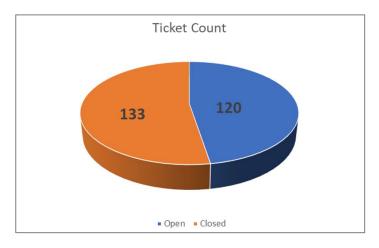


Wednesday, May 17

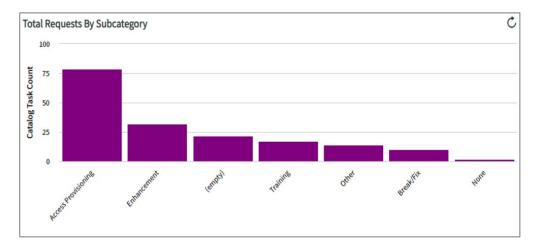
This daily report is your source for important Vocera and QGenda implementation news. It will be posted on Physician Forum > Vocera and QGenda Resources.

Incident Statistics



The graph below displays the total numer of open and closed tickets since May 16.

The most common types of tickets have been for access or an enhancement request.



Top Open Incidents

1. Direct access (DID) numbers may not display to end users on the web console or app.

- a. Escalated to Vocera and currently managing mitigation. The technical teams continue to work on the issue and are getting close to a resolution.
- 2. Account issues and incorrect group
 - a. Some end users may be in an incorrect group. The team is resolving these tickets as they come in.

Top Resolved Incidents

1. Labor and Delivery at Huntley was pulling the baby ADT feed instead of the mother's feed. This was resolved this morning.

Emergency Code

We are continuing to call all codes through AlertMD first, and then through Vocera for the comfort of clinicians and staff. The next steps to increase comfort with Vocera have been identified; there will be additional information and a touch base toward the end of the week.

Reminders

- When searching for physician contacts in Vocera, confirm you are viewing the correct site. Vocera will default to the user's home site. The steps are outlined in the **contacts tip sheet**.
 - Select the Northwest Region Hospitals option to see all physicians.
 - The project team is seeking clarification on the resident site. We expect an update shortly.
- Remind nurses to record a voicemail greeting for their assigned extension.
 - Sorry I missed your call. This voicemail is not monitored. please call the main desk or press your nurse call button for assistance.
 - Review the staff practice checklist for other important required tasks.

Resources

Find tip sheets and other support materials on NM Interactive and Physician Forum.

Thank you to all physicians and clinicians for your hard work as we make this important clinical communications and on-call scheduling transition.