



New Mexico  
Hospital Association



# Patient Safety Newsletter

Sin Daño – Without Harm

September 2009

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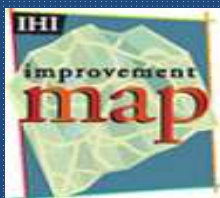
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NMHA and NMMRA are the co-nodes for the Institute for Healthcare Improvement (IHI) in New Mexico



***“Our role as leaders is not to catch people doing things wrong, but to create an environment in which people can become heroes.”***

*Newt Hardie, VP-Quality, Milken (major textile manufacturer)*

## HealthSouth Sees “Stars” With Hand Washing Compliance

**--An interview with Sandra LaPointe, Infection Control Practitioner, HealthSouth Rehabilitation Hospital of Albuquerque.**

On a busy day at HealthSouth, Sandra takes the time to showcase her success with hand washing compliance. Prior to joining the statewide MRSA Collaborative in 2008, the hospital’s compliance was 60-70%. One of her initiatives with the Collaborative was to improve compliance with hand washing. Her goal: 100%.

### ***What did they do to make it happen?***

One of the first things she did was ban the use of artificial nails for ANY direct patient care provider. She then created laminated STARS that were placed above sinks used for hand washing. The stars have instructions for hand washing as well as Centers for Disease Control and Prevention (CDC)

Guidelines and Facts (12 different factoids) printed on them for everyone to read. Each factoid takes about 20 seconds to read – the amount of time recommended for proper hand washing. So not only do caregivers demonstrate proper hand washing, they also get educated at the same time.

### ***Results?***

Hand washing compliance has increased to 86% as of last month. She has different “mystery shoppers” watch 5-10 people every shift to measure compliance – even Sylvia Kelly, the CEO, takes her turn observing hand washing. They have not yet reached their goal, but are excited about the increase.

### ***What kind of support is needed for this initiative?***

Sandra believes that buy-in from the staff – whether it’s direct care providers, Plant Ops, Environmental Services or Central Supply – is imperative to success. She does a lot of “hands-on” edu-

cation, particularly during new hire orientation and the Annual Safety Fair. She has clarified departmental accountability for who cleans what (e.g. Pharmacy is now responsible for washing the medication dispensers), and often uses “Glo-Germ to augment staff awareness of importance of proper hand hygiene. HealthSouth has also instituted mandatory Infection Prevention meetings every 6 months. She also credits the hospital leadership for supporting the costs of the preventive measures and the ongoing mandatory education.

*To view a sample of one of HealthSouth’s “STARS,” see page 4*



## Fashion vs. Safety in Health Care – Hospital Scrubs

Last month we reported on foot fashion that can expose feet to injury from dropping contaminated needles or sharps and exposure to chemicals or infectious waste.

Recently, the Committee to Reduce Infection Deaths (RID) called on all hospitals in the U.S. to provide clean uniforms for their personnel and bar medical workers from wearing uniforms out-

side hospital buildings. And we’ve all seen it – at the store, in the restaurant, and at the gym. “What you can’t see on these garments are the bacteria that could kill you,” said Betsy McCaughey, PhD, chairman of RID. RID makes the following points:

1. Just because uniforms look clean doesn’t mean they are clean.
2. Dirty uniforms endanger patients but research

shows that clean uniforms can reduce the spread of infection.

3. Many U.S. hospitals ignore the dangers of contaminated uniforms, but in the United Kingdom, health officials are a step ahead.
4. The danger to the public is increasing.

*Continued on p. 4*

## Consumer Activist Group Lists Ten Patient Safety Reforms

In a new report titled “Back to Basics,” the consumer activist group Public Citizen has devised a list of ten patient safety reforms that, if done correctly, could save the lives of 85,000 patients, as well as \$35 billion annually, reports HealthLeaders Media. Most of the reforms listed reiterate basic actions that caregivers are already aware of, as well as process and system changes that individual hospitals can make. Many are also conditions for which Medicare will no longer reimburse hospitals.

