

Meeting Name	Quality and Safety Council		Council/Meeting Minutes	Please check off all components and indicators that relate to each topic being discussed.	
Location	Atrium Conference Room				
Date	November 20, 2019				
Time	1pm-3pm				
Conducted By	Carol Daley, MSN, RN, CNML, and Rachel Ansaldo, BSN, RN				
Topic/ Facilitator	Discussion	Staff Input & Feedback	Action	Magnet Components	Strategic Plan Indicator
Denise Podell, RN Director Accreditation Compliance and Informatics	<p>September, 2019-JCAHO findings</p> <ul style="list-style-type: none"> -very successful survey -new scoring method: we received 37 observed findings, which is very good! Many sites receive a minimum of 40 findings. <p>-Seven (7) issues/RFI's</p> <ol style="list-style-type: none"> 1) generators need to be locked 2) generator batteries contain sulfuric acid --need to change 3) Our pressure exchange 4) Peel packs-inner pouch folded 5) Washer-sterilizer test strips not labeled properly 6) Documentation of drug titration associated with MD orders (specifically Precedex). 7) Legature risk: drains in shower and drop ceiling 		<p>-possible CMS validation survey (1 more week in "window"). More intense their JCAHO</p> <p>-Phelps needs to submit corrective actions; which summarizes how we are correcting the findings. Submission deadline is Nov. 29th. We'll likely submit our corrective actions prior to that.</p>	<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 Service

Denise Podell, RN (cont'd) Other issues	<p>JCAHO cont'd</p> <p>The overall handling and maintenance of infection control throughout the hospital is a large emphasis of the survey. Components surveyed:</p> <ul style="list-style-type: none"> • Biohazard labels • Transport of instruments in biohazard bins in the ED • SMI labels for PM • Basins labeled properly for fluids used during surgery/procedures <p>Competency validation accuracy was asked and surveyed most areas.</p> <p>Outdated VIS given</p> <p>New window for next survey is eighteen (18) months after the last survey</p>		<p>In all areas, Biohazard bins must be stored in clean utility rooms. When used instruments need to be cleaned and returned to SPD for autoclaving, the bins need to be moved to the soiled utility rooms.</p>	<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
Debbie Reynolds HAPI incidences	<p>1) 2nd Annual Skin Champion training</p> <ul style="list-style-type: none"> • 27 attended • All clinical nurses can call a skin champion by vocera: We have a "Skin Champion" group now. Skin Champions should be called as a resource for any new pressure injury. <p>2) October incidents 2 deep pressure injuries</p>	<p>Simply say call a Skin Champion through the vocera badge.</p>		<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 checked="" type="checkbox"/> Quality <input type="checkbox"/> Financial Performance <input checked="" type="checkbox"/> Operations

	3) Prevalence Data for 3 rd Quarter: No Stage II Pressure injuries 1 hospital acquired stage 1 (this is not reportable).				
Kathy Calabro Data Analysis	Nursing Website Update 1) Pressure Injuries-compare to National Benchmark doing very well 2) Journal Club 2 new articles -Reducing patient stress -Family caregiver beliefs re: end of life 3) Hot topics communication 4) Nursing views 5) Upcoming events 6) In the spotlight 7) Certification 8) Phelps Sprouts	Both articles are excellent!		<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 type="checkbox"/> Quality <input type="checkbox"/> Financial Performance <input type="checkbox"/> Operations
Alice Mulligan ICU	Spontaneous Awakening and Breathing Trials on all ventilator patients-- -Working closely with Intensivists and Respiratory therapy to complete trials and decide on plans. -Focus on consistent bundle components to prevent vent-associated events <ul style="list-style-type: none"> • Mouth care • Head of bed elevated 30 to 45 degrees (minimum) 			<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

	<ul style="list-style-type: none"> Repositioning a minimum of every 2 hrs and early mobilization as able and applicable. 		Our ventilator days have remained low.		
Kelly Kissane, OR ER	<p>IUSS-0%</p> <p>-Press Gainey scores improving!</p> <p>-Blood culture volume: marking vials in an effort to meet the 8 ml level (a minimum of 8ml ensures accuracy of the culture).</p> <p>-Sepsis: markers to meet protocols improving</p>		Great data!	<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 checked="" type="checkbox"/> Patient Experience <input checked="" type="checkbox"/> Quality <input type="checkbox"/> Financial Performance <input type="checkbox"/> Operations
Paula Keenan	<p>-Clinical Alarms: must be responded to within one (1) minute.</p> <p>- audits need to be submitted to Paula Keenan.</p> <p>Falls: total for October has decreased</p> <ul style="list-style-type: none"> Possibly due to telesitter program Still in “red” for Northwell system (ranked 14th in system out of 15) <p>Falls Committee Meeting this Friday; someone from each unit should attend</p> <p>1 Fall with injury-RCA (Root-Cause- Analysis) done with the clinical staff from the unit/dept.</p>		<p>All units need to be auditing response times to clinical alarms.</p> <p>Every unit needs to have a representative on the Falls committee.</p>	<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

	Telesitter: if you think patient will benefit, give it a try!				
Katherine 2N/3N	Moving between units (3N and 2N) – a lot of difficulty tracking projects /information. Better to start in January when 3 North is back on home unit.			<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
Suzaanna (Endo)	-Auditing specimen verification: double check with two (2) staff members to ensure correct patient name and labeling -97% of specimens followed proper checks per audit.			<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
Lynda Neary, RN(ASU)	-PI-follow up phone calls for patient satisfaction: every patient who is discharged is called for post-op check in. Wait times for OR---data not available at this time.		Responses remain very good.	<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

Margaret Santos (peri operative services)	<p>Pain- good results No “fall outs” for pain management Continue to need the PI from some departments Press Gainy-will be removing the pain management question -change audits-adding non-pharmacologic methods (ice, aromatherapy, ect) Discussion with Judy Dillworth-how do we measure outcomes with using aromatherapy. What are the measures for pain, anxiety, nausea?</p>		<p>More to come on outcome measurement for aromatherapy.</p>	<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
Alex Xelas Infection Control	<p>C-diff: Seven to date; less than last year! Much of our success is due to the Xenex robots and keeping patients with MDRO's isolated.</p> <p>CLABSI: Two (2) total for year CAUTI: Five (5) cases, slight increase from last year Judy: ask Alex to share RCA's so we can learn how to handle/change practice</p>		<p>Judy Dillworth asked that Alex and the IP team share the information from the RCA's so that we learn how to handle or make changes to current practice.</p>	<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

Respectfully Submitted,

Kelly Kissane, RN
Reporter/Transcriber Signature

Date November 20, 2019