following Patient Reports have been added to help staff review notes and who signed the notes for a given date range.
 - a. E-Signature Physician Notes
 - b. E-Signed Notes
5. **Updated ICD-10 code catalog data-only to FY 2021.** The FY 2021 ICD10 Diagnostic Code set has been updated in Clarity as part of maintenance. “FY2021 VisonexTerms.Diag.ICD10CM.”
6. **NKC made the following changes to checklists and tip sheets.**
 - a. **The Physician CIA had fields added.**
 - i. To verify Current Code Status and to Correct the Code Status if needed. *Code status must be reviewed at least annually.*
 - ii. The Current Code Status fields flow to the CIA “lumper.”
 - iii. To verify current stability status and to correct the stability status, if needed and document an Unstable Plan.
 - iv. The stability status fields flow to the CIA “lumper.”
 - b. **Updated the Report Cadence tip sheet**
 - i. Separated into 3 lists for Nurses, Managers and Unit Coordinators
 - ii. Provided the What, Where, When, How and Why to running reports.
 - c. **Added fields to Nursing CIA, Nutrition CIA and Psychosocial Assessment to allow IDT to review a splitter’s POC and briefly document any changes if needed when a POC call is rescheduled to later in the month.**
 - i. Reviewed check box.
 - ii. Changes required to original assessment (yes/no).
 - iii. Text box to document Amended Plan(s) of Care.

Clarity Guides and Tip Sheets – On KNET

1. Clarity User Guides by Role: <https://knet.nwkidney.org/intra/1561662660362>
2. Clarity Tip Sheets: <https://knet.nwkidney.org/intra/1561665832956>