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Recommended Citation
"All Hands On Deck, v.2, 2 April 2009" (2009). *Articles - Patient Care*. 23.
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University of Connecticut Health Center
John Dempsey Hospital

All Hands On Deck!

April 2, 2009—Volume 2

Action Teams Launched

On Friday, March 27th, more than 50 Health Center Employees and Providers participated in a Leader and Facilitator information session. These individuals will be activating 29 Action Teams organized to address over 140 recommendations outlined in the Mass General Hospital (MGH) Performance Excellence report. The MGH assessment was conducted in response to the hospital being placed on probation by the Department of Public Health (DPH) last November. Leaders and Facilitators were introduced to their team assignments and were briefed on their roles. Most Action Teams are expected to commence in early April and conclude by September.

Planning meetings with Action Team Leaders and Facilitators are occurring this week and next to discuss individual team objectives, approach, and membership. It is our goal to include as many front-line staff members as possible without disrupting normal hospital operations. Information on progress of the individual teams will be forthcoming in future issues of this weekly newsletter. These teams are the vehicles we will be using to drive our organizational transformation.

If you are interested in reading the MGH report in its entirety, 30 copies of the report are on reserve in the Clinical Operations Administration office (LM050). Please stop by and sign out your copy today!

The 29 Action Teams:

1. Chemotherapy Orders
2. Dietary Services
3. ED: Rapid Emergency Solutions for Throughput
4. Environment of Care
5. Falls
6. Float Pool
7. Infection Control
8. Medical Records: Elements of a Complete Med.Record
9. Medical Staff Governance
10. Medical Staff Governance – Resident Supervision
11. Neurological Assessments
12. Nurse Staffing
13. Nursing Service Governance Structure
14. Operating Room: Surgical Counts and Surgical Attire
15. Pain Assessments
16. Patient Assessments and Plan of Care
17. Patient Safety
18. Pharmacy: IV Medication Orders and Titration Therapy
19. Pharmacy: Medication Reconciliation Implementation
20. Pharmacy: Unit-Based Pharmacy Review
21. Policies and Procedures
22. Psychiatric Services: Full Assessment
23. Quality and Governance
24. Quality Assessment and Performance Improvement
25. Restraints
26. Skin Assessments
27. Staff Orientation, Education and Competency
28. Universal Protocol Task Force
29. Vendor Management

"Shout Out" Corner

A special thank you to the Administrative Staff in JDH Clinical Operations Administration for their invaluable assistance with the Performance Excellence Initiative: Marilynn Molnar, Cheryl Sieracki, Susan Garthwait and Caroline DeFrancesco.

John Dempsey Clinical Operations Administration
Mike Summerer, MD, FACPE—Hospital Director

Highlights of "All Hands On Deck" Meetings

March 30-April 1, 2009

Patient Relations

Our inpatients provide feedback on the care they receive, and we receive that feedback in the form of reports published by Press-Ganey. Our current patient satisfaction scores are below the average, as can be seen in the table below:

Recent feedback from one patient's family included:

- Medications given and their side effects were not explained to the patient
- Discharge instructions were given to the patient, when perhaps they should have been given to the family member
- The noise level in the hospital was very high
- Floors were buffed at 10 PM
- Staff shared personal concerns

Patient satisfaction scores are a snapshot of how we operate as an organization. Remember: We are being evaluated by our patients at all times.

All staff should focus on the top three items on the Press-Ganey patient satisfaction Priority List tailored to JDH:

1. How we respond to patients' concerns and complaints is crucial. They are our customers—we must provide them with the best customer service.
2. Involve the patient in decisions regarding their treatment.
3. Keep the patients informed in all aspects of their care.

Current JDH Press-Ganey Scores

	Raw Score		Percentile Ranking		
	Overall last period	**This period**	**Nation**	**CT**	**UHC**
Inpatient	84.9%	83.1%	27%	22%	36%
Same Day Surgery	90.5%	90.6%	25%	15%	48%
			Nation	CT	ED of similar volume
ED	79.8%	83.4%	41%	25%	42%

Congratulations to the ED for their significant improvement last quarter!

Core Measures

There are four clinical areas from which we abstract "Core Measures" (elements of care) for The Joint Commission and CMS on a quarterly basis:

- AMI
- SCIP
- HEART FAILURE
- PNEUMONIA

Some elements within each area of the Core Measures are reported publicly on "Hospitalcompare.com," which allows the public to compare our hospital to other hospitals on each of the elements. Historically, we have scored low providing smoking cessation advice/counseling to smokers.

The importance of smoking assessment cannot be emphasized enough. Every patient must be assessed on admission. If they are a smoker, we must document that they received smoking cessation advice counseling.

Infection Control

All policies in the Infection Control Manual have been updated. The up-to-date manual can be found on the Nursing website: http://nursing.uchc.edu. **Please discard all paper copies of the Infection Control Manual.**

Patient Safety

An on-line Patient Safety Culture Survey is underway. All hospital staff are asked to take this 8-minute survey to help us assess our culture of safety. Go to: http://patientsafety.uchc.edu/professionals/index.html.

Environment of Care

Environment of Care rounds found trash on the floor on several areas, including discarded gloves. It is everyone's responsibility to keep the hospital clean. In response to the patient complaint about the floors being buffed at 10 PM, Facilities has rescheduled floor maintenance on inpatient units.

eHIM (Electronic Health Information Management)

The conversion to an electronic medical record is underway. Medical Records is currently working with all units to prepare to scan every record within 24 hours of patient discharge. The go-live for the eHIM project for electronic medical records is scheduled for May 11. Training begins April 20. Information can be found on http://ehims.uchc.edu.

The All Hands On Deck Newsletter is distributed electronically every Thursday at 9:00 AM.
All Managers will provide copies to their staff.