Alaska Native Medical Center Patient Safety Quarterly



RLDatix Incident and Accident Reporting Tips and tricks · Did you know?

There are many safety issues on campus that need to be reported for awareness and resolution. Our culture of safety is dependent on staff reporting to ensure events can be reviewed and addressed. Our primary way to report patient and staff safety events is in RLDatix. The links can be found on The Hub (anthcstaff.org) and ANMC homepage.

What is the link for reporting?

https://grco.de/RLDatix

Who can report in RLDatix?

EVERYONE! Reporting safety events is everyone's responsibility.

What should be reported in RLDatix?

Any incident where we believe patient or employee harm may have occurred. Some examples include:

- Falls
- Medication errors
- Failure to rescue or transfer to higher level of care
- · Unexpected Code Blue or death
- Complications from procedures/treatment
- · Pressure injuries
- Communication failures
- · Death within 24 hours of restraint
- Near miss or good catch events
- Workplace violence events (including verbal aggression)
- Employee injuries or exposures

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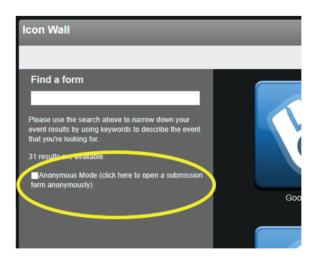
Earn CE credit for reading PSQ and taking a survey!

Coffee card drawing for taking PSQ survey!

Can I report anonymously?

Yes. To report anonymously, log into the system as usual. On the icon wall page, under the "Find a form" search bar is a check box to indicate that you would like the report to be filed anonymously.

We encourage you to include your name on your report so leadership can follow up with you directly on your concern. Providing your information also ensures we can contact you if we need more information on the event. As a reminder, ANMC supports a Just Culture and has a no retaliation policy.



Is there a hotline to report patient and employee safety events?

No. For a variety of reasons when we launched our new reporting system in November 2023, we discontinued the hotline. Completing events in the new system is easier, and reporting online ensures that all of the appropriate information for follow up is included in the report. Reporting online also ensures that all events are captured in real time for leadership review.

Read more about RLDatix reporting on the Hub: anthcstaff.org/rldatix-incident-and-accident-reporting/

Infection Prevention Update

Personal protective equipment (PPE) training

The Nutrition team invited the Infection Prevention nurses to provide in-person donning and doffing PPE training. We reviewed the CDC's recommended guidance for putting on and taking off PPE safely, with good hand hygiene before and after PPE is removed. We added some fun by applying ketchup to gloved hands, to see if any remaining ketchup was found after removing PPE (you can see in the image). The team stated that this was a great learning opportunity. If your team or department would like to schedule PPE training, please contact Infection Prevention at kney@anthc.org.



Hand sanitizer

The Purell hand sanitizer product is being replaced with a new Medline product. Some advantages to this change include:

- Both foam and gel options, with less irritation to hands
- Standardized wall mounted dispensers for various departments in key locations, such as near the door
- Quieter dispensers with longer battery life
- · Dispensers can be locked
- Pump bottle option, "Spectrum", ready to order from Central Supply now
- Reduced cost

Four staff from Medline will be here for approximately two weeks installing the new hand sanitizer dispensers campus wide. Some hand sanitizer stands will also be available at building entry points and other locations.

Wall-mounted sharps containers

New, larger 3-gallon wall-mounted dispensers are being installed. It was recognized that the transfer devices used to collect blood specimens would not fit into the opening of the wall-mounted sharps. To improve staff safety and to encourage the use of the transfer devices, larger wall-mounted sharps containers are being installed. The Infection Prevention team is working closely with Medline, Facilities, and the Arcadis Construction team, to install the new dispensers with the 4th and 5th floor remodel project.

