

Meeting Name	Quality & Safety Council Meeting		Council/Meeting Minutes	Please check off all components and indicators that relate to each topic being discussed.	
Location	Auditorium				
Date	7/18/2018				
Time	1:00PM – 3:00PM				
Conducted By	Carol Daley, MSN,RN,CNML & Rachel Ansaldo,BSN,RN				
Topic/ Facilitator	Discussion	Staff Input & Feedback	Action	Magnet Components	Strategic Plan Indicator
Review of Minutes 6/20/18			Accepted as written		
Infection Control Meredith Shellner,RN	Meredith shared Health Care Associated Infections “Partnering to Heal” YouTube training video. Video can be accessed through the Nursing website on the Intranet. Discussion on Infection Control routines. June 2018: There were zero Hospital Acquired C.Diff cases!!!	Positive response received from clinical nurses. They concurred regarding the benefits of sharing the video with all clinical staff	New Meditech C. Diff order set is currently live: stop gap for C. Diff. test reason (for MD’s)	<input type="checkbox"/> Transformational Leadership <input type="checkbox"/> Structural Empowerment <input type="checkbox"/> Exemplary Professional Practice <input type="checkbox"/> New Knowledge, Innovations and Improvements	<input checked="" type="checkbox"/> People <input checked="" type="checkbox"/> Patient Experience <input checked="" type="checkbox"/> Quality <input type="checkbox"/> Financial Performance <input type="checkbox"/> Operations
Renal Care Janice Breen, RN	Janice presented the hemodialysis (HD) data as follows: June 2018: 33 HD cases performed. 100% compliance with chart completeness, weight measurements. All machine safety checks completed. HD water Culture/ Dialysate Culture and Endotoxin surveillance—100% compliance.	Janice provide insight from DOH visits at other hospitals recently. A strong emphasis is placed on the detailed review of clinical documentation and Infection Control practices.	Comparatively 53 cases were performed in June of 2017.	<input type="checkbox"/> Transformational Leadership <input type="checkbox"/> Structural Empowerment <input type="checkbox"/> Exemplary Professional Practice <input type="checkbox"/> New Knowledge, Innovations and Improvements	<input type="checkbox"/> People <input type="checkbox"/> Patient Experience <input checked="" type="checkbox"/> Quality <input type="checkbox"/> Financial Performance <input type="checkbox"/> Operations

MCH Theresa Hagenah, RN	P.P.D. brochure (Post-Partum Depression) being created		Video about Post-Partum Depression will potentially be developed by clinical staff	<input type="checkbox"/> Transformational Leadership <input type="checkbox"/> Structural Empowerment <input type="checkbox"/> Exemplary Professional Practice <input checked="" type="checkbox"/> New Knowledge, Innovations and Improvements	<input checked="" type="checkbox"/> People <input type="checkbox"/> Patient Experience <input checked="" type="checkbox"/> Quality <input type="checkbox"/> Financial Performance <input type="checkbox"/> Operations
Patient Experience Phyllis Vonderheide, RN Senior Director	Phyllis shared Press Ganey Scores and engaged discussion. Our complaints have increased recently. All related to communication. (June). Phyllis suggested that Pillars Boards be updated with current data Phyllis introduced Melissa Isele- Kaplan (Social Worker, Hospice): she will be working in Service Excellence with Phyllis	Doreen mentioned – can contact Phyllis for support	Working on tools for all to be able to see scores each month. Working together to ↑ scores Update information for units to go along with goals.	<input type="checkbox"/> Transformational Leadership <input type="checkbox"/> Structural Empowerment <input type="checkbox"/> Exemplary Professional Practice <input type="checkbox"/> New Knowledge, Innovations and Improvements	<input checked="" type="checkbox"/> People <input checked="" type="checkbox"/> Patient Experience <input type="checkbox"/> Quality <input type="checkbox"/> Financial Performance <input type="checkbox"/> Operations
Behavioral Health & 1 South Doreen Wall, RN, Clinical Educator	Doreen announced the Phelps Nursing Conference September— flyer distributed and email sent to all clinical nurses. LGBTQ – highest award given to Phelps for Care of this community Sept. – Suicide Awareness month		Clinical nurses are encouraged to attend as there are a wide range of topics with contact hours provided.	<input type="checkbox"/> Transformational Leadership <input type="checkbox"/> Structural Empowerment <input type="checkbox"/> Exemplary Professional Practice <input type="checkbox"/> New Knowledge, Innovations and Improvements	<input checked="" type="checkbox"/> People <input type="checkbox"/> Patient Experience <input type="checkbox"/> Quality <input type="checkbox"/> Financial Performance <input checked="" type="checkbox"/> Operations

