TASK DEMONSTRATION

This demonstration reviews how to send and respond to tasks, and will help you understand the task list. Tasking appears in different locations on different templates, but the principles are the same across all specialties.

This has been prepared with EHR 5.6.4.15 and KBM 7.9. Subsequent updates may display cosmetic and functional changes.

Use the keyboard or mouse to pause, review, and resume as necessary.
First we’ll get oriented to the task list, and learn how to set up some preferences. Then we’ll learn several ways to send tasks, and how to respond to them.

The “Workflow” view, consisting of the appointment list and task list, is usually set to appear as soon as you open NextGen. You can also bring it up by clicking the Inbox icon. (We are not currently using the third component of the Workflow view, the Inbox.)
There are several ways the user can choose to configure the Workflow view. We recommend having the appointment list on top, with the task list below; the full screen width allows more information to be viewable in each column. (When the Patient Portal has been activated, we’ll need to go to one of the 3-pane views.)

To choose your configuration, right-click on the Title Bar at the top of the Workflow.
Click **Window Configuration**.
Select this configuration.
You can set several other preferences, and change viewed items on the fly, by clicking this icon.
You can choose to view tasks that you’ve **Completed**, **Deleted**, or **Assigned to Someone Else** by clicking on these items. (Often you’ll want these unchecked, so that you’ll only see tasks that have been assigned to you.)
You can manually **Refresh** your task list by clicking here.

You can **Setup Tabs** by clicking here, though we’re not actively using these at the time of this writing.
By default, you are viewing your own tasks.

You can View Tasks For other providers by clicking here.

This functionality may vary by department, and will not be further reviewed here.
You can select several other **Preferences** by clicking here.
Aside from making some color choices, you can also select to have your task list refresh automatically.

We suggest setting this to refresh every one minute.
Look at the columns on the left of the task list.

The first column (!) indicates the task priority: low (↓), normal, or high (!). The program appears to assign normal or high priority at various places from which you generate tasks. While the user can often specify a priority, in practice most people accept the default priority.
The third column (✓) is the Completed column. You check this box when you’ve completed a task.
The middle column tells you several other things about the task.
A clipboard with **one hand** indicates a task you’ve assigned to someone else. 
(Reminder: You toss a football with one hand.)

A clipboard with **two hands** indicates a task someone has assigned to you, or a workgroup that you belong to. 
(Reminder: You catch a football with two hands.)
A clipboard with a **check mark** means that it has been accepted by somebody—either you, or another user.

Don’t confuse this with the **check mark column**, which indicates that the task has been completed.
The final icon you'll see has a check mark, but no hands. This is a system-generated task. Examples of this type of task are tasks that come across an interface (e.g., from a lab or pharmacy), or tasks you send to yourself. They are by default automatically accepted, and thus have the check mark.
There are several ways to create tasks. One of the most versatile is to use the Tasking button at the top of the Navigation Bar.
When you click this button, a popup appears that begins the task process. By default, the Date Due will be today.

In this instance, the default priority came up as **High**; you can click in that box to change it to **Normal** if desired.
Click in the **Subject** box. You can select one of the popup subjects, or click the **blank** at the top of the list, and type a subject of your own.

(As of this writing, we’re not emphasizing the **Category** box, though that may change in the future.)
Click in the **Message** box, and type a message to your recipient. Click **Save and Close** when you’re done.

As we’ll see in a minute, it isn’t absolutely necessary to use the Subject and Message boxes, but it may make things clearer for your recipient.
You have the opportunity to attach a component of the patient's chart (often a template or document) to the task. If you do this, when the recipient opens the task, the chart will open to that spot, making it easy to see what needs to be done.

You're not required to pick an attachment, but it is very helpful to do so.
If you select **Template**, a popup will show available templates on the most recent encounter. You can also select templates from previous encounters.
If you select **Document**, a popup will show available documents on the most recent encounter. You can also select documents from previous encounters.

In this example, we’ll select the **Provider Test Action** document, then click **OK**.
You're returned here; click **OK** again.
In the ensuing popup, you choose your recipient(s).

Note the Workgroups that are listed. Several will appear for each department. While you can scroll down through all users to task anyone, using the workgroups will usually make it quicker to find your recipient.

In this example, click the + sign to expand the FMC Nursing workgroup.
Select your recipient by double-clicking the name, or by highlighting the name and clicking Add User(s).

