

Alaska Native Medical Center Patient Safety Quarterly



Earn CE credit for reading the Patient Safety Quarterly and completing a survey!

In support of improving patient care, ANMC is jointly accredited by the Accreditation Council for Continuing Medical Education, the Accreditation Council for Pharmacy Education, and the American Nurses Credentialing Center, to provide continuing education for the health care team. Pharmacy CPE credit will be posted to the online CPE Monitor system within 60 days following completion of each activity when applicable.

Contact hours:

ANMC designates this activity for a maximum of 2 contact hours, commensurate with participation provided in 0.5 contact hours upon completion of quarterly survey/evaluation tool. Enduring access for credit is available during the month of publication, example: The July 2022 Patient Safety Quarterly will provide access for CE credit until July 31, 2022. This CE opportunity is a communication skills event and not applicable to commercial bias. No mitigation or disclosure is needed.

Requirements for successful completion:

To receive CE credit, please make sure you have read the Patient Safety Quarterly and completed the electronic survey/evaluation tool before the last day of the month published. Scan the QR code to access the survey. For more information, contact jlfielder@anmc.org or (907) 729-1387.



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Complete this survey for a chance to win a coffee card!



Share your thoughts about the ANMC PSO by scanning the QR code and completing the survey, and you will be entered into a coffee card drawing. Twenty winners will be selected each quarter. The drawing will occur in early August.

Updated Legal Guardian for Incapacitated Adult Notation Procedure

The Legal Guardian for Incapacitated Adult Notation Procedure #101-14D was recently updated. Read the procedure here: bit.ly/GuardianProcedure (must be on ANTHC network to access)



Highlights:

- Legal Guardian for Incapacitated Adult Notation Procedure #101-14D updated
- Improvements in EHR m-pages, to include last verification date, to assist staff with quick access to guardian information

Purpose: When an incapacitated adult patient has a court-appointed legal guardian with medical decision-making power, all staff must communicate with the legal guardian in accordance with ANMC’s policies and procedures regarding patient rights and informed consent.

Scope: Applicable to the ANMC accredited campus defined as its staff, residents, non-physician interns, students, volunteers, and contractors.

All staff who determine that a patient needs a Guardian Alert activated in EHR will:

- Notify Admitting of the legal guardian’s name and contact information; and
- Request a copy of the guardianship court order.

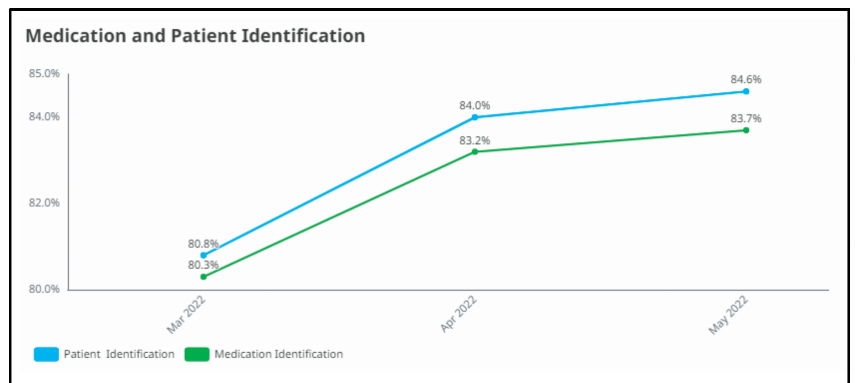
Upon notification from staff, Admitting will enter the guardian’s name and contact information into the “Legal Guardian” field in the demographic information in the EHR; and activate the "Guardian Alert".

Guardianship court orders will be scanned to the legal documents folder in the patient’s medical record by Registration and/or Health Information Management staff.

For questions about scope and validity of guardianship documents, email GuardianCheck@anthc.org.

Patient and medication scans

ANMC's goal is to be above 90% of patient scans and 90% of medication scans. As of May, we are at 84.6% patient scans and 83.7% medication scans. The patient and medication must be scanned prior to administration. This process is just one way that we can keep our patients safe.



Please review the [Medication Administration Procedure #500-19E](#) (bit.ly/3Auq1QZ) for more detail on the medication administration process (must be on ANTHC network to access).

Measure	Mar 2022	Apr 2022	May 2022
Administration Events ⓘ	101.7K	97.9K	96.9K
Medication Identification ⓘ	80.3%	83.2%	83.7%
Patient Identification ⓘ	80.8%	84.0%	84.6%