<p>Critical Care Clinical Alarms Carol Daley, RN, Nurse Manager</p> <p>Fall report</p>	<p>Carol presented an overview of the clinical alarm audit Cardiac Monitors & Vent Alarms response time < 1 minute ↑ 90% compliance in immediate and less than 1 minute response times</p> <p>Call bell alarm integration now through Vocera</p> <p>Carol presented June Fall Report for Paula Keenan, RN: In June there was one NYPORTS- reportable fall resulting in bilateral subdural hematoma and a subarachnoid hemorrhage---an RCA (Root Cause Analysis) took place.</p>	<p>Video-monitoring system is being looked at for patients requiring enhanced supervision</p>	<p>All units are required to submit 7 clinical alarm response times monthly.</p> <p>Implemented on all Inpatient units.</p> <p>Post Fall – draft rolling out for conducting an immediate post fall huddle. Site visit to Northern Westchester Hospital planned (the system has been implemented there). Nursing administration is in the process of checking pricing and terms for the contract.</p>	<p><input type="checkbox"/> Transformational Leadership</p> <p><input type="checkbox"/> Structural Empowerment</p> <p><input type="checkbox"/> Exemplary Professional Practice</p> <p><input type="checkbox"/> New Knowledge, Innovations and Improvements</p>	<p><input type="checkbox"/> People</p> <p><input type="checkbox"/> Patient Experience</p> <p><input checked="" type="checkbox"/> Quality</p> <p><input type="checkbox"/> Financial Performance</p> <p><input type="checkbox"/> Operations</p>
<p>HAPI Diana Pollock, RN for Debbie Reynolds, RN</p>	<p>HAPI report June: Zero HAPI's in June!!</p>		<p>No Harm Across the Board----</p> <p>We celebrated Telemetry, 5 North and 2 Center for over 50 Days without a HAPI !!!!</p>	<p><input type="checkbox"/> Transformational Leadership</p> <p><input type="checkbox"/> Structural Empowerment</p> <p><input type="checkbox"/> Exemplary Professional Practice</p> <p><input type="checkbox"/> New Knowledge, Innovations and Improvements</p>	<p><input checked="" type="checkbox"/> People</p> <p><input type="checkbox"/> Patient Experience</p> <p><input checked="" type="checkbox"/> Quality</p> <p><input type="checkbox"/> Financial Performance</p> <p><input type="checkbox"/> Operations</p>
<p>ED Ritzel Boer, RN</p>	<p>Ritzel shared that new NP & PAs were hired in the ED Team flow adjustments are being made.</p> <p>TeleStroke is planned to go live September 2018</p>	<p>Times are too staggered---and does not match RN schedule s Elaine Gardner added that Wi-Fi was needed and potential roll-out will be October 2018</p>	<p>Working on adjust times for best flow</p>	<p><input type="checkbox"/> Transformational Leadership</p> <p><input type="checkbox"/> Structural Empowerment</p> <p><input type="checkbox"/> Exemplary Professional Practice</p> <p><input type="checkbox"/> New Knowledge, Innovations and Improvements</p>	<p><input checked="" type="checkbox"/> People</p> <p><input type="checkbox"/> Patient Experience</p> <p><input type="checkbox"/> Quality</p> <p><input type="checkbox"/> Financial Performance</p> <p><input checked="" type="checkbox"/> Operations</p>

