

Quality, Patient Experience and Safety “QPes”

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Take me out to the ball park....

Bases are loaded and our batter is up! The pitch is solid, the batter connects... but wait.... the ball is caught and the 115th World Series is over! **What an amazing catch!**



Read on for a few details on some amazing catches here at Upstate!!!

In one event blood was sent to the floor that was intended for another patient. Unfortunately the lab system was not correctly utilized and therefore it did not stop the wrong unit from being issued. However our double check did work and when the nurses were validating it was noted that the information did not match! So the incorrect blood was never administered.

Another great catch The two units were off by one digit and even though the two mis-tagged units were for the same patient the units had their tags swapped and were tagged inappropriately. Again, at the time of administration this information was caught so the blood was not administered until tagged correctly!

Finally, we had a child experience malignant hyperthermia during induction. The OR RN recognized the signs, alerted other team members and everything was done appropriately including flagging the child's chart for future reference!

Kudos to Team Upstate!! We are “catching” those safety events and keeping our patients (and staff) free from harm!! Keep up the great work and remember that together we can win every day!



When in doubt....
Give us a shout!

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Kindness in Health Care: Missing in Action?

Kindness (noun): the quality of being friendly, generous, and considerate; a kind act.

It's an interesting fact that kindness is a kissing cousin to courtesy and respect. The concepts of courtesy and kindness from our health care providers is, in fact, far more important than many professionals realize. Anyone who has been seriously ill knows that it is the individual acts of kindness, thoughtfulness, and sensitivity on the part of the healthcare staff that make it possible to cope with the panic and indignity of a failing body.

Much of this type of interaction, however, depends largely on health care professionals' ability to **empathize** - to imagine what its like to walk in the hospital booties of their patients. It sounds corny, but if we can't be kind to each other, how can we take care of our patients?

Here, then, are some thoughts on kindness - and how to give and receive it.

Kindness starts with being kind to yourself. Ever notice how much better you treat others when you've taken care of yourself? Be kind to yourself when you misstep, which happens to everybody. Take a moment to breathe, assess what we need and seek it.



Lead with compassion, follow with kindness. Everyone has challenges, many hidden from sight. If you knew your coworker delivering the curt response had recently learned of a serious illness in their family, wouldn't you cut them some slack? When we are compassionate, we are recognizing our shared human condition. Compassion can guide us to acts of kindness. Maybe we keep our mouth shut instead of calling out the misdemeanor or find some private time to ask if everything is ok.

We feel happier when we act in service to others. A recent study reported on how people felt after performing or observing kind acts every day for seven days. Being kind to ourselves or to anyone else - yes, even a stranger - or actively observing kindness around us boosts happiness.

Choose kindness. While we may not have control over another person, we do have control over ourselves. What does it mean to be our best selves? Being kind is in the mix of choices we have each and every day; we can't make anyone else be kind, but that should not stop us from aspiring to be kind, no matter what.

Give to give, not receive. The purest form of kindness may have no audience and offer no credit. When we are kind to each other, there is no payback but the rewards are all the sweeter.

We become kinder with practice. So, practice. Aesop, the ancient Greek storyteller, once said, "No act of kindness, no matter how small, is ever wasted." If random acts of kindness don't come easily to you, try this challenge: do one small, kind thing each day for someone. Then pay attention to the impact on you. Does it become easier the more you do it? Do you start to notice and act on more opportunities to be kind in your world?

Kindness is lasting. Who do you remember most? How do you want to be remembered?

Do you know the Fall policy has recently changed??

Patient Informed Refusal of Safety Interventions:

Competent/oriented patients:

If a competent/oriented patient declines recommended safety interventions based upon a clear understanding of the facts and implications of not following the suggested plan of the care the RN will:

Notify the physician who must discuss this decision with the patient and family

Complete a detailed "significant event" note regarding suggested interventions and reason for patient/family refusal

Documentation completed each shift and discussed at change of shift and update care plan

Disoriented/non-competent patients:

If a patient does not have capacity they cannot refuse high-fall risk interventions and the interventions should be implemented or continued.

See Policy CM F-07 "Fall and Injury Prevention Program" for the full details