March 2011
Medical Surgical Practice Council Meeting Minutes

From the Nursing Standards Committee:
Our Nursing Policy and procedures will be undergoing some changes. The committee is currently examining our format. The plan is to retain policy statements but remove those items which are actually process guidelines. Our Mosby resource will be used to select appropriate guidelines if possible. These guidelines reflect best and current practice and can be modified to be specific to our hospital needs. These references are also updated on a regular basis.

From Nursing Research Committee:
Rn, Kao Moua, presented her CLIN III presentation, “Tracheostomy care for the ENT patient”. She was awarded her CLIN III step!
Coming CLIN III projects include: a “Video Fall prevention project”, ‘Delirium in Medical-Surgical patients”, “GOT MEDS-A Medication Distraction Prevention Project”, an “RN Floating Guidelines project.”

Med Safety Committee:
The errors which occurred this month were related to failure to observe the seven rights of medication administration.
Continue to administer the pneumovac to patients on admission. Our administration rates have dropped.
PCA’s: Do not assign these to a registry RN. Make sure a true independent double check is performed.

Relation Based Care/ Unit Council Updates:
SICU will present their RBC Guidelines in April.
3Tower council: Is working on eliminating distractions between 8-10 and 2000-2200.
NSDU council: Is currently working on a fall prevention project.
DH58 council: Is working on guidelines for RN walking rounds.
SDU council: Has set up a Recognition Board: “SDU Super Stars”, which lets staff recognize an RN, SHA, Or Monitor Tech each month.

Quest Update:
When Patients are admitted, the MRSA testing order is automatic now in quest. The specimen transmittal still needs to be requested.
Council discussed the use of WOW’s for medication administration. They need to be used in patient’s rooms for proper medication order, dose, and patient verifications. The tablets can also be used if a WOW is not accessible in the room.

Nursing Management Update
Victoria brought some patient arm band samples from Susan Christiansen for our council to look at. Different arm band colors with labels such as “Restricted Limb”, “Latex Allergy” etc, were examined. Another armband style had different color labeled indicator clips was also examined.
Samples of “Standards of Nursing Care for specialty areas” from Susan were also reviewed by our council.
Victoria also asked for council feedback on how the white boards in each patient room were being utilized. Our council agreed the board is best used for patient goals, when the next pain med is due, patient’s blood glucose result and other pertinent communication information.
From Infection Prevention

March 31st flu season ends. Mask wearing can stop however there could an extension if indicated.

There have been many requests for the curtains in patient’s rooms to be changed. Currently the curtain in patient rooms will be changed 2x per year by environmental services. It can be changed sooner only if visibly soiled.

The Contact Isolation Policy has changed to reflect patient activity outside of the room. A contact isolation patient will now not be confined to the room and can go outside of the room to a common area but not to another clinical area. There is a specific protocol to follow such as hand washing finger tips to elbows and patient must don a clean hospital gown. MD permission is still needed as well.

Patient’s with history of MRSA on admission must be placed on isolation precautions and undergo clearance protocol.

Care Plans Discussion:

Supplemental Teaching plan discussed. Infection Prevention, Medications and Pain teaching is required for all patients. If a patient is not assessed as “ready to learn” make sure to indicate on plan. Teaching can be given to family. These items may be placed on first page if revised.

MSPC Newsletter

The MSPC Newsletter, The Compass, is ready for final editing. Sherry Carter will assist with the final editing and publish this month.

As Offered:

Victoria: The Volunteer Office maintains “Clothes Closet”, “gently used donated items” in the Douglas Hospital. Call the Volunteer Office at ext 5541. Items will be delivered to you. Their hours are M-F, 08:30-1800. After hours call the House supervisor. Donations welcome, especially extra large sizes. Bring to the Volunteer Office, Bldg 53, room 106 or the gift shop.

Jacqui: Porta Cath dressing should be changed per the central line/ PICC line dressing schedule. The needle itself is changed once per week.

Haydee: Consent form signatures: An RN can sign as witness but verify with patient that it is their signature on the consent form if you were not present.

Khaled: Classes scheduled: CAUTI classes, Med-Surg Certification class, Nursing Competency classes. Schedule on-line.

Jacqui: 3 Tower is piloting the New Glucose Management Protocol.

GEMS Award:

The GEMS Ballot box is moving to 4 Tower next month.

Next Meeting is April 21, 2011