<p>ICU Alice Mulligan, RN</p>	<p>↑ Mobility of vented patients.</p> <p>Clustering care activities at Night (started in March) to limit interruptions for patient and promote longer sleep periods.</p> <p>Nursing Care: Enhancing RN to RN interaction. Discussion about how a “Shadowing program” could improve relationships from unit to unit</p>	<p>Progression of activity levels—from lateral rotation—to the chair position in the bed—to dangling---to OOB to chair.</p> <p>Nurses are collaborating with Respiratory therapy to coordinate the administration of respiratory treatments at times of other schedules to minimize care activities during night hours.</p> <p>Alice Mulligan,RN , Ritzel Boer,RN and Diana Pollock,RN added to discussion regarding the potential benefits of shadowing. Rachel Ansaldo,RN added that the Infusion center is working on a communication and team building exercise---currently being rolled out.</p>	<p>Potential to implement on other units.</p> <p>Explore potential for shadowing program of unit to unit to increase positive influences of RN-RN interaction, enhance learning and increase empathy. This may be a retention activity for the anticipated Recruitment,Retention and Recognition council.</p>	<p><input type="checkbox"/> Transformational Leadership</p> <p><input type="checkbox"/> Structural Empowerment</p> <p><input type="checkbox"/> Exemplary Professional Practice</p> <p><input type="checkbox"/> New Knowledge, Innovations and Improvements</p>	<p><input checked="" type="checkbox"/> People</p> <p><input type="checkbox"/> Patient Experience</p> <p><input checked="" type="checkbox"/> Quality</p> <p><input type="checkbox"/> Financial Performance</p> <p><input checked="" type="checkbox"/> Operations</p>
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<p>OR Flash sterilizations Lorrie Presby, RN Clinical Educator – Surgical Services</p> <p>Kelley Kissane, RN & Lynda Neary, RN</p>	<p>Lorrie shared that there were zero flash sterilizations in June</p> <p>Lorrie also explained that the OR achieved the best numbers for OR cases starting on time – June of 2018.</p>	<p>Mary McDermott – Potential of leaving things in the room to be sterilized by Robot that were previously removed.</p> <p>Robot use has facilitated a lot of this.</p>		<p><input type="checkbox"/> Transformational Leadership</p> <p><input type="checkbox"/> Structural Empowerment</p> <p><input type="checkbox"/> Exemplary Professional Practice</p> <p><input type="checkbox"/> New Knowledge, Innovations and Improvements</p>	<p><input type="checkbox"/> People</p> <p><input type="checkbox"/> Patient Experience</p> <p><input checked="" type="checkbox"/> Quality</p> <p><input type="checkbox"/> Financial Performance</p> <p><input type="checkbox"/> Operations</p>
<p>Nursing Webpage Kathleen Calabro, Specialist Data Analyst</p> <p>Alaris report Carol Daley, RN Nurse Manager – Critical Care</p>	<p>Connie Vance – mentoring Key Note Speaker presentation is posted on the nursing webpage</p> <p>Alaris report –compliance with Guardrails. Data through 2018: Feb. 90.8 % Mar. 89.6 Apr. 88.3</p>	<p>Bill Reifer asked if there is a goal? Carol explained that $\geq 90\%$ is the goal Data does not include May and June due to the Alaris upgrade</p>	<p>Access the Connie Vance video on the nursing webpage as follows: Patient Care → Nursing → Nursing website → Events → Past Events → Nurses Week → Watch on Vi--- → PW : Phelps</p> <p>Carol will continue to report on and discuss this data at this meeting.</p>	<p><input type="checkbox"/> Transformational Leadership</p> <p><input type="checkbox"/> Structural Empowerment</p> <p><input type="checkbox"/> Exemplary Professional Practice</p> <p><input type="checkbox"/> New Knowledge, Innovations and Improvements</p>	<p><input checked="" type="checkbox"/> People</p> <p><input type="checkbox"/> Patient Experience</p> <p><input checked="" type="checkbox"/> Quality</p> <p><input type="checkbox"/> Financial Performance</p> <p><input type="checkbox"/> Operations</p>

Sepsis Data Carol Daley, RN Nurse Manager – Critical Care	Carol presented Sepsis compliance data (Bundle compliance for CMS) for Northwell. 88% Phelps (eight patients) 100% Northern Westchester (four patients) 100% Syosset (one patient)		Carol will share future results of the continued monitoring of the bundle which includes compliance with obtaining blood culture prior to antibiotics administration. The bundle also includes the repeat of the 2 nd lactate specimen. The bundle also includes the completion of the required repeat assessment once the total amount of IV fluids are given.	<input type="checkbox"/> Transformational Leadership <input type="checkbox"/> Structural Empowerment <input type="checkbox"/> Exemplary Professional Practice <input type="checkbox"/> New Knowledge, Innovations and Improvements	<input type="checkbox"/> People <input type="checkbox"/> Patient Experience <input checked="" type="checkbox"/> Quality <input type="checkbox"/> Financial Performance <input type="checkbox"/> Operations
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Respectfully Submitted,

Dianna Pollock, RN, BSN

Date Aug. 13, 2018