Public Citizen proposes that healthcare providers:

1. Use a checklist to reduce avoidable deaths and injuries resulting from surgical procedures (this would save \$20 billion a year).
2. Use best practices to prevent ventilator-associated pneumonia (this would save 32,000 lives and \$900 million a year).
3. Use best practices to prevent pressure ulcers (this would save 14,071 lives and \$5.5 billion a year).
4. Implement safeguards and quality control measures to reduce medication errors (this would save 4,620 lives and \$2.3 billion a year).
5. Use best practices to prevent patient falls (this would save \$1.5 billion a year)
6. Use a checklist to prevent catheter infections (this would save 15,680 lives and \$1.3 billion a year).
7. Modestly improve nurse staffing ratios (this would save 5,000 lives and \$242 million a year).
8. Permit standing orders to increase flu and pneumococcal vaccinations in the elderly (this would save 9,250 lives and \$545 million a year).
9. Use beta-blockers after heart attacks (this would save 3,600 lives and \$900,000 a year)
10. Increase use of advanced care planning (this would save \$3.2 billion a year).

[http://www.healthleadersmedia.com/content/237151/topic/WS\\_HLM2\\_QUA/10-Basic-Patient-Safety-Reforms-to-Save-85000-Lives-35-Billion.html](http://www.healthleadersmedia.com/content/237151/topic/WS_HLM2_QUA/10-Basic-Patient-Safety-Reforms-to-Save-85000-Lives-35-Billion.html)

## Staff Meetings BROWN BAG TOPICS

*Are you responsible for an annual Patient Safety Fair? Here are some fun ideas for education from around the country:*

One hospital hosts a **Bash** centered on patient safety for all staff. Fun, interactive booths provide an opportunity to reinforce safety concepts in an inviting way. An example of a booth is the Mummy Wrap. This booth is centered on pressure ulcer prevention and includes a race between staff members to “unwrap” dolls wrapped in gauze and then answer pressure ulcer related questions. For those that are not as well versed in pressure ulcer prevention, a storyboard is also part of the booth and contains all the information needed to participate. Other booths at the Bash include a “room of horrors” where staff members point out the patient safety issues and a “patient safety fortune teller” where staff members receive insight into how they might use the hospital’s policies and procedures to help with a patient safety issue.

Another hospital had a themed safety fair called “**Compliance Casino-Where Patient Safety is a Sure Bet.**” The fair was used to test the patient safety and Joint Commission knowledge of other hospital staff members. Prior to the fair, the organizer had employees complete an online education session about the facility’s patient safety practices. The fair was used as a way to measure how much knowledge staff members had actually retained. Employees were invited to the Compliance Casino to “bet” on their knowledge regarding patient safety. Each employee was given five poker chips and they were invited to play casino-type games including black jack, roulette, billiards, and craps in order to win more chips to redeem for small prizes. The trick was that they had to answer questions about patient safety in order to play each game. If an employee answered wrong, he or she lost a chip, weren’t allowed to play the game, and were educated on the correct answer. This imaginative and fun event engaged many staff members in thinking about how to integrate patient safety into their daily jobs.

## APIC Urges Health Care Facilities to Require Staff Vaccination

The Association for Professionals in Infection Control and Epidemiology (APIC) urged healthcare organizations to mandate that staff members in direct contact with patients be vaccinated during the upcoming flu season. The group made its recommendation in late August as predictions continued to surface about the number of Americans who may be infected with the H1N1 virus during the upcoming flu season. Last week a presidential panel estimated that up to half of the U.S. population could become infected, and 1.8 million people could be hospitalized, resulting in up to 90,000 deaths. APIC issued a similar recommendation during the 2008-2009 flu season.

[http://www.healthleadersmedia.com/content/238406/topic/WS\\_HLM2\\_QUA/Healthcare-Facilities-Should-Require-Staff-Vaccinations-to-Prepare-for-H1N1.html](http://www.healthleadersmedia.com/content/238406/topic/WS_HLM2_QUA/Healthcare-Facilities-Should-Require-Staff-Vaccinations-to-Prepare-for-H1N1.html)

“Perpetual optimism is a force multiplier.”

--**Colin Powell**,  
former U.S. Secretary of State



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Please contact us if you'd like to write an article for this newsletter that highlights Patient Safety efforts in your organization.

For a list of Patient Safety Best Practices previously highlighted in our Newsletter, please go to:

[http://www.nmhhsa.org/FileRequest?req=Compendium\\_of\\_NM\\_Patient\\_Safety\\_Best\\_Practice.pdf](http://www.nmhhsa.org/FileRequest?req=Compendium_of_NM_Patient_Safety_Best_Practice.pdf)

OUR NEW WEBSITE  
ADDRESS:

<http://www.nmhanet.org>

Peruse our new website!

### About Our Organization...

NMHA is the non-profit trade organization representing 42 non-federal hospitals in the state.

