

Meeting Name	Quality & Safety Council Meeting		Council/Meeting Minutes	Please check off all components and indicators that relate to each topic being discussed.	
Location	Boardroom				
Date	11/18/2020				
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
Call to Order: Welcome Recorder Review of October meeting minutes/ C. Daley, MSN, RN, CNML	-Meeting called to order @ 1:00pm. -Recorder: Cherry Lyn Fuentes, MS-C,RN-BC,NPD-BC -October meeting minutes discussed.	-Call-in: Please see attendance -No corrections at this time.	-Members to review and send any changes.	<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 type="checkbox"/> Operations
Medication Reconciliation Michelle Horvath, MSN,RN,CPHQ, CJCP	Michelle Horvath presented an overview of the Med Rec process, Med Reconciliation Compliance Data from 2018-2020, and ongoing vulnerabilities in the Medication Reconciliation Process and opportunities for improvement. Some examples provided include the following: <ul style="list-style-type: none">Provider error during discharge reconciliation. Opportunity for nursing to have questioned.Failure to implement consultant recommendations.	<ul style="list-style-type: none">Med reconciliation is a very complex process. It becomes problematic when not completed by PMA or Pharmacy.In some facilities MDs are performing the Med Rec.J. King,RN stated that in BRU, if H&Ps are done at night the RNs make a list for the NPs. For the most part the Psychiatrist reconciles the	<ul style="list-style-type: none">A team is being developed lead by Candice Huggins to brain storm a potential project to improve the process. Looking for nursing unit representation. Let M. Horvath know if interested in joining.	<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"> ○ Failure to use outside records in medication reconciliation. ○ Medication Reconciliation not done timely. 	<p>meds in ED for BRU admissions.</p> <ul style="list-style-type: none"> • Med Rec compliance showing sustained improvement however it only shows that Med Rec is touched but does not necessarily show that it's correctly done. 			
<p>Falls</p> <p>Ellen Parise</p>	<ul style="list-style-type: none"> • Total of 14 Falls for October. 7 from inpatient and ED, 1 from outpatient, 5 from 1 South, 1 from BRU • Phelps is Green for falls with injury, yellow for falls overall. We are one of the few hospitals remained at yellow across the system. • Trends are being reviewed and analyzed. • Actions that are being taken including: <ul style="list-style-type: none"> ○ For 1 South, Ceiling mounted telesitter will be installed. Awaiting for assistance from Safety Department to install. ○ Requesting for more ceiling mounted telesitter. ○ Jenna Harris, RN from 1 South will conduct literature review for best practices related to fall 		<ul style="list-style-type: none"> • Falls committee to look at Telesitter data further. 	<ul style="list-style-type: none"> <input type="checkbox"/> Transformational Leadership <input type="checkbox"/> Structural Empowerment <input type="checkbox"/> Exemplary Professional Practice <input type="checkbox"/> New Knowledge, Innovations and Improvements 	<ul style="list-style-type: none"> <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

	<p>prevention in Psych. Zucker Hospital also offered their best practices.</p> <ul style="list-style-type: none"> ○ More brackets are being ordered. The mobile telesitter are very big and can be a fall hazard. ○ Ordering shower shoes <ul style="list-style-type: none"> ● Fall Risk Assessment being reviewed by C. Burke and C. Young for flow. ● iLearn will be assigned. Fall Tool Kit and Tips Sheet is also available on the Northwell Intranet. 				
<p>Nursing Quality Indicators Report/ Unit Representatives, Clinical RNs</p> <ul style="list-style-type: none"> ● Elizabeth Wiley, RN, MCH ● Lynda O'Neary, RN ASU 	<ul style="list-style-type: none"> ● 1 South- no report ● Outpatient Pediatrics Infusion Medication Reconciliation and Mediation Teaching currently at 50%. ● Post Discharge Phone Calls- 1 Fall Out 	<ul style="list-style-type: none"> ● Outpatient pediatric infusion had low census. Will include inpatient compliance. ● Can we administer a homegrown survey related to Medication Education? 		<ul style="list-style-type: none"> <input type="checkbox"/> Transformational Leadership <input type="checkbox"/> Structural Empowerment <input type="checkbox"/> Exemplary Professional Practice <input type="checkbox"/> New Knowledge, Innovations and Improvements 	<ul style="list-style-type: none"> <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"> Eileen Peterson, RN Infusion Center Kelley Kissane, RN, OR Carol Daley, RN, Nurse Manager ICU 	<ul style="list-style-type: none"> OR on Start Time -55% in October (start time within 15 min is 92.6) Patient Education- were below benchmark but better now. Chemo-2 RNs reviewing prior to handing chemo OCN certified above the benchmark IUSS- 1 incident for October. That puts us to .004%. Benchmark is 3%. Clinical Alarm Audits for inpatient units- Total of 69 audits, 100% compliance. Safe Patient Handling for Marilyn Maniscalco. 18 SPH incidents YTD. 	<ul style="list-style-type: none"> Phelps don't have grace period. Northwell have 10-min grace period. The center has grown so much averaging 50 patients/day. Incident is related to a hole in wrapper of instrument tray. More incidents reported this year but severity and cost are less. Annual Olympics will be virtual. Phelps Team will participate. The team is composed of an RN, Tech, Peri-op Service Manager, and PT Aide. 			
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<p>Infection Control Alex Xelas, RN</p>	<ul style="list-style-type: none"> • Covid cases are going up. Alex ask the members to always be suspicious, raise concerns if patient starts to develop COVID symptoms. • When providing any aerosolizing treatment, staff must wear full PPE. Alex also distributed the guidelines. 	<ul style="list-style-type: none"> • A recent patient was admitted asymptomatic and became symptomatic. Patient's Home Health Aide was COVID positive. Staff escalated the situation and patient was mobilized. • COVID Transmission are happening during meals and break time. A tent will be set up to provide a place for meals and break time. • R. Ansaldo, RN stated that some ASU patients receive nebulizer as pretreatment. 	<ul style="list-style-type: none"> • Remind all staff to put their mask back on after eating. K. Calabro will create a reminder to be posted on the break rooms. 		
<p>Pressure Injury Debi Reynolds</p>	<ul style="list-style-type: none"> • Total of 3 incidents in October <ul style="list-style-type: none"> ○ 1 South patient developed 2 DTI on the foot. Patient had wraps on the leg ○ 2 North patient developed Stage II on and inside the nose. Patient was on BIPAP and NGT. Patient Expired. ○ ICU patient develop DTI on the butt. Patient expired. • 4th Quarter Prevalence- seen 101 patients and no findings. • Skin Champion Training well received. 2 sessions were held; 1 	<ul style="list-style-type: none"> • Respiratory will trial a new softer mask with notches for the tubes. • Is there correlation with Patient expiration and development of Pressure Injury? • K. Calabro showed pictures posted on the website. 	<ul style="list-style-type: none"> • Encourage staff to utilize the Skin Champions. Can be 		

	for initial training and 1 for renewal.		called on vocera for consult and assistance.		
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Respectfully Submitted,

Cherry Lyn Fuentes, MS-C, NPD-BC, RN-BC,

Date : 12/5/20_____

Date _____