

OHMG Pediatric Hospitalists: Census Rules and Shift Duties

CENSUS RULES

Weekdays

- Yellow team is always assigned 14 patients in the morning regardless of total APH census.
- If Blue team 29-34 patients, then up to 6 patients will be assigned to Float.
- If Blue team >34 patients, then additional patients >34 divided evenly between APH 2 and APH 3.

Weekends and designated holidays

- Yellow team is typically assigned 12.
- If total APH census (Yellow + Blue) is >40 then up to 2 additional patients will be assigned to Yellow team (max 14 patients) and those additional patients will be seen independently by APH 1, then signed out to Yellow team residents after rounds.
- Blue team follows rules outlined above for weekdays.
- Low weekend/holiday census: when total APH census (Yellow + Blue) is <30 patients do not move patients over to Yellow team just to achieve morning census of 12. If they are already at 12 that's okay.

Nursery

- If nursery census is >22 at the beginning of the day, Float will assigned up to 4 patients to see independently. If the nursery census is >26 then Float, WPH attending and APRN should coordinate to manage census.

SHIFT DUTIES

APH 1 (Yellow Team)

- Arrive no later than 8am.
- Assign yourself as the attending for all Yellow Team patients, if this has not already been done.
- Attend morning conference at 8am if possible.
- Be prepared for team rounds at 9am. Preparation includes reviewing patient data and seeing patients prior to rounds if/when you think necessary. It is particularly helpful to see expected discharges prior to rounds.
- Lead family-centered rounds with residents starting at 9.
- After resident rounds, attend Multi-disciplinary Rounds at 11:30. Include the senior resident and rounding assistant if possible.
- Handle transfer calls that are assigned to you/Yellow Team by the Float Attending after rounds til the end of the day.
- See new patients admitted to the Yellow Team who arrive on the floor by 3pm and review their care plan with residents.
- On weekends and holidays, see newborns at WPH delivered between 12-2p.
- When possible, observe residents/students doing H&Ps and provide feedback.
- Follow up on tasks and deal with new issues that arise with patients on the Yellow Team.

- Provide coverage and support by phone to the Yellow Team residents until 7p when the Night 2 attending comes in.
- Provide handoff as needed to Night 2 at 7p.
- Complete all documentation within 24 hours of patient contact; ensure proper documentation through either editing resident notes or writing addenda to their notes.
- Provide reading assignments to residents/students and schedule brief afternoon educational activities when possible.
- Provide individualized constructive feedback to all learners on the team.
- Attend other conferences as requested by Program Director, other faculty, Chief Resident or residents.
- Provide input for resident evaluations before the end of each residency block.

APH 2/3 (Blue Team)

- Shift starts at 7am.
- Review Blue Team patient assignments made by LPNs and receive signout from Night 2.
- Make sure Epic Secure Chat is set to “available”.
- Communicate care plan to bedside nurses on each patient.
- Attend Multidisciplinary Rounds at 11.
- Work with team to complete the Blue Team’s daily clinical tasks. Be conscientious about completing tasks rather than leaving things for the night staff. Be proactive about offering and asking for help.
- Complete all documentation and billing within 24 hours of patient contact.
- See new Blue Team admissions/transfers through the day as they are assigned to you by the Float. This responsibility generally goes to APH 2. The expectation is to see new admissions in the hospital, including those located in the ER, by 3:30p and transfers who have moved upstairs by 3p.
- While the default is that these shifts go til ~4p, APH 2 is generally the “late stay” person. If things are slow and all work is wrapped up such that someone can leave early, the default is that APH 3 gets to leave early.
- Keep the Epic Handoff tool updated on your patients.
- Provide sign-out as needed to Night 1.
- When possible, attend morning conferences (Morning Report and Grand Rounds) and other conferences as requested by Program Director, other faculty, Chief Resident or residents.
- At end of shift set Epic Secure Chat to “unavailable” or “offline”.

Float Attending

- Shift starts at 7am.
- Make sure Epic Secure Chat is set to “available”.
- Act as a single point of contact for patient admissions/transfers for the Yellow and Blue Teams from 7a – 4p.
- See new patients admitted/transferred to our APH service between 7am – noon to protect the rounding teams (both Yellow and Blue Teams).
- See Blue Team patients and/or newborns assigned to Float when the census is high.
- Manage calls about sick babies at WPH born between 8a-noon. See these babies and complete documentation.

- Keep the Epic Handoff tool updated on APH patients seen.
- Hand off any babies you see back to the nursery team after the residents' noon conference.
- Hand off any new patients seen during the morning to the Yellow and Blue Teams (do this after noon conference for the residents) and let the Blue Team know what patients are coming. Ensure that the Care Team and Attending assignments in Epic have been changed as needed.
- Assign the first 2 new admissions in the weekday afternoons to the Yellow Team to give day shift residents experience with new admissions.
- Assist the Blue Team as needed at APH with workflow and task completion.
- Manage consults from South Seminole Hospital (telemedicine consults). If these are multi-day consults, ensure that the Float for the following calendar day knows about the ongoing consult.
- Be available to assist WPH Teaching Attending with completing procedures in a timely manner (e.g., circumcisions, frenotomy, etc).
- If all work is caught up in the afternoon, Float may leave after checking in with the rest of the team and ensuring that everyone is caught up. Float is still responsible for triaging new patients until 4p.
- On days with no APRN, Float should consider staying through the afternoon to fill the gap left by no APRN on duty.
- Provide sign-out as needed to the Night 1. Ensure that the Night 1 Attending knows about pending transfers/admissions.
- When possible, attend morning conferences (Morning Report and Grand Rounds) and other conferences as requested by Program Director, partners, Chief Resident or residents.
- At end of shift set Epic Secure Chat to "unavailable" or "offline".