*Our mission is to work with others to improve the health status of the citizens of New Mexico.*



## New Mexico Hospital Association

### TOOLS YOU CAN USE THE RADAR SCREEN FREE RESOURCES



#### **CDC issues H1N1 flu vaccine planning guides**

The Centers for Disease Control and Prevention has released several documents to help health care providers and others plan H1N1 flu vaccination campaigns. The resources include a planning checklist, answers to common questions about vaccine planning and distribution, and vaccination guidelines for pregnant women.

[http://www.cdc.gov/H1N1flu/vaccination/statelocal/planning\\_checklist.htm](http://www.cdc.gov/H1N1flu/vaccination/statelocal/planning_checklist.htm)

#### **New Website Informs Patients of Their Vital Role in Creating a Safer Health Care System**

This site, called "The Empowered Patient" represents a compilation of information, insight, media articles and links to the latest safety news for medical patients.

<http://www.theempoweredpatient.com/>

#### **SADPERSON Simple Screen for Psychiatric Screening**

SADPERSONS is a 10-item scale that screens for suicide risk. An individual is given one point for each item for which he or she screens positive. These data and conclusions should be considered to be preliminary as they have not yet been reviewed and published in a peer-reviewed publication.

<http://commitmenttoliving.com/2007/08/27/thoughts-about-sad-persons-screen/>

#### **Celebrate Facility Safety With Housekeeping Staff**

You can acknowledge the contributions of your environmental services and housekeeping staff by celebrating National Healthcare Environment Services and Housekeeping Week, September 13-19, 2009.

The theme for 2009, "Partners in Infection Prevention," speaks to the essential role that frontline environmental services and housekeeping staff play in providing a clean and safe environment for patients, visitors, and staff members through infection prevention and control practices, says American Society for Healthcare Environmental Services, which sponsors the event.

To help assess housekeeping policies in your facility, download the Infection Control Survey for the Physicians Office and Sample Housekeeping schedule from the Tools page on the OSHA Healthcare Advisor: <http://blogs.hcpro.com/osha/products/>

#### **Medication Administration Within That Thirty Minute Window**

Medication administration for most hospitalized patients is a fairly routine process. So why is this seemingly simple task becoming a hot spot for CMS and Department of Health surveys? Evaluate your readiness:

<http://www.compass-clinical.com/resources/accreditation-resource-center/tick-tock/>

#### **National Child Passenger Safety Week September 12-18, 2009**

In 2008, about 4 children ages 14 or younger were killed in motor vehicle crashes every day, and many more were injured. But parents and caregivers can make a life-saving difference. During National Child Passenger Safety Week, September 12-18, 2009, learn all you can do to keep your most precious cargo safe.

<http://www.cdc.gov/Features/PassengerSafety/>

#### **Lab Coat on Hook in War on Germs**

The American Medical Association is studying a proposal made at its annual meeting in June that doctors hang up their lab coats -- for good -- because of their role in potentially transmitting bacteria and other microbes. Findings from the study are expected to be announced next year.

<http://www.stltoday.com/stltoday/news/stories.nsf/sciencemedicine/story/C009CE4D98F946DD862575FF00739F13?OpenDocument>

### Fashion vs. Safety in Health Care – Hospital Scrubs (cont. from p. 1)

One study reported that nearly 20% of nurses' uniforms had C.difficile on them at the end of a shift. Only cleaning with bleach removes it, and that's not the kind of cleaning restaurants do between customers.

(<http://www.vpico.com/article/printerfriendly.aspx?article=220445>)

To read more about the *Committee to Reduce Infection Deaths*, visit: <http://www.hospitalinfection.org/>

### Tip of the Week: Pay Attention to Required Annual Reviews in Emergency Management

The Joint Commission encourages you to look at your facility's emergency management plans as evolving documents. Therefore, EM.03.01.01 requires you to conduct an annual review of the findings of your hazard vulnerability analysis.

Hospitals must also perform an annual review of the emergency operations plan to evaluate its effectiveness during drills or actual emergencies. Account for any big-ticket changes that may differ from the prior year (e.g., new construction at the hospital or noticeable changes to local weather patterns).

EM.03.01.01 further mandates that hospitals conduct an annual review of their inventory process for resources and assets needed during an emergency. This does not require a review of the actual inventory; rather, it is an opportunity to ensure tracking and management of supplies was satisfactory.

[http://www.hospitalsafetycenter.com/details.cfm?topic=WS\\_HSC\\_HSC&content\\_id=237741](http://www.hospitalsafetycenter.com/details.cfm?topic=WS_HSC_HSC&content_id=237741)

## HealthSouth Super Star

