

Meeting Name	Quality and Safety Council Meeting				
Location	Atrium Conference Room				
Date	1/16/2019		Council/Meeting Minutes	Please check off all components and indicators that relate to each topic being discussed.	
Time	1 PM- 3 PM				
Conducted By	Carol Daley, MSN, RN, CNML and	Rachel Ansaldo, BSN, RN			
Topic/ Facilitator	Discussion	Staff Input & Feedback	Action	Magnet Components	Strategic Plan Indicator
Review of Dec. meeting minutes. Review of Quality and Safety Charter. Plans for 2019/ C. Daley	Introductions: Roxanna McKenna, RN from 5 North will be joining the council for 2019. Welcome!! Minutes discussed. Charter reviewed.	Goals of Unit based councils.	Minutes approved. Charter reviewed— Change membership to 60 to 75% attendance for all meetings. Excused absence—approved by manager. Excused absences would not count. Clinical Ladder changes: different levels of participation for each level—RN I- RN IV. Reinforce with manager to "staff up" on the 3rd Wednesday of the month (Magnet Council meetings)—to allow for clinical nurses to attend the meetings. Changes to the Charter will be made and distributed once finalized.	☐ Transformational Leadership ☑ Structural Empowerment ☐ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements	 ☑ People ☐ Patient Experience ☐ Quality ☐ Financial Performance ☐ Operations



Renal Care Indicator/ Janice Breen, RN	All Performance Indicator work shared: Medication errors—0 CLABSI's –0 Weight measurement documentation: 100% December 2018—66 total Dialysis treatments	Renal Care continues to work on and improve with all clinical indicators.	☐ Transformational Leadership ☐ Structural Empowerment ☐ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements	☐ People ☐ Patient Experience ☐ Quality ☐ Financial Performance ☐ Operations
Organizational Quality Plan/ B. Reifer	Bill discussed the need and pertinence for all units and departments (despite size) to be monitoring something.	Data from Quality and Safety shared with PICG council at least quarterly. Make sure that unit representatives are up to date. Unit-based Council work should be sent to all council chairpersons.	☐ Transformational Leadership ☐ Structural Empowerment ☐ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements	 □ People □ Patient Experience ☑ Quality □ Financial Performance □ Operations
Infection Prevention update/ Alex Xelas, RN	Alex conducted an overview of an RCA (Root Cause Analysis) done on a 5N CLABSI case.	Use of biopatch in placenot the documentation of same. Need to pan culture with episode(s) of elevated temps. Documentation of diaphoresis symptoms. CHG bathing for all patients with central lines and mid-lines. (Currently only done in the ICU). Scrub the hub clarification: Prevatics swab requires only 5 seconds of dry time Considerations: 1. Pan -culture policy for patients with central lines that develop temp elevations. 2. Sterile caps for central line access ports—presented to the Value	☐ Transformational Leadership ☐ Structural Empowerment ☐ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements	 □ People □ Patient Experience ☑ Quality □ Financial Performance □ Operations



			Analysis committee. Product being analyzed. Judy Dilworth added that all units/departments should have representation on the Value Analysis Committee.		
3 North: Medication education/ K. Urgiles, RN	Katherine discussed the project the 3N team is working on: Through the Allen TV'seducation on prescribed medications.	Currently having an issue with the transfer of video data from 2N to 3N. Work on this in progress.	In room computersvery helpful. Wireless scanners—efficient and liked by the 3N staff! On unit: posters explaining Rounding and Medication teaching. 3N Press Ganey scores should be available by mid February.	☐ Transformational Leadership ☐ Structural Empowerment ☐ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements	 □ People ⊠ Patient Experience ⊠ Quality □ Financial Performance □ Operations
2 Center: Follow up phone calls on all patients discharged on anticoagulants. Hourly Rounding/ Jacklyn Wylie, RN	Both initiatives are going well.		Projects discussed at unit staff meetings.	☐ Transformational Leadership ☐ Structural Empowerment ☐ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements	 ☑ People ☐ Patient Experience ☑ Quality ☐ Financial Performance ☐ Operations



5N: Quiet at night initiative/ R. McKenna, RN	Roxanna discussed the work being done on this	Work flow interventions: ~Open visiting hours (throughout the hospital) ~involvement of all disciplines ~Signs posted re: "Quiet promotes healing	☐ Transformational Leadership ☐ Structural Empowerment ☐ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements	 □ People ⊠ Patient Experience ⊠ Quality □ Financial Performance □ Operations
ICU: early mobilization in mechanical ventilator patients. Delirium reduction measures/ C. Daley	Early mobilization Efforts directed at aggressive mobilization attempts in ventilator patients who fail the Spontaneous Breathing Trials done the previous day. Delirium—Clustering care initiative.	Plan to provide aromatherapy as a sleep intervention in the near future.	☐ Transformational Leadership ☐ Structural Empowerment ☐ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements	 □ People ⊠ Patient Experience ⊠ Quality □ Financial Performance □ Operations
Telemetry: Cardiac Alarm Management. Quiet time initiative. Rounding champions/ T. Wilson, RN	All indicators discussed.	Indicators discussed at unit council and staff meetings.	☐ Transformational Leadership ☐ Structural Empowerment ☐ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements	 □ People □ Patient Experience ☑ Quality □ Financial Performance □ Operations



1 South: Restraint Monitoring/ K. Lidke, RN Endo: Lab specimen verification and SBAR Report	1 South will continue to monitor patient falls also.		☐ Transformational Leadership ☐ Structural Empowerment ☐ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements	□ People □ Patient Experience □ Quality □ Financial Performance □ Operations
OR: IUSS/ K. Kissane, RN Hyperbaric Medicine/ R. Beor, RN	Immediate Use Steam Sterilization will be monitored. OR start times and room turnover times will also be monitored. HM will monitor Quality of life in Radiation patients. They will also provide and monitor dive teaching to prevent dice stops.		☐ Transformational Leadership ☐ Structural Empowerment ☐ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements	 □ People □ Patient Experience ☑ Quality □ Financial Performance □ Operations

Candace Johnson, RN			
DateFeb. 2, 2019	Da		