You can add other recipients as well.
Alternatively, you can add the entire workgroup by highlighting it and clicking Add Group(s).

When you send a task to a workgroup, everyone in that group will see it. When one person completes it, it will show as completed for everybody.
Click OK, and your task is sent.
When the recipient opens the task, the Provider Test Action document displays.
Another way to send a task is from within a template or popup itself. Here a staff member has taken a question on the phone, and needs to task it to a nurse or provider. After documenting the question, click **Send and Close**.
The task recipient popup appears, and you would select a recipient as illustrated above.
Note that you didn’t have to select an attachment. Since the task was originated from within a template, the recipient will be taken to that template upon opening the task, where the question is immediately apparent.
Those are probably the two most common ways you’ll create tasks. But you can also create a task from within the Workflow itself.

Click New Task.
You can assign a **Due Date**, **Priority**, and type a **Subject** and **Description**, similar to above.

The familiar recipient selection popup appears when you click **Assign To**.
From the workflow, we have the additional step of selecting the patient by clicking *Select*.

Note that a task could also be sent about a general question, and not associated with a patient.
A patient search popup appears. Type the patient’s name, then click \textbf{Find}. 
Double-click on the patient’s name when it appears.
Click the **Attach** dropdown arrow to attach a chart component. While not required, this is very helpful to the recipient. (The attachment selection process is the same as illustrated above.)
Click Add to finish sending the task.
Now let's look at responding to a task.

Users are often confused about the concept of “accepting” a task, when they may not recognize the patient’s name, and it may not be clear from the subject line just what the question is. For example, maybe I don’t remember Quincy Quagmire, and all we can see from here is that someone took a call from him.

Think of it this way. Your nurse is handing you a paper chart with a sticky note on the front saying “phone call.” You take the chart, or accept it from her, open the chart and confirm it’s your patient. You then read the phone message, review the chart, and answer the question. If you decide it’s not your patient, you give it back to her, or give it to the correct provider.
In this example, we’ll accept the Phone call task on Quincy Quagmire. There are 5 (yes, 5) ways to begin.

The bottom line is this: You should almost always accept tasks that you receive, as your first step in figuring out what to do with them.
1) Double-click on the task.
2) Right-click on the task, and choose Modify.
3) Highlight the task, and click the Modify button.
4) Right-click on the task, and choose Open Patient’s Template.
5) Highlight the task, and click the ->Chart button.

Since we need to go to the patient’s chart eventually, anyway, options 4) and 5) probably make the most sense.
Click ACCEPT.
You note the Reason for call is Medical Question, so to respond, click **Medical Question**.

You are taken to the Telephone template, where you see the question. Let's say you either recall the encounter, or review your last note, and you told him to come back in 3 months.
Type your response, then click Send and Close.
Select your recipient and click **OK** to send the task.

When your nurse receives the task, she will be taken to the telephone template, where she will see your instructions.
Your response is added to the grid.

Click Preview Document to generate a brief document summarizing this sequence of calls. (Every time someone adds an entry, the document would be re-generated, so that it would include the latest entries.)
This is what the phone note would look like. Why generate a note, when the information is visible in the template, you may ask? For one thing, if you have to create a paper copy of the chart, this will make the documentation available. For another, in the future, if a major upgrade changes the base templates, the note will still exist.

This task is complete. Click Inbox to return to your task list.
Click the **box in the Completed column** to indicate that this task is complete.
A check mark appears in the Completed box.

Unless you’ve chosen to display your completed tasks, this task will disappear from your list the next time it is refreshed, usually within a minute.
Not a problem. Let’s say you discover that the task should go to Dr. Johnson, who is in the office today. Return to your task list, and modify the task by one of the methods previously shown; double-clicking it is often simplest.

Perhaps you’re thinking “That’s all well and good if it really was my patient. But what if I look at the chart, and find the patient really belongs to one of my colleagues, and the question should’ve really been directed to him. I’ve accepted the task, so now I’m stuck with it.”
Click REASSIGN.
Select the correct recipient, Dr. Johnson, and send the task to him, as previously demonstrated.

The task will immediately drop off of your task list.
There are multiple variations of how the task list can be used, which will likely vary from clinic to clinic, depending upon clinic workflow and policies. But these examples should give you enough pointers to handle most tasks you’ll commonly encounter.
This concludes the NextGen task demonstration.

What should you do if you see an endangered animal eating an endangered plant?