Surface Selection Reference Guide

The bed selection guide offers recommendations to bedside staff and providers in choosing the appropriate surface for patients. It is categorized by risk level and patient condition and includes highlights for each surface type. One of the most common guidance requests received by wound care nurses is when to choose what bed. Some surfaces are used improperly, and this graphic below aims to address all of that.

The support surface categories in the chart are all available (either onsite or as rentals) at ANMC: Standard hospital mattress, air and foam pads (i.e.; EHOB, egg crate), low air loss (i.e.; P500, Centrella MAX), and air fluidized (i.e.; Envella "sandbed"). There is also guidance on whether an order is needed, reposition frequencies, and picture examples of each specialty surface. This was also reviewed and approved by Hillrom/Baxter rep, as the manufacturer of the listed beds.

Surface Selection Quick Reference Guide

Low Risk = Standard hospital bed	Mild Risk = Mattress overlay	Moderate-High Risk = Low air loss bed	High-Severe Risk = Air-fluidized bed
Non-air/Standard hospital bed	Air (EHOB) pad or foam "egg crate" pad	i.e.; Versacare P500, Centrella	Envella "Sandbed"
Braden 19-23 Ambulatory patient with low risk of skin breakdown No order needed Reposition on a schedule (i.e., Q2Hours) April 2024 ANTHC Marketing & Communications ANMC Pressure Injury Working Group P500, Centrella, and Ervella photos courtesy of Hillrom	 Braden 15-18 without pressure injuries On ED gurney >4 hours Do NOT use over low air loss or air fluidized surfaces Nurse initiated or provider ordered, Available from CSS Reposition on a schedule (i.e., Q2Hours) 	Braden 12-14 OR Braden <18 with 1 or more Stage I/II OR Presence of Stage III/IV, DTI, unstageable pressure injury, regardless of Braden score Many med-surg beds already in this category, provider order if wanting to ensure surface Reposition on a schedule (ie; Q2Hours)	Braden 9-11 or full thickness PI or post flap for PI AND Severely limited mobility OR 1 mo in lesser surface with lack of improvement/worsening of wounds Warm air through small beads, fluid-like surface, floating sensation Provider ordered, rented Not for unstable spines, pulmonary disease, or ambulatory patients Costly rental beds Rounding still needed, but scheduled repositioning not necessary
1 550, CO. III Call, and an ena priocos courtesy of fillion			

Improving Patient Access to Care Teams in the Specialty Clinics

The Specialty Clinics adopted a standardized phone tree structure to reduce variability and improve the patient experience. Benefits are:

- Simplified phone menu options
- · Reduced call wait times
- Helps patients reach the appropriate clinic and specialty provider
- Updated Specialty Clinic phone numbers

Earn CE credit for reading the Patient Safety	y
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.

Specialty Clinic	Phone Number
Allergy and Immunology	907-729-1956
Cardiology	907-729-4700
CRC Clinic	907-729-4444
Dermatology	907-729-1933
Diabetes	907-729-2505
Endocrinology	907-729-1942
ENT	907-729-1400
Gastroenterology	907-729-2503
General Internal Medicine	907-729-1934
Hepatology and Liver	907-729-1560
HIV/EIS	907-729-2907
Infectious Disease	907-729-2502
Nephrology	907-729-1935
Neurology	907-729-1914
Neurosurgery	907-729-2525
Oncology & Hematology	907-729-1180
Orthopedics	907-729-1600
Ophthalmology	907-729-1450
Pain Management	907-729-2525
Podiatry	907-729-4030
Pulmonology & Sleep Medicine	907-729-8141
Rheumatology	907-729-1949
General Surgery Clinic	907-729-2700
Urology Clinic	907-729-8493

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 2024 Patient Safety Quarterly will provide access for CE credit until August 31, 2024. 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 by August 31. Scan the QR code to access the survey. For more information, contact jlfielder@anthc.org or 907-229-1185.



grco.de/bdrV5i



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 each quarter. The drawing will occur in early September.

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