

# Patient Safety Action Group



## Visits By Surveyors: Maintaining Continuous Readiness

The following are areas for which we have room for improvement.



### Voices of Our Patients

My husband was involved in a motorcycle accident on April 1 and received care at Hartford Hospital. I wanted to let the staff, especially the nurses and hardworking nurse's assistants, know how appreciative our whole family was of their excellent care.

I did not meet the ER staff, but I know they worked hard to save my husband's life.

The staff on the neuro ICU was amazing overall. The nurse on duty the night of my husband's accident was named Jenn. She was amazing, understanding and helpful. I could not have asked for anyone better to help my husband or myself through that first night.

There was another nurse named Eric that worked nights. Although I never met him, my husband's family told me he was also amazing when dealing with my husband.

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We were visited in January and February by surveyors from the Department of Public Health for event and complaint reviews.

### The following are areas for which we have room for improvement:

- Infection control procedures for hand hygiene and use of personal protective equipment must be followed in accordance with hospital policy.
- Patient equipment must be maintained and cleaned in accordance with the manufacturer's directions for use.
- Room cleaning must be completed and documented in accordance with hospital policy.
- Pain assessment and reassessment must be documented in a timely manner, but no later than two hours after administration of pain medication.
- Revisions in the paper medical record must be completed in accordance

with hospital policy – an incorrect entry should be corrected by drawing a single line through the entry and writing 'error.'

- Monitoring of the patient's weight, fluid and/or nutritional supplement intake must occur and be documented per the physician's order.
- Wound assessments must be comprehensive, including measurement of the wound.
- The Adult Nursing Profile must be initiated upon admission, including documentation of priority information within 12 hours.
- The Plan of Care should be comprehensive and individualized to meet each patient's initial and changing needs while in the hospital.
- Documentation of communication with the patient and/or his/her legal representative should occur frequently and regularly in the medical record.



# Ethics Committee Clarifies “DNR”

The PSAG Newsletter of April 12, 2012 featured an article entitled “Cardiac Arrests at Hartford Hospital: A Progress Report.” That article addressed the issue of **withholding cardiac resuscitation**. Following is a response from the **Hartford Hospital Ethics Committee**:

Code status results from a **shared decision determined during discussion between the patient’s physician and the patient or the patient’s legally authorized representative** if the patient lacks decisional capacity.

This discussion takes into account **the patient’s expressed verbal wishes or preferences related to life support interventions** which may be expressed in a living will or may be known to the patient’s representative as well as the physician’s medical opinion regarding prognosis.

The **likely effectiveness of CPR is an important consideration** which must be taken into account in the context of the patient’s wishes.

If the discussion results in the shared decision to forgo resuscitation in the event of cardiac arrest, a **“Do Not Resuscitate” (DNR) order is recorded in Sunrise Record Manager, and a purple DNR form is placed in the front of the patient’s record.**

**In the absence of a current DNR order, it is assumed that cardiopulmonary resuscitation (CPR) is appropriate** in the event of a cardiac arrest.

In the event of a cardiac arrest, a DNR order indicates that **no CPR, including no basic life support** (no cardiac compressions, no artificial respiration) **and no advanced cardiac life support** (no defibrillation, no ACLS medications) **will be initiated.**

More detail related to Hartford Hospital’s “Do Not Resuscitate” policy can be found on the Intranet in Alfresco.

Questions regarding this policy can be directed to the director of the Ethics Clinical Consultation Service, **Dr. Barbara Jacobs** (pager 860 825-9685).

# For Everyone’s Safety, Do Not Open Windows

All **windows throughout Hartford Hospital should remain closed and locked at all times**, except under controlled conditions.

This practice helps ensure a quality, safe, patient environment.

Open windows anywhere in the building create patient safety issues, i.e. infection control, air balancing, heating, ventilating, and air conditioning issues, as well as the danger of someone falling out of an open window.

Open windows also allow unfiltered air from outside to bring fumes into the building, creating other unwanted issues for patients, staff and visitors.

For **patient safety, and the safety of everyone, do not open any windows.**



Report any open window immediately to **Engineering at 860-545-HELP (860-545-4357).**

Thank you for helping to keep patient safety a priority.

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The **staff in the neurosurgery unit** was also wonderful.

My husband has a TBI, and went through three days of severe agitation, and yet he still received excellent care

The **nursing assistants** who sat with him around the clock were unbelievably patient and kind.

Matt is getting better. He is now nearly four weeks out from the accident, and everyone who sees him and hears about his accident says it is a miracle he is alive and doing so well.

Thank you again,

Laura Gezelman

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We want to hear from you. Just hit “reply” and write your thoughts. If you do not have access to e-mail, you can send your comments or suggestions via the inter-hospital mail. Address the envelope to the Patient Safety Action Group. (Please include your name and department if you would like a response from PSAG.) **Useful ideas win awards!**

## PSAG Meeting Location Reminder

**Monday, 5/14/12**  
Special Dining Room

**Tuesday, 5/15/12**  
CRCR

**Wednesday, 5/16/12**  
Dining Room A

All meetings start at 7:30 a.m.  
All staff welcome to attend

