**EP34-10 PH 9 Staff Meeting July 19, 2012**

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| Present: Lenora Kraft RN; Connie Brown Bus. Support III, Andrea Finningsmier RN, Kristina Davis RN, Robert Wicklund US/CNA, Megan Conway RN, T. Jaleh Wuthier RN, Katrina Jones RN, Demethrea Barnhill LPN, Stephanie Seeger RN, Kristen Waughtel RN, Joan Schoendaller RN, Sara Feldman RN, Trudy Killen RN |

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| Agenda  | Discussion | Action | Who  |
| Quality of Care | Katrina Jones is a co-chair of the Quality council and gave a report to the Staff regarding the importance of Hand Hygiene. | Know that Hand Hygiene compliance is very important. Currently we are at 56% compliance Hospital wide. On our Unit we have trained hand hygiene auditors who will be completing monthly audits. As a Unit we need to improve upon our Hand Hygiene compliance and use Hand Hygiene on our patients 100% of the time. We are concerned about Safety on our Unit. If you see someone not washing their hands, including Physicians, be proactive and talk to them about it. Tell them that on this Unit we do Hand Hygiene and that they need to clean their hands before taking care of our patients. A Handout was given that describes what hand hygiene is and what the guidelines are. We are not using Hand Hygiene for our isolation rooms especially before going into their rooms. We need to wash our hands or use gel prior to applying gloves. A dime size glob of gel should be used. If your hands are full of equipment do Hand Hygiene after putting items down and before touching the patient. Open the patient’s door before washing your hands. Katrina announced that CAUTI and CLAPSI are also important. There is a CAUTI mandatory training in Aug/Sept, 2012 for RN’s and CNA’s. You will need to register in LEARN for the class. Be sure to read the CAUTI policy prior to attending the class. Lenora will place a packet in your mailbox that includes a check list to take to your class. They will check to see if you put on your sterile gloves correctly. A checklist will also be placed in each of the Catheter kits and will need to be put in the patient’s chart after it is filled out. Remember to remove your patients Foley catheter Post-Op Day 1 or Day 2 unless they have an Epidural. If they have an Epidural, you will need a Physician order to leave the Foley in. CNA’s cannot insert or remove Foley catheters.A PICC team completed a pilot trial in CCU regarding dressing changes for all of the PICC and central line insertions. We would like to see the data. When you draw blood from a PICC line remove the blue hub and after drawing the blood, put on a new blue hub. The PICC team is a good resource to go to if you are having trouble finding a vein. They have a vein finder that you can borrow. | Nursing Staff |
| Falls | Have Nursing interventions positively affected our Falls on our Unit? | Fall data can be found in room 905 and it will show zero falls for May, 2012 and two falls for June, 2012. Check a patients BP before getting them up especially if they are on Blood pressure medication. June falls were discussed. One was an assist to the floor and the other was a bathroom issue. Round on your patient to make sure that they don’t need to potty before shift change. Falls was one of your PFD goals. We ended up at 3.42 falls per 1000 patient days so we met our goal. Be aware that your interventions are preventing Falls. You are doing something fantastic.  | Nursing Staff |
| Bar Scanning | We have greatly improved  | Make sure that you are handing off accurate and complete information regarding medications. | Nursing Staff |
| HCAHPS | We can toot our horn about HCAHPS! | On the Likelihood to Recommend question in HCAHPS, we did well. This is one of your PFD goals and we ended up in the 45 percentile so this will be an “exceed” on your evaluation. Quietness at night has improved and shows that you are focusing on this. Shift rounding should be helping patient satisfaction. Be sure to change out a low IV bag (even if it has 200ml left), PCA etc. before leaving for the end of your shift. This will increase patient satisfaction. We have good outcomes for our patient. Physicians want to send their patients to us. We always have room for improvement though. We will talk about Peer to Peer Reviews at the next Staff meeting. Lenora will put a sample Peer to Peer Review in your mailbox for you to review and make any suggestions and /or changes on.  | Nursing Staff |
| Press Ganey | A Press Ganey handout results page was passed out to the Staff.  | We did well as a system so for your PFD evaluation goal put that you did “meet”. Suggestions for improvement for Press Ganey were discussed. Lenora asked the Staff how she could do better. You can send her an e-mail in response to her question. Staff did well at recognizing their Peers skills. We were 80% favorable as a group on most of the questions. We had 30 people out of 45 complete the survey. Lenora thinks the results show that the Staff is engaged that the Staff likes working here. | Nursing Staff |