# Return on Investment

**Resident Quality:**

* + Confident in getting the proper care
  + Confident in getting the same treatment regardless of who is doing the job, by ensuring that the description of the care duty is clear on what the staff does and what the resident is able to do for themselves. This means, in addition to a more consistent task delivery, where the resident does not have to correct the individual staff, the resident can continue to remain physically and mentally stimulated in order to retain their capacities.
  + Possibility of more independence through supporting them with instructions for each resident
  + The overall Care Plan of the resident is more visible to the employees, which can make the efforts more goal oriented
  + Possibility to make the offered activities more visible and thus support the resident’s participation in them

**Organisation/ Management:**

* + Better overview in relation to possible challenges with coordination and planning of work and the time spent on it.
  + Management information in the form of transparency in relation to the care delivered within the organisation, within each department and to each individual resident
  + New workflows can easily be implemented and tested, and there can be in-depth statistics on whether they work or not
  + Support the effort around disparity in funding/fees.
  + Visibility of which tasks are solved, as well as which tasks the team is missing. This supports communication between employees
  + Minimises forgetting and unintended events, which can result in a large decrease of incidents esp. with regard to medication (90% is the average reduction of errors)
  + Strengthen cooperation between employees as well as the rapport between residents and employees
  + Observations can support work regarding risk assessments
  + Observations may be used for data collection and factual support of a practice based on "knowing" rather than "believing/ thinking"
  + Observations and Health data can be used to collect observations regarding well-being and health, as well as making it easier to collect data required by regulations such as Accident/Incidents.
  + Possibility to visualise and ensure care delivery tasks with the resident’s overall plan in daily life. Work is more structured with resident milestones/goals regarding tasks and observations, as these become visible at the point-of-care rather than that knowledge living in an office
  + Opportunity to ensure a common language and common agreements, both in relation to individual residents and at an organisational level. Tasks can be seen as a work-management tool in which agreements are drawn up at staff meetings or together with the resident
  + “Can” and “Must” tasks become visible. It provides insight into whether the right number of employees are present to solve the “must” tasks. Additionally, it can provide an overview of the “must” tasks, so that they are not all planned in the same timeframe.
  + Less time in the office and more face-to-face time with the residents
  + Focused data collecting and documentation is made easy and operational in the daily work, which allows employees to save time documenting in prose (often at the end of the day, away from the “situation”). In addition to saving time, employees need to remember different information to and from the office
  + As a shift planner, it will be possible to get an overview of the calendar regarding for example the residents who are not on shift during the weekend, holiday or similar. This supports planning when it comes to how many employees have to be at work.
  + Observations can be used to record internal audits. This information can be evidenced at Inspections.
  + Ensuring overall guidelines are available, internal or otherwise within the specific task solution. For example, in relation to the delivery of medicine, where the necessary procedure regarding the task can be made visible for each individual resident.

**Employee wellbeing:**

* + Employees do not have to remember all the details of all residents, creating more presence in practice.
  + There is a visualisation of which tasks are not resolved and why - as part of the communication between employees, they do not have to remember to give detailed messages between the shifts.
  + Visualisation of how tasks are solved in the form of Instructions. These may include relocations, exercises and the like. This will provide security for the employees in relation to monitoring specific professional tasks.
  + Instructions and guidelines can be prepared by the appropriate professional groups, which raises quality and the professional focus.
  + Descriptions in Tasks and Plans as well as data collected using Observations, can enhance the professionalism and the learning culture, with focus on what succeeds. This is supported by the fact that challenges around solving tasks become visible in the organisation.
  + Easier introduction of new employees and temporary staff, as they are not overloaded with information, but can seek knowledge continuously in the work.
  + The permanent employees do not have to remember to share information as they know that temporary/bank staff and new employees can search for information regarding the care to be delivered and a description of how it must be carried out etc.
  + The task descriptions make it possible for anyone with the right professionalism to do the job, and do not have to disturb a colleague to ask how a task should be done.