Phelps Hospital
Northwell Health®

Meeting Name	Quality & Safety	Council/ Meeting Minutes	Please check off all components and indicators that relate to each topic being discussed.
Location	Atrium Conference Room		
Date	11/17/2021		
Time	1pm – 3pm		
Conducted By	Kelley Kissane, RN and Rachel Ansaldo, RN		

Topic/ Facilitator	Discussion	Staff Input & Feedback	Action	Magnet Components	Strategic Plan Indicator

Meeting Minutes/R. Ansaldo
 	
Introductions/K. Kissane
	-minutes discussed and if changes are required, submit to Rachel Ansaldo, RN
	
	-new members:
	    -OR Educator: Jessica Rinaldi
	    -Behavioral Health: Marvin
	-member introductions
		-on Teams:
		  -Maria M.
		  -Patricia B.
		  -Jade Santiago
		  -Stephen Dow
		  -Cherry Fuentes
		  -Judy Dillworth
		  -Liz Wiley
			Welcome new members!	☐ Transformational Leadership
				
				☐ Structural Empowerment
				
				☐ Exemplary Professional Practice
				
				☐ New Knowledge, Innovations and Improvements
					☐ People
					
					☐ Patient Experience
					
					☐ Quality
					
					☐ Financial Performance
					
					☐ Operations

HAPI/Benje S.	(Sept 2021) -3 incidences, nothing greater than Stage III -OR/2N: surgeon notified but 2N took responsibility, NG tube, unstageable -2N: sacral ulcer -5S: DTI (L heel) (Oct 2021) -3HAPIs -5N: DTPI x3, R ear, nasal cannula -11 new skin champions: PACU, OR, ASU, ENDO -Total 31 skin champions -NDNQI (Nov 3) – only 1 HAPI found on that day -ICU had no HAPIs for over 90 days	-Kelley K. asked if the HAPI always gets designated to the floor that they are going to -Benje stated yes -the patient was refusing to be moved	Continue to monitor Congratulations ICU!	☐ Transformational Leadership ☐ Structural Empowerment ☐ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements	☐ People ☐ Patient Experience ☐ Quality ☐ Financial Performance ☐ Operations

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Magnet Conference Update/Maria Mendlovsky	-Rapid Cycle Deliberate Practice:
	-initially developed by a nurse in Johns Hopkins
	-presented by NYU, implemented NRP pressure to all L&D based on the fact that human brain can only retain info for 3 months; 90% of nurses completed the program
	-presentation recommended quarterly sessions of small groups completing a pre-briefing, practice interventions, and de-briefing
	-AHA also presenting the Resuscitation Quality Improvement (RQI) 2025 which states that every hospital will be able to provide quarterly microsessions of ACLS, PALS, and NRP to be able to practice theses skills
	-RQI: "Low impact, high frequency CPR refresher"
	-recommending CEU credits for these microsessions
	-recent neonatal code at Phelps was chaotic
	-information about these initiatives will be available and given to Organizational Development
		-how many hospitals have implemented these initiatives?
		   -AHA hope to have the RQI implemented in all hospitals by 2025
		-how long were the microsessions?
		   -20 minutes as per Jessica R., who was at NYU when it was implemented
		-what are the qualifications for those holding the microsessions?
		   -the nurses were trained in order to teach the microsessions, certifications were not required to train
		   -AHA partnered with RQI and they provide a training program to teach the nurses to train
			-K. Kissane will follow up in organizational development	☐ Transformational Leadership
				
				☐ Structural Empowerment
				
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2023 Magnet Manual Update/J. Dillworth	-Cohen Children's received the Magnet Prize for creating pass for autistic children so they do not have to wait to be seen; decreased potential agitation
	-Northwell Choir sang at Magnet conference opening session
	-Candy Campbell – exercises for team building
	-NEW MANUAL:
	   -more data analysis
	   -structure, practice, outcome structure
	   -policy, procedures, and charters
	   -research infrastructure (new knowledge & innovation)
	   -nurse sensitive indicators – ambulatory needs 3 measures vs. current requirement of 2 indicators.
		Maria suggested Candy Campbell as a speaker for Phelps	Continue to identify unit-specific and organizational specific quality indicators & highlight improvements.
			
