

PNC Meeting Minutes, April 7, 2015

Present: 4-West, Pediatrics, Emergency Center, Selective Care, Endoscopy/AAC, Family Birth, WHC, Observation, OR, Pre/Post, 5 East/Oncology, Case Management, Administrative Charge, Mental Health

Absent: 3-East, CVL, ICU, Radiology

- I. Nicolle called the meeting to order at 0900.
- II. Guest Speaker: Michelle Shackett, Transfusion Safety Officer. Initiative by McLaren Corporate to conserve and coordinate blood transfusion (SHG) strategic healthcare group - conservation & preservation of blood. Year 2 of 3rd year contract with this company. Physician kick-off in March. Data still being gathered so the SHG can tell us where we can improve. Nursing education: 1) Transfusion Safety for the 21st Century; 2) Transfusion Reporting; 3) Nursing at the heart of transfusion safety. Mandatory for all nurses in our facility. Nursing Educators will be coming to teach staff. Nationally, it is felt not enough reporting on transfusion reactions. Transfusions are now being looked at as a “transplant”.

Michelle will be gathering monthly statistics regarding basic average of times when transfusions are done. Basic # of units being given and amount is being wasted. New - Assessment of pt after each unit of blood before another unit is given. Will have to wait 10 minutes before blood draw, and obtain another order from doctor before 2nd unit can be given if indicated.

Michelle does not have an office or phone ext. yet. Leave a message for her via the lab, or by her email mshackett@porthuronhospital.org

FYI Healthstream Education - nursing contact hour education, is available to anyone who wants extra education related to any nursing topic such as blood transfusions. Call Kristi White if you can't find what you need.

- III. Minutes - Reviewed by members. Judy Charron motioned to accept the minutes as they stand. Barb Sawyer seconded the motion. Minutes approved.
- IV. Colored Wristbands - Georgia Greiner, ICU, presented info on this process last month. The Michigan Hospital Association has suggested consistent colors used throughout the state. Discussed with Jen Montgomery at Agenda Planning meeting. This concept has been submitted to Janet Bigelow. Janet says to submit data to Risk Plus to support a need for change of current wristband colors. We are to encourage everyone to put in any incidents that occur regarding discrepancies of a patient's stated allergies and allergies listed in EMR into Risk Plus. Ex. Patient had no recognizable means of allergy alert, except in the EMR. A colored band could be a quick identifier. Any DNR discrepancies noted should also be put into Risk Plus.

- V. Sharps - Teresa viewed laundry sorting and reported that the laundry sorters empty all laundry bags into one cart, and do not seem to note which bag a sharp came from. Council members discussed stopping the ribbon tying and focusing on the units with the colored linen bags. A suggestion was made to discuss with Don Redman, the next 2-4 units that are at risk, and obtain new colored bags for those units if approved. Sharps Committee members, Kara and Brianne will meet with Don Redman to discuss.

It was noted that a few sharps were found in royal blue bags, and an in few in untagged bags this past month. Shannon suggested that maybe some education for laundry workers should be done? What other color of laundry bags are available?

Donna LaFean suggests we recognize each unit in a positive way that has no, or the least number, of sharps found in the linen. Develop a positive way to recognize and encourage units who practice sharps safety?

- VI. Nurses' Week - May 6-12th - Christie Sansom is the Coordinator. Nicole attended their planning meeting. The theme is Sports. What can the PNC do to participate? Members are to email Nicolle their ideas such as candy, etc.

- VII. Deb Stockwell has made a request for May 27 – PNC volunteers needed to give brief presentation to new employees regarding PNC.

- VIII. Clinical Panels - Vanessa Riddle, Selective, presented. They use 5 panels. The clinical panel has history; ACS; Infection, wounds, medications. Donna LaFean asked: "Would we like to put all of our clinical panels/boards together?" She suggested a panel called "Nursing Report". Donna suggests having one that is universal throughout the hospital. Judy stated that the SBAR should be filled out so that info can be seen quickly for the preop checklist. This may be better for OR who needs to know ahead of time before they come to pick up the patient.

Open Status Board or Big Board

On right is Patient Reports, then check boxes next to pt names.

Click left box next to pt. name and go and at bottom click Report
Search screen for reports appears.

Drop down arrow, click and all available reports appear

Click Nurse Cardex - you can print it or click preview. Tons of info on patient available: all VS, medication. Print prior to scheduled downtime.

Question regarding unplanned downtime. How can we have access to our patient's EMR in case of power outage or emergency? Donna said a special computer will save all this information in case of catastrophic situation. Pre-op checklist is great, but only if filled out. Judy, Outpatient Services, informed the group that their access to patient info is very limited, but they do have access to clinical panels from ORM. Editing necessary? Surgical Services will help provide the information. Julie Kegler suggested PAT can put their initial

information into the same panel for consistent data collection.

Donna, ext. 3780, suggests that we set a date and a decision by the end of next week, regarding a hand-off communication tool in Meditech. By next meeting, Donna hopes to have the Edits done, and once they are approved by PNC, then obtain approval from Jean and Belinda, and go live. Time frame is approximately 6-8 weeks.

IX. Nicolle directed council members to review PNC By-Laws.

Change name to McLaren Port Huron Hospital Professional Nursing Council. UPC's are supposed to submit their own Unit By-Laws. PNC Rep acts as liaison to Unit and back to PNC. Jen would like a synopsis form from UPC meetings as an easier communication tool, instead of entire minutes. Suggestions for changes made to # V, sentence 4. Updated bylaws will be reviewed and voted on by the PNC at the next meeting.

X. Round Table

Meredith, asked if ED Visit Summary, a clinical panel that the doctors are using, specific to ED, is working for Selective Care? What other units?

FYI re: VIP acronym - it means patient have a legal guardian.

Peds is going to trial having "quiet time". Barb will update how it goes.

Fire drills have been done in the night a lot recently to meet annual requirements and because surgical gases and water transfers have occurred during construction.

Shannon reports that the room temperature in the Breastpumping Room in the basement is too hot. Called HR, Maintenance. Any alternate pumping place? Deb will put work order in again.

XI. Meeting adjourned at 10:35. Group PNC picture to be taken in lobby.

Respectfully submitted,
Deb Roberts, BSN, RN, IBCLC
PNC Vice Chair