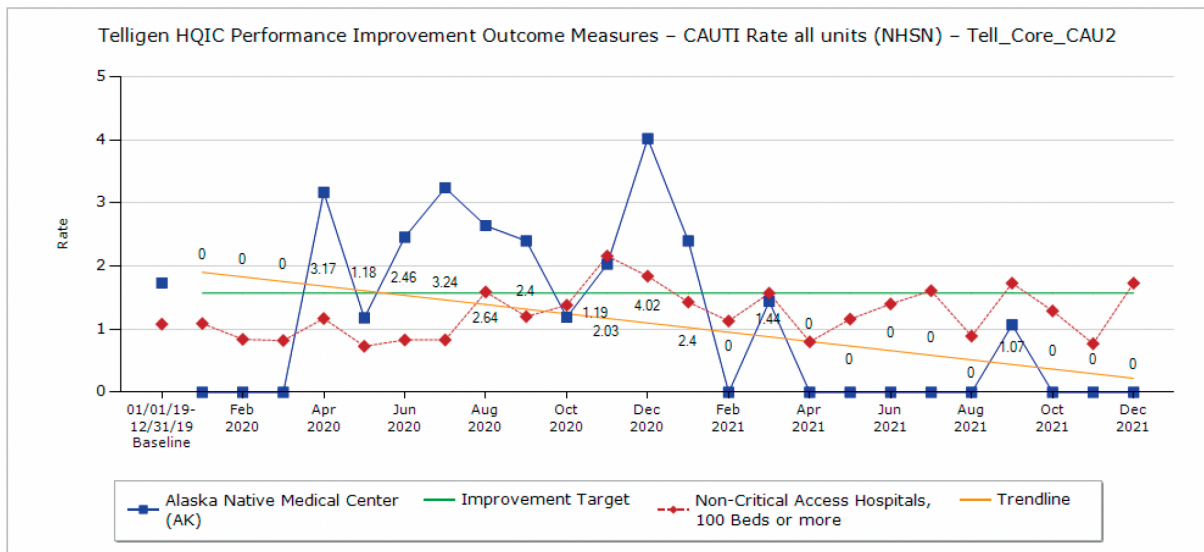
Catheter-Associated UTI (CAUTI) Prevention Workgroup

In June 2020, Infection Prevention and Nursing partnered to revitalize the Catheter-Associated Urinary Tract Infection (CAUTI) Prevention Workgroup, which was suspended in early 2020 due to the pandemic. At that time, our CAUTI rates were significantly higher than they had been in previous years. The team identified a trend in over diagnosis of asymptomatic bacteriuria due to our urine culturing practices.

The CAUTI Workgroup partnered with Dr. Gray, Dr. Schneider, and the Antimicrobial Stewardship Committee to develop an evidence-based UTI testing guideline in August 2020. In early 2021, Dr. Schneider provided in-person education to nursing staff on multiple units during shift huddle on the topic of appropriate UTI testing and the new guideline. Simultaneously, the infection preventionists continued to send out daily lists of patients with indwelling urinary catheters for auditing purposes, highlighting those in place for greater than two days, and the workgroup closely monitored audit results looking for trends and opportunities to reduce the risk for CAUTIs.

The Informatics team worked with the CAUTI Workgroup to modify Cerner to help flag patients with indwelling urinary catheters in place for greater than three days, so that providers can be notified in a timely manner for a request to remove. All of these interventions have proved to make a positive impact on our CAUTI rate to well below 2 infections per 1,000 catheter days at ANMC.

We are so proud of all the hard work performed by our partners at the bedside (CNAs, RNs, providers) who have committed to keeping our ANMC patients safe from CAUTI.



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COMING SOON...

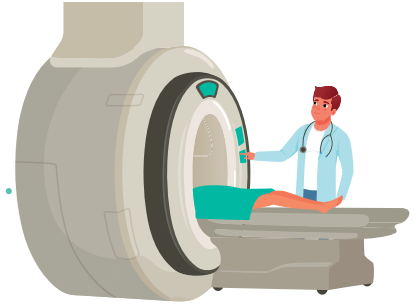


- Look for the new ANMC Pressure Injury Prevention, Management and Treatment Procedure coming in July!

MRI Safety and Screening Policy updates

Effective June 21, screening for entrance into MRI rooms is now a live screening process. Signage with the screening questions is posted on all access doors. MRI staff will answer any questions and determine clearance.

Read the updated MRI Safety and Screening Policy: bit.ly/MRIscreening (must be on ANTHC network to access)



RLDatix for patient safety

We appreciate everyone taking the time to report incidents and concerns into RLDatix. This process allows us to assess and respond to patient safety events, evaluate processes and know what is affecting staff.

Entering events online into RLDatix is the best way to assure all relevant information is collected. The RLDatix online platform prompts you to answer important questions like patient MRN and location that often get forgotten on the hotline.

In the event that you do need to utilize the Safety Hotline (907) 729-2329, please remember to clearly state the following:

- Patient(s) MRN so staff can follow up on processes at a later time. Without this piece, many issues cannot be verified or reviewed.
- Name of staff involved or affected and their department.
- Clearly state concern.
- If the concern includes medical equipment, please include the biomed tag number or supply packaging information. Please save and sequester any equipment involved.

Remember that patient safety events are reviewed and treated with confidentiality.

If you wish to remain anonymous, please do so but ensure all relevant information is available.

How to Report Patient Safety Events

RLDatix Online

Available from the ANTHC home page under popular links – “Incident/Accident Reporting”
<https://srm.rldatix.com/landing/ANMC>

Should be used to report any patient safety event. Most events will be reported here.

Reporting Hotline

Call (907) 729-2329

Please make sure to include patient MRN, full name, location and all relevant details.

Should be used when reporting online is not possible.

Direct to Risk Management

- Any sentinel event
- Any serious patient harm event
- Any allegations of patient abuse or assault

Please report in RLDatix as well as notify the risk manager on call via TT or email or through AOC.

Do you have a story or something to share in the Patient Safety Quarterly?

Contact the Patient Safety Committee at: patientsafetycommittee@anthc.org