

Clinical Risk Assessment

Dangerous Delays in Urgent Psychiatric Triage



Systemic Bottleneck Alert

Addressing the dangerous bottleneck

between early risk detection and urgent clinical intervention.

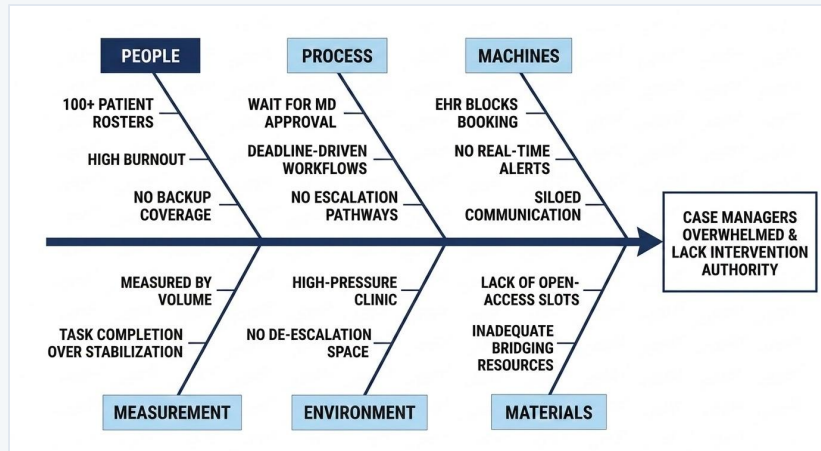
PROBLEM STATEMENT

Rigid Tech & Fragmented Workflows

The root cause of triage delays stems from a combination of software limitations and fragmented administrative workflows.

- 01 **System Blocks:** Current Electronic Health Record (EHR) permissions physically prevent non-prescribing staff from booking emergency buffer slots.
- 02 **Manual Tracking:** High caseloads force case managers to rely on manual cross-checking across siloed systems (EPIC, NEHR) to track missed appointments.
- 03 **Communication Bottlenecks:** When physicians miss internal "In-Basket" messages requesting override approval, the entire urgent scheduling process stalls.

DIAGNOSTIC EVIDENCE: ISHIKAWA DIAGRAM



Note: The Ishikawa model above maps the exact system, process, and people constraints detailed on the left.

CareSync Decision-Support Dashboard



The CareSync Decision-Support Dashboard is a centralized tool that pulls real-time EHR data, replacing manual data-digging with prioritized, one-click action buttons.

Patients are sorted into three distinct urgency zones:

Zone 01

Critical Action

Immediate clinical outreach required for missed timelines and active defaults.

Zone 02

System Bottlenecks

Escalation required for stalled administrative workflows and pending triage requests.

Zone 03

Caseload Health

Patients requiring system verification to maintain care continuity.

CLINICAL DASHBOARD v3.1 | ST. MARY'S MEDICAL CENTER

Dr. Sarah Jansen | Logout

Dashboard

Search Patient (e.g., Name, ID)

Dept: ER | Status: All | Refresh

Patients

RED Row | HIGH PRIORITY | RED ALERT | 3 Patients

Patient ID	Name	Condition/Status	Vital Signs	Location	Action
1. #10043	Michael Jones (45, M)	Acute MI / Crashing	HR 148 ↑ 75/48 ↓ SpO2 86% ↓	Bed 01	STAT
2. #10156	Anna Lee (28, F)	Severe Trauma	HR 132 ↑ 90/60 ↓ SpO2 92%	Bed 03	Admit

Tasks

ORANGE | MODERATE PRIORITY | 5 Patients

Patient ID	Name	Condition/Status	Vital Signs	Location	Action
1. #10212	David Smith (58, M)	AFib / Stable	HR 98 ↓ 122/80 SpO2 96%	Bed 05	Monitor
2. #10309	Robert Brown (64, M)	Post-Op Check	HR 85 118/76 SpO2 98%	Bed 07	

History

GREEN | STABLE | 12 Patients

Patient ID	Name	Condition/Status	Vital Signs	Location	Action
1. #10451	Emily Davis (32, F)	Observation	HR 72 115/75 SpO2 99%	Bed 10	
2. #10502	John Doe (70, M)	Stable	HR 68 120/80 SpO2 97%	Room 212	

Settings

Centralized EHR Integration

Pulls real-time EHR data to replace manual data-digging with prioritized, one-click action buttons.

Turning Invisible Labor Into Action



The dashboard automates risk detection and bypasses communication gaps by utilizing strict role-based logic to ensure no patient falls through the cracks.

SYSTEM CAPABILITIES

Automated Flagging

Instantly identifies patients who miss their 48-hour post-discharge contact or 7-day follow-up.

Quantifying Effort

Transforms invisible manual labor into trackable, one-click actions.



STRICT ROLE-BASED LOGIC

CASE MANAGERS

Coordination Focus

Streamlined Workflow

Case Managers only see coordination tasks.

MDS

Clinical Approvals

Targeted Tasks

MDs only see clinical approvals.

ADMINISTRATORS

Capacity Bottlenecks

System Oversight

Administrators monitor capacity bottlenecks (e.g., requests pending >24 hours).