Virtual Nursing — Patient-Room Standard Worksheet

A pilot answers whether the technology can work. A rollout answers whether it works without the people who built it.

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Unit / facility: ..... **Completed by:** ..... **Date:** .....

STEP 1 — ROOM-TYPE TAXONOMY, AND WHICH TYPES THE PILOT EXERCISED

ROOM TYPE	WHAT IT CHANGES	COUNT	IN PILOT?
Standard medical-surgical	The baseline		
Isolation and negative-pressure	Cleaning protocol, device access, what may enter and leave		
Semiprivate or shared	Two patients in microphone and camera range at once		
Bariatric	Bed position, sightlines, mounting clearances		
Behavioral health	Ligature, tamper and breakability constraints		
Older wings and renovations	Structure, pathway, power, wireless coverage		
Rooms with existing headwall equipment	Physical contention for the same wall		
Overflow and converted spaces	No assumption holds		

Any row marked "no" is a room type the pilot has not exercised. Name it before the business case is written, not after.

STEP 2 — NAME AN OWNER FOR EVERY RECURRING TASK

RECURRING TASK	CANDIDATE OWNER	NAMED OWNER
Cleaning the endpoint between patients	Nursing or environmental services	
Confirming the device is powered and reachable	IT operations	
Firmware and application updates	IT or the vendor, by agreement	
Physical mount, damage and replacement	Facilities or clinical engineering	
Device inventory and lifecycle	Clinical engineering	
Account, identity and access	IT	
Escalation when a room is unusable	Named, and reachable at night	
Orientation and refresher training, agency staff included	Nursing education, with IT for device steps	
The room profile itself	One named owner, not a committee	

STEP 3 — EVIDENCE TO CAPTURE WHILE THE PILOT RUNS

- ☐ Endpoint uptime, measured rather than recalled, method stated
- ☐ Support tickets by category, and how many required entering the room
- ☐ Time to restore a failed room, and who restored it
- ☐ Which room types were exercised, and which were not
- ☐ Cleaning and infection-prevention sign-off on the physical design
- ☐ Adoption by use case, not in aggregate
- ☐ Bedside and virtual staff feedback, gathered separately
- ☐ Patient and family feedback on comprehension and comfort
- ☐ Training delivered, to whom, and how long orientation took
- ☐ Exceptions granted during the pilot, and why

A business case assembled after the pilot ends can only report what someone happened to record.

STEP 4 — THE ROOM PROFILE

- ☐ Device, mount, position and orientation
- ☐ Network, power and identity requirements
- ☐ Privacy indicator behavior
- ☐ Cleaning procedure and approved agents
- ☐ The acceptance test
- ☐ Named owner of each recurring task
- ☐ Version number and date

And an exception process. Units will meet rooms the profile does not fit. The choice is between a recorded exception with an owner and an undocumented local variation nobody can support later.

The command space needs the same treatment: acoustics, workstation layout, dashboard set and escalation paths, under a versioned standard.