

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/MS Teams				
Date	4/21/2021				
Time	1P-3P				
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 March minutes Recognition	2C/ICU/ED Northwell Star 90award		Minutes to be resent for review J. Dillworth- approved K. Scherf- 2 nd . Congratulations to the ICU/ED and 2C units for achievement of excellence in Patient satisfaction scores.	<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 type="checkbox"/> Quality <input type="checkbox"/> Financial Performance <input type="checkbox"/> Operations
Case review of Med history/ reconciliation RCA C. Huggins	1. Review RCA-related to medication Lasix received four doses with albumin in one day. Result-renal failure 2. Medication Reconciliation Brian Blaufeax sends report on meds that weren’t checked Med rec process flow chart. ER RN-review Inpt RN-last date taken	3 units with 100% Med/Rec: 2C/ICU/ED Nurse’s role in med rec is the most important slide.. Liz Wiley said women don’t always know the dosages	1. Reminder to staff-do not hesitate to question orders if not sure 2. Candice will share the Med Rec Policy with Judy for distribution 3. Med Rec safety issue- unit councils own it	<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 type="checkbox"/> Quality <input type="checkbox"/> Financial Performance <input type="checkbox"/> Operations

<p>Spine Surgery Level Case: Time Out</p> <p>Mary Kavoor</p>	<p>Incident-OR with work related back injury Surgery scheduled for T10 and 11 compression Actually performed on 9 and 10 Review of the literature: Wrong level spine surgery occurs 68% of the time. Even with the universal protocol, can wrong level surgeries are performed. Worked with Dr. Silva for a better pre-surgical process New process audit.</p>		<p>March 3,2021 2nd time out was communicated to all neurosurg and orthopedic surgeons. Auditing will continue through the end of May to look at 2 time outs.</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 type="checkbox"/> Quality <input type="checkbox"/> Financial Performance <input type="checkbox"/> Operations
<p>HAPI incidence Debi Reynolds</p>	<p>Debi reported: January: 15 hospital acquired PI 13 COVID + Feb 7: 5 COVID + March 6: 3 COVID + 2 exp</p>	<p>Stage III HAPI from NG tube-inside nose When taping NG tube reconnect-to side of middle and not on the front Members asked when the next skin champion program will be.</p>	<p>If you suspect a HAPI, call skin champion to review and consult.</p> <p>Next cohort of skin champions is planned to start in the Fall 2021 (Sept or October. More to follow</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 type="checkbox"/> Quality <input type="checkbox"/> Financial Performance <input type="checkbox"/> Operations
<p>Falls/Telesitter Paula Keenan</p>	<p>In March, there was an increase in falls (13 inpatient; 1 outpatient; 3 minor injury). Looked at trends-there were no trends in time/shift. Telesitter usage is increasing which is good. Calibration prevented 670 falls. Response to stat alarms improved to 17 sec for March</p>	<p>KQMI minor injuries do not count but DO count for NDNQI reporting (required for Magnet).</p> <p>Documentation needs to be clear (say “patient found on the floor”)</p>	<p>New fall assessment-Meditech is almost complete. Education to begin in May with anticipated go live in early June.</p> <p>Staff to follow protocol when discontinuing patient from telesitter.</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 type="checkbox"/> Quality <input type="checkbox"/> Financial Performance <input type="checkbox"/> Operations

Inpatient CAUTI Alex Xelas	Alex shared powerpoint and reported that the indications for indwelling catheters has been changed. 4/7 Bard came in for an assessment 5N has been HAI free since 2019 “0” onset hospital C-diff for 2021 ICU – decreased foley days	Members commented that wipes should be kept with all other wipes. Cherry reminded all to reinforce the use of the sticker with the techs	Continued reassessment of need of indwelling catheters each shift. “5 swipes with 5 wipes” catheter care. Goal is to change the culture throughout the facility to decrease usage of	<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 type="checkbox"/> Quality <input type="checkbox"/> Financial Performance <input type="checkbox"/> Operations
Patient Experience Phyllis Vonderheide	Scores are lowest that Phyllis has ever seen. Recommend hospital: % always was 75% (ranked in 62 nd percentile) Communication with MD. RN, Hospital staff was 62% (ranking below 57%)	Rachel shared experience from Hackensack hospital. Discussed impact of construction- vintage OR renovation (changing environment causes disorientation of visitors, effect of noise)	Staff advocated for return of volunteers to assist Better wayfinding process needed. Next week is patient experience week. 2021 Goals: to recommend top box 80.8% Nurses goal domain: top box 82.6%	<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 type="checkbox"/> Quality <input type="checkbox"/> Financial Performance <input type="checkbox"/> Operations
Unit-specific Quality indicators	5North/2 North (Jade)- focus on falls, quiet at night 2North Bedside shift Report- will develop action plans at next unit meeting ASU (Linda)- post-op phone calls: rate care/anesthesia experience. Issues with cataract patients (4 chairs down to 3 due to renovation)- expect improvement moving forward. 3North (Ashley)- age friendly pilot regarding 4Ms (what matters most, mentation, mobility, medication) at 100% 2 Center (Steven Dos) Medication Education- making a laminated sheet re: common meds/side effects.	Paula added that rehab will have a separate service line; med	Unit dashboards to be reviewed next meeting. Improvement trends anticipated.		

	<p>Peds infusion (Liz Wiley) RRT for reaction to Remicade resulted in review of process and had drills to work out logistics. As a result, Braslow cart was moved to be more available and oxygen set ups (100% non-rebreather etc) are now kept in all rooms.</p> <p>Hyperbaric (Ritzel) just completed Undersea Hyperbaric Medicine service (UHMS) survey</p>	<p>education just for hips/knees.</p> <p>There are about 20 patients who receive remicaid per month</p>	<p>Awaiting UHMS results</p>		
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Respectfully Submitted,

Paula Keenan, RN