## **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 guarterly survey/evaluation tool. Enduring access for credit is available during the month of publication, example: The October 2022 Patient Safety Quarterly will provide access for CE credit until Oct. 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 ilfielder@anthc.org or (907) 729-1387. https://arco.de/bdOcba



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



Share your thoughts about the ANMC PSQ by scanning the QR code and completing the survey, and you will be entered into a coffee card drawing. Twenty winners will be selected

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### Flu Season - When is it best to get vaccinated?

Per the CDC, the best time to get the flu vaccine is September and October, since influenza activity increases in October. Their recommendation is to be vaccinated by the end of October at the latest. Influenza usually peaks between December-February, and can even still be active in the month of May.

#### Health care workers and flu

For those that work in a field like health care, where direct contact with patients is a daily occurrence, you may be at higher risk of exposure to the flu. Make sure you take precautions to reduce your risk of exposure.

Some tips to prevent flu transmission in the workplace:

- Flu vaccination
- Hand hygiene
- Stay home if you are sick
- Follow infection control practices at work
- Use PPE like gloves, gowns, surgical masks and make sure you are correctly donning and doffing

Flu vaccine deadline is 12/1. Flu vaccine exception deadline is 11/15. Once an initial exception is approved, no further requests for exception are needed. If you have any questions, please contact Kristine Pinckney, Director of Infection Control, at knpinckney@anthc.org or (907) 729-2921.

#### **Rapid Response Team**

The Rapid Response Team (RRT) has been in place for many years at ANMC. The purpose of a RRT is to reduce Code Blue/Code White events on the floor, and assist when staff have concerns their patients are decompensating. A RRT can be called by anyone – from a staff member who has a gut feeling or even family who have concerns their family member is not doing well.

At ANMC we have two teams -- a Pediatric Rapid response team (PRRT) and an Adult Rapid response team (ARRT). All new employees are taught how to call the RRT to their area by calling x1111, and asking for either a pediatric or an adult rapid response and giving the location. This triggers an overhead page to the team.

The goal is to help stabilize a patient situation before it escalates. When the RRT is called, a respiratory therapist, a critical care nurse, and the house supervisor arrive. In pediatrics, a pediatric provider will respond.

For areas outside of acute care areas, the Emergency Department (ED) will send a nurse for all RRTs called. These areas include the first floor and clinics in the hospital.

During a RRT call, it is crucial for the primary nurse or person calling the RRT be present to give information and history for the patient. If a RRT is called for a visitor, they will be taken to the ED for evaluation and treatment.







#### G.R.E.A.T. - Our service standard

<u>Greet</u>: Introduce yourself in a welcoming, reassuring way. <u>Relate</u>: Actively listen for needs and respond in an authentic, empathetic manner. <u>Explain</u>: Clarify your role and the situation/plans as clearly as possible. <u>Ask</u>: Inquire with open-ended questions to gauge understanding. <u>Thank</u>: Show gratitude for the interaction and wish them well.

#### **Manufacturer's Instructions for Use**

Staff should be familiar with the Manufacturer's Instructions for Use (IFU) requirement. Joint Commission and CMS require all staff who use equipment and reusable patient care items to know how to use and clean those devices.

ANMC now has the Manufacturer's IFU oneSource searchable database available for staff to use to find medical equipment and device IFUs. The database houses the IFUs and provides medical equipment and device information that comes directly from the manufacturer so staff know how to maintain, clean, and use the medical equipment or device.

There are several locations to access the oneSource database, including:

- On the Hub (anthcstaff.org) under "Popular Links"
- Home.anthc.org
- Nursing SharePoint page
- Facilities SharePoint page

The database should be an easy and quick way to access IFUs. Your manager or department designee will have more information for you on searching for medical equipment and devices most used in your department. There are also training options available if you would like to get additional information on navigating the oneSource database.

Training options for navigating oneSource:

- Recorded videos
- Additional live training through oneSource
- Manager/Department designee
- Quality Department: Angela Engle at akengle@anthc.org

For more information on oneSource, please contact: Angela Engle at akengle@anthc.org, or Kristine Pinckney at knpinckney@anthc.org

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October Observances

ational Physical Therapy Montl International Healthcare Security and Safety Week International Infection Control Week National Case Management Week National Healthcare

Quality Week



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#### What is Just Culture?

"Just Culture" refers to a system of shared accountability where organizations are accountable for the systems they have designed, and for responding to the behaviors of their employees in a fair and just manner. Learn more: https://bit.ly/3SkJmtL

Ultimately, the Just Culture model is about creating an open, fair and just culture, creating a learning culture, designing safe systems, and managing behavioral choices. The model sees events not as things to be fixed, but as opportunities to improve understanding of both system risk and behavioral risk. It is also about changing staff expectations and behaviors to ones such as looking for the risks in the environment; reporting errors and hazards; helping to design safe systems; and making safe choices, including following procedures; making choices that align with organizational values; and never signing for something that was not done. Learn more: https://bit.ly/3SIYCAq

#### What is the goal of a Just Culture?

The Just Culture concept establishes an organization-wide mindset that positively impacts the work environment and work outcomes in several ways. The concept promotes a process where mistakes or errors do not result in automatic punishment, but rather a process to uncover the source of the error. We would utilize the information to improve processes and reduce error. Learn more: https://bit.ly/3LYi7D5

#### What are the three elements of Just Culture?

Establishing a Just Culture within an organization requires action on three fronts: building awareness, implementing policies that support Just Culture, and building Just Culture principles into the practices and processes of daily work. Learn more: https://bit.ly/3ryFry5

"Approaches that focus on punishing individuals instead of changing systems provide strong incentives for people to report only those errors they cannot hide. Thus, a punitive approach shuts off the information that is needed to identify faulty systems and create safer ones. In a punitive system, no one learns from their mistakes." (Leape, 2000). "As an alternative to a punitive system, application of the Just Culture model, which has been widely used in the aviation industry, seeks to create an environment that encourages individuals to report mistakes so that the precursors to errors can be better understood in order to fix the system issues." Learn more: https://bit.ly/3SIYCAq

#### **Upcoming Trainings**

<u>Safe Patient Handling and Mobility</u> (SPHM) HealthStream training will be coming soon for patient care and other relevant staff. This brief 15minute training will help explain what SPHM is and why it's important for preventing caregiver injuries and improving patient outcomes; describe the patient handling equipment available at ANMC; and give details on what we're doing to become a nomanual lift hospital.

ANMC has a new <u>Oxygen Challenge Test</u> procedure coming and nursing, respiratory, and therapy staff will be offered training on how to complete the oxygen challenge test for their patients. It can take up to 48 hours to order oxygen concentrators, tanks, and equipment from a local vendor for discharging patients; there are criteria and details that need to be addressed before oxygen is dispensed, which includes the required oxygen challenge test. Watch for the education offerings that will be advertised on the ANTHC Hub and via email.

**Do you have a story or something to share in the Patient Safety Quarterly?** Contact the Patient Safety Committee at: patientsafetycommittee@anthc.org