			Identify more performance improvement opportunities for ambulatory.
				☐ Transformational Leadership
				
				☐ Structural Empowerment
				
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| Falls, Clinical Alarms, Telesitter/Paula K. | (Falls)
-(Sept) 4 falls
-(Oct) 6 falls, 5 inpatient
-(Nov) 5 falls, 4 inpatient
-one fall sustained injury -> went to OR (from 1-south)
-still in "red" for falls and injury -> but improving
-System wide – Northwell Fall Policy
-ED Fall assessment is being tweaked to be more in line with the Northwell policy
-new assessment can eliminate the mobility assessment ("AMPAC Six Clicks")– LIVE end of Dec or Jan 2022
(Clinical Alarms)
-10 observations/month are still needed from each unit
-please have units return form to Paula
-can be a HUC or Tech, assigning is better
-Bed Alarms are coming
-Call bells added tracking system
(Telesitter) -*presented by Kathy Calabro*
-Avasure did in-house training (5-North)
-Goals: build relationship with patient, verbal interventions of 11-12 pts/day was initial goal
-(Aug) 4 pts/day, (Sept) 6 pts/day, (Oct) 11 pts/day
-63% utilization in Oct, 60% is our average
-stat alarm should be below 17 (response time), over 19 is a risk for fall | -functional assessment as well as safe patient handling assessment all in one assessment

-Telesitter training has helped improve utilization
-seeing visual representation was helpful feedback | Continue to monitor falls.

Continue to seek opportunities to use Telesitter. | ☐ Transformational Leadership

☐ Structural Empowerment

☐ Exemplary Professional Practice

☐ New Knowledge, Innovations and Improvements | ☐ People

☐ Patient Experience

☐ Quality

☐ Financial Performance

☐ Operations |

Nursing Quality Initiatives being worked on
 	
Clinical Staff
	(Kelly – PACU)
	-delay D/C times from recovery room
	-15 hrs/month in delays
	-bed availability improved
	-delays in hand-off report between nurses
	(Jade – 2N)
	-telesitter- impact on falls
	-bed-side report- area to improve
	-"getting to know me" clouds implemented
	(Mira – 5N)
	-music to calm the patients with dementia or behavioral issues
	(Lynda – ASU)
	-Also attended Magnet conferencet:
	   -Speaker – "Big Changes with Little Ideas"
	   -"Turning team" tech hired to help with turn
	   -Acuity-based scheduling
	   -change in workflow in ASU
		-Doreen W. has research that can be implemented regarding music for med/surg units and will work with Mira
		
		-similar scheduling in Infusion
			Consider implementing some ideas from Magnet conference & other professional conferences moving forward.	☐ Transformational Leadership
				
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Patient Experience, Press Ganey
 	
Phyllis Vonderheide
	-(HCAHPS): for definitely recommend, Sept moving up (74%) 60th percentile within Northwell
	-(ED): Phelps is still meeting goal in our area 88th percentile
	-(OAS, procedural): upward trend, all ambulatory meeting goal, leading in area
	-Culture of Care: Connect, Aware, Respect, Empathy
	   -teamwork
	   -open communication
	   -transparency
	   -no excuses
	   -need to keep patient at the center of everything we do
	   -understanding and managing what the patient sees and feels
			-Senior Leader Rounding: will be rounding on patients, using Cipher tool, staff engagement
			
			-Care Leaders- continue to review comments from HCAHPS & recognize staff.
			-Whiteboard: revisiting and recommitting to filling out the whiteboards
				☐ Transformational Leadership
				
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-Bedside Shift Report:
   -how is it going on the floors?
	-behavioral health will start to address this
	   -logistics and floor plans affect bedside shift report
	   -an obstacle is the number of different nurses that someone needs to report off to
	   -disclosing patient information with roommates in the same room
	   -at some point, you need to do a physical/visual assessment, but you do not have to discuss all of the patient's information at bedside
		All staff to think about ways to re-implement Bedside Shift Report in a sustainable way.		

Respectfully Submitted,

Rachel Ansaldo, RN

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Manager Signature   **Director Signature**

Date _____   **Date** _____