

Quality and Safety Council				
Atrium Conference Room  9/18/2019  1 PM-3 PM			Please check off all components and indicators that relate to each topic being discussed.	
		<b>Council/Meeting Minutes</b>		
Carol Daly, MSN, RN CNML and Rachel Ansaldo BSN, RN				
Discussion	Staff Input & Feedback	Action	Magnet Components	Strategic Plan Indicator
-No minutes as of yet		-Phone- Gail Wilson, Linda Neary on phone	☐ Transformational Leadership	<ul><li>☑ People</li><li>☐ Patient</li></ul>
Janice Breen, RN Renal Care Manager is no longer going to give updates-She will meet regularly with Helen Renck and Alex Xelas. Any pertinent information will be forwarded to this council.		-if anything needs to be shared (Kathy could post on website)  -Private rooms are being assigned now to dialysis patients. Semi-private rooms do not allow for use of the bathroom when dialysis is in progress.	☐ Structural Empowerment ☐ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements	Experience  Quality  Financial Performance  Operations
Falls with injuries Pressure injuries Stage 2 Catheter associated infections  Telesitter 193 cases to date  Restraints data in Psych to send to Kathy to graph or organize	Reviewed dashboards and benchmarks Magnet requirement  1 month 19 second or more patient will fall 11 second average	Data to be graphed. Will be at next meeting (include telesitter data)	□ Transformational Leadership     □ Structural Empowerment     □ Exemplary Professional Practice     □ New Knowledge, Innovations and Improvements	<ul> <li>☑ People</li> <li>☐ Patient</li> <li>Experience</li> <li>☑ Quality</li> <li>☐ Financial</li> <li>Performance</li> <li>☐ Operations</li> </ul>
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Alex Xelas IP Director	CLABSI- 2 for 2019  5N 2N CAUTI- 5 C-Diff- 4 5N		For C. Diff-do not test if previously positive -case by case if they need isolation	☐ Transformational Leadership ☐ Structural Empowerment ☐ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements	<ul> <li>□ People</li> <li>□ Patient</li> <li>Experience</li> <li>☑ Quality</li> <li>□ Financial</li> <li>Performance</li> <li>□ Operations</li> </ul>
Tahler Cambriello, RN		-supervisors are not always able to assign private rooms for all isolation cases. Alex or Rachel should be consulted.	-watch readmits -contact (active specimen this admission the supervisor wants)	☐ Transformational Leadership ☐ Structural Empowerment ☐ Exemplary Professional Practice	☐ People ☐ Patient Experience ☐ Quality ☐ Financial
Alex Xelas	-disposable gowns Flu outbreaks	Strong rapid test of flu- success story		☐ New Knowledge, Innovations and Improvements	Performance  □ Operations
Jacklyn Wylie	-straight catheterizations for post spinal anesthesia patients not sure of targeted outcome with this.	These patients have difficulty with voiding due to retention.	Information presented at Orthopedic Conference last year.	☐ Transformational Leadership ☐ Structural Empowerment	
Rhea MaTeresita San Louis	-Modifying policies for midlines and peripheral IV's. Looking at extending the time frame for a single IV site to a four day period if clinically indicated.		INS recommendation.	☐ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements	
Kelly Kissane,RN CNS OR	-continuing current work until January then starting new project. Only one less statistic thirty-five minutes to turn over roominitiated in ASU 42.5% on time 83% within fifteen minutes	Scheduling with OR Fall Outs -late orders MDs late -consent	-RNs no longer able to obtain consent -H& P must state risks and benefits explained to patient-if it does RN may obtain consent		



	Clarifying consent orders Per Eileen Egan-MD must explain thoroughly.  TEAM STEPPS reference	Meditech preadmitted for procedure 20-25 minute time for RN.	MDs upset having to re-do consents -communication clarification.	☐ Transformational Leadership ☐ Structural Empowerment ☐ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements	<ul> <li>□ People</li> <li>□ Patient         Experience</li> <li>⊠ Quality</li> <li>□ Financial         Performance</li> <li>□ Operations</li> </ul>
Judy Dillworth  Lynda Neary	Accountability/legality behind protocols/policies  To facilitate timeliness of inpatient surgical cases, Nursing Supervisor and units are being contacted to coordinate the communication and to notify pick up times with transport/OR orderlies.	Time out document  ASU Nurses/staff for every case		☐ Transformational Leadership ☐ Structural Empowerment ☐ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements	<ul> <li>□ People</li> <li>⊠ Patient         Experience</li> <li>⊠ Quality</li> <li>□ Financial         Performance</li> <li>□ Operations</li> </ul>
Rebecca Mitchell/Infusio n  Mary Pniakhamta, RN  Ritzel Tuazon- Boer, Hyperbaric Medicine	Lab draw and time passing between med draws/administration.  Suggested to change protocol to improve patient flow in outpatient setting. Mary will share the information with  Radiation/patients oncology Quality of life studies by Liz, NP Referrals from other hospitals			☐ Transformational Leadership ☐ Structural Empowerment ☐ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements	<ul> <li>□ People</li> <li>□ Patient</li> <li>Experience</li> <li>⊠ Quality</li> <li>□ Financial</li> <li>Performance</li> <li>□ Operations</li> </ul>



Phyllis Vonderhide	Inpatient quietness Quiet night protocol handout-patient and family friendly Orientation of patient to unit Volunteers via Hospital Department Communication with charge nurse ER Room ready-music video to orient patients to units.		Interventions: Cluster care Eye masks Light switches  Room sizing-changesfuture plans.	☐ Transformational Leadership ☐ Structural Empowerment ☐ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements	<ul> <li>□ People</li> <li>☑ Patient Experience</li> <li>□ Quality</li> <li>□ Financial Performance</li> <li>□ Operations</li> </ul>
Candice Higgins, ED Mgr	Communication with nurses 3 questions on surveys  Code Blue report and documentation 95% Benchmark compliance with documentation 1 Patient arrested in elevator Some blanks left on code blue forms: MD signatures and Et Co2 entries. Highlighted specific values on code blue record.  Upcoming RN survey—will be sent out by email with a link to Red Cap regarding the medication education process for discharge medications. Will be sent out in the next 2 weeks.	-Treating patients with respect -Appropriate explanation -Listen carefully  Post code documentation	Et Co2-values need to be documented through continuous wave form monitoring.	☐ Transformational Leadership ☐ Structural Empowerment ☐ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements	<ul> <li>□ People</li> <li>□ Patient Experience</li> <li>⋈ Quality</li> <li>□ Financial Performance</li> <li>⋈ Operations</li> </ul>



CarolDaley reporting for Debbie Reynolds, CWOCN and Paula Keenan	NO HAPI in August!  The Telesitter program is up and running.  We are currently monitoring 4-8 patients a day.		August: No falls with injury.	☐ Transformational Leadership ☐ Structural Empowerment ☐ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements	<ul> <li>□ People</li> <li>□ Patient         Experience</li> <li>☑ Quality</li> <li>□ Financial         Performance</li> <li>□ Operations</li> </ul>
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Respectfully Submitted,

Candace Johnson, BSN, RN\_\_\_\_\_\_ Reporter/Transcriber Signature

Date Sept. 19, 2019