APRN

- Shift starts at 7am.
- Make sure Epic Secure Chat is set to "available".
- Review Blue Team patient assignments made by LPNs. APRNs will be assigned ~1/3 of the Blue Team census. If census is 29-34, APRN does not have additional patient assignments (29-34 seen by Float). If census is >34, APRN may be assigned additional patients along with APH 2/3. Morning assignments may include 2 new admits.
- Review assessments and care plans with designated physician for each patient. Participate in Multidisciplinary Rounds at 11am.
- Complete all documentation and billing within 24 hours of patient contact.
- Keep the Epic Handoff tool updated on your patients.
- Provide sign-out as needed to the Night Attendings.
- The last new patient for the APRN should be assigned no later than 5:30pm. The APRN should not receive multiple new patient assignments heading into the end of their work day.
- If no new work in the afternoon, the APRN may leave after checking in with Blue Team colleagues.
- Between 4-7 pm, assist in managing PerfectServe messages regarding established Blue Team patients and communicate as needed with APH 2/3 and Night 1 about these issues.
- Set Epic Secure Chat to "unavailable" or "offline" at the end of shift.

WPH Attending

- Arrive no later than 8am.
- Be prepared for team rounds at 9am on the babies assigned to the residents. Preparation includes reviewing patient data from the EMR and seeing patients prior to rounds if/when you think necessary. It is particularly helpful to see expected discharges prior to rounds.
- Lead family-centered rounds with residents, 9 to 11-11:30am.
- On weekdays, see new babies born before 2pm and review their care plan with residents. On weekends and holidays, see babies born up to noon - babies born from 12-2p may be seen by APH 1; check in with APH 1 before leaving for the day and if they are too busy to see newborns then consider staying into the afternoon.
- When possible, observe residents doing H&Ps and provide feedback.
- Complete procedures in a timely manner (e.g., circumcisions, frenotomy, etc).
- Follow up on tasks and deal with new issues that arise with patients on the Nursery Service.
- Provide coverage and support by phone to the nursery residents until 7p when the Night 2 attending comes in.
- Provide handoff as needed to Night 2 at 7p. Specifically, let them know which babies you saw in the afternoon and if there are babies with active ongoing issues into the night.
- Complete all documentation within 24 hours of patient contact; ensure proper documentation through either editing resident notes or writing addenda to their notes.
- Provide reading assignments to residents/students and schedule brief afternoon educational activities in the afternoon when possible.
- Provide individualized constructive feedback to all learners on the team prior to going off service.
- Attend other conferences as requested by Program Director, other faculty, Chief Resident or residents.
- Provide input for resident evaluations at the end of your time on service (will be emailed to you by Jennifer Sloan).

Night 1 Attending

- Shift starts at 4p.
- Get signout as needed from APH 2, 3, and Float.
- Manage the Blue Team from 4p-MN, including taking primary responsibility for admissions/transfers to the Blue Team.
- Act as a single point of contact for distribution of patient admissions/transfers for the Yellow and Blue Teams from 4p-MN.
- The last new patient for the APRN should be assigned no later than 5:30pm. The APRN should not receive multiple new patient assignments heading into the end of their work day.
- Be available from 4-7p to check on patients with urgent/emergent issues if contacted by APH 1 or Nursery Attendings.
- Review Team lists with Night 2 Attending and night LPN at ~7p to provide handoff, review census, and set the plan for distribution of subsequent admissions.
- Manage transfer center calls, ER admit calls, and in-house transfer calls directed to the Blue Team up to MN.

- Be immediately accessible through PerfectServe to answer patient calls/questions from nursing, etc during shift.
- Complete all documentation within 24 hours of patient contact. Ensure Epic Handoff Tool is updated on patients you have seen. Write notes in the Handoff Tool for any overnight issues requiring management.
- Hand off Blue Team to Night 2 prior to leaving.
- Provide sign-out to the daytime attendings as needed, either by phone or Epic Handoff Tool.

Night 2 Attending

- Shift starts at 7p.
- Contact APH 1 and WPH attendings as needed for handoff of Yellow and Nursery Teams.
- Review Team lists with the Night 1 and night LPN when you come in to set the plan for the evening. Prioritize helping Night 1 get caught up with work.
- See new patients admitted/transferred to resident teams (Yellow Team and WPH Nursery Team) up until MN and be on-call for resident teams from 7p – 7a.
- Assist Night 1 with Blue Team admissions and clinical tasks as needed/requested. Check in regularly through the course of the evening with Night 1 to provide support as needed.
- Receive handoff of Blue Team from Night 1 before leaving.
- Act as a single point of contact for patient admissions/transfers for the Yellow and Blue Teams from MN – 7a. From MN-7a manage all transfer center calls, including ones going to the Yellow Team.
- Be immediately accessible through PerfectServe to answer patient calls/questions from nursing, etc during shift.
- Complete all documentation and billing within 24 hours of patient contact. Update Epic Handoff Tool on any Blue team patients you see.
- Ensure the correct patient numbers for the Yellow Team in the morning. Check in with Yellow Team senior resident at MN or prior to 6am resident handoff as needed to review patient lists/census.
- Provide sign-out to the daytime attendings. A call to APH 2 at 7am is the most effective means of doing this.