ORLANDO HEALTH® | Health Central Hospital

2017 Edition

Medical Staff Education

ANTIMICROBIAL STEWARDSHIP PROGRAM (ASP)

What is Antimicrobial Stewardship?

The antimicrobial stewardship program (ASP) refers to coordinated interventions designed to improve and measure the appropriate use of antimicrobials. ASP achieves this by promoting the selection of the optimal antimicrobial drug regimen, dose, route of administration, frequency, indication, and duration of therapy, and by reducing adverse events associated with antimicrobial use. In recognition of the urgent need to improve antibiotic use in hospitals, as well as the benefits of antibiotic stewardship programs, the Centers for Disease Control and Prevention (CDC) recommended that all acute care hospitals implement the antimicrobial stewardship program.

At Health Central Hospital, we have developed an antimicrobial stewardship program comprised of multidisciplinary representatives from various areas in the hospital: Administration, Physicians, Pharmacy, Nursing, Infection Control, Laboratory, and Clinical Informatics.

Goals of the Antimicrobial Stewardship Program:
• Achieve optimal clinical outcomes related to antimicrobial use
• Decrease development of resistant organisms
• Decrease antibiotic treatment related illnesses (e.g. Clostridium difficile diarrhea)
• Decrease risk of adverse effects (e.g. toxicity, administration related issues)
• Decrease expenditure of anti-infective resistance, a direct and indirect monetary cost to both the health system and the patient

Antibiotic Stewardship Initiative to Support Optimal Antibiotic Use

Document: dose, frequency, route, indication, and duration of therapy.

Specify the dose, indication, and duration for all courses of antibiotics so they are readily identifiable. Making this information accessible helps ensure that antibiotics are modified as needed and/or discontinued in a timely manner.

Information Systems (IS) is looking into integrating this initiative as a mandatory field into the CPOE system. Until this is achieved, these are our responsibilities to support Antimicrobial Stewardship

Physicians and ARNP/PA:
• Are to provide indication and stop date for all antibiotics, proton pump inhibitors, and histamine-2 receptor antagonists during Computerized Physician Order Entry (CPOE)
• Pharmacy will contact the physician to clarify the indication and stop date if not included in the order

Why do we need to sign, date and time?

The Joint Commission and CMS require that all entries in the medical record must be dated, timed, and authenticated by the person responsible for providing or evaluating the services provided. Timing is essential, because it establishes when an order was given, when an activity happened, or when an activity is to take place. Many patient interventions and assessments are based on time intervals or timelines of various signs, symptoms, or events.

Timing and dating entries are important for overall patient safety, quality of care, and your legal protection. Please remember to authenticate, date, and time all entries in the medical record including consents, immediate post-op note, progress notes, orders, and H&P updates, etc.

HEALTH CENTRAL HOSPITAL *Mission*

Health Central Hospital's mission is to improve the health and quality of life of the individuals and communities we serve.

HEALTH CENTRAL HOSPITAL *Vision*

Our strategic vision is to create a Patient First clinically integrated new model of care in collaboration with our medical staff to pursue seamless, quality, outcomes-driven, extraordinary care.

EMERGENCY OPERATIONS PLAN

Physician emergency response responsibilities

In the event of a hurricane, other natural disaster, or other emergency that significantly disrupts Health Central Hospital's ability to provide care or increases demand for services, the President/administrative designee of the hospital will activate the emergency operations plan.

Attending physicians are responsible for the care of their hospitalized patients. It is the responsibility of the physician on-call with the emergency department to maintain his/her on-call obligation. Any licensed physician desiring to help during a local disaster or emergency should report to the command center for credentialing and assignment.

INFECTION PREVENTION & CONTROL

Hand Hygiene

As simple as it seems, hand washing prevents the spread of infection. Hand washing is the vigorous rubbing together of well lathered hands for 10-15 seconds, followed by rinsing thoroughly under running water. CDC hand hygiene guidelines also encourage the use of waterless alcohol-based foam. Health Central Hospital has placed this product at the entrance/exit of patients' rooms for use by physicians, employees, volunteers, and visitors. Instant alcohol-based hand rinses are very effective.

Hand washing is always recommended if the hands are visibly soiled, or if a patient with diarrhea is suspected of having C. difficile.

Be a leader in helping prevent infection by washing your hands.

Isolation

Ordering isolation is a physician responsibility. Personal protective equipment (PPE) must be worn upon entering any isolation room, and hand hygiene must be performed after removing gloves. PPE includes gowns, gloves, masks and face shields, etc.

RESTRAINTS UPDATE

Name	Behavior/Comfort/ Safety Checks	Patient Assessment for Release	Order Time Frame Limits
Non-Violent Restraints	• Every 2 hours	*Patient assessed every 2 hours for continued need of restraint*	• Every 72 hours
Violent Restraints	• Every 15 minutes • Direct 1:1 Visualization	*Patient assessed every 1 hour for continued need of restraint*	For the first 24 hours • Adults—4 hours • Adolescents (9-17 years of age)—2 hours • Children (under 9 years of age)—1 hour Then every 24 hours

Emergency Codes

Color	Code
Black: Bomb	**Red: Fire**
Yellow: Lockdown	**White: Hostage**
Purple:	**ER Saturation**
Brown:	**Severe Weather**
Echo:	**Patient Elopement**
Pink:	**Infant/Child Abduction**
Orange:	**Hazmat / Bioterroism Chemical Spill / ETO Leak**
Gray: Violence / Security Alert	
Green:	**Internal Disaster**
Blue 90: Adult Cardiac / Respiratory Arrest **Blue 45: Peds & Neonate Cardiac / Respiratory Arrest**	
Silver:	**Active Shooter**
Copper:	**Information Technology Infrastructure Failure**

Reduce the Risk of Healthcare-Aquired Infections

Health Central Hospital conducts surveillance and reports results to the Infection Control Committee, as well as the Pharmacy and Therapeutics Committee. Policies have been formulated and reflect best practices for preventing healthcare-acquired infections. To learn more, contact Health Central Hospital's Medical Staff Services Department.

PRN MEDICATIONS

Per regulatory requirements (MM.05.01.01 – Therapeutic Duplication), only 1 PRN medication should be ordered per indication. If more than one medication is ordered for the same indication, there must be a clear delineation for when to choose a particular medication.

Examples:

- PRN medications for pain could be written with an indication of "mild pain," "moderate pain," "severe pain," pain score ≥ 5, or pain score < 5, etc.
- "Percocet 2 tabs PO every 4 hours PRN severe pain, choose first. If Percocet ineffective, morphine 1mg IV every 4 hours PRN severe pain."
- If an IV and PO medication are ordered for the same indication, one could state "when tolerating oral intake, give PO medication."

Physician will be called by nursing to clarify orders when therapeutic duplication exists prior to the medication being profiled by pharmacy.

Pain Management

Health Central Hospital's Nursing Policy, *Pain Management,* provides guidelines for assessment, reassessment and management of pain. In accordance with "Patient Rights," Health Central Hospital ensures that the patient has access to the highest level of pain relief that may safely be provided. To obtain copies of Health Central Hospital's policies, contact Medical Staff Services.

Intravenous Sedation

This is the administration of medication(s) to allow patients to tolerate unpleasant procedures by relieving anxiety, discomfort, and/or pain. All patients receiving moderate or deep sedation shall have a pre-sedation assessment including an ASA and complete airway assessment.

Pain Measurement Tools

Pain assessment is documented by nursing, as applicable, at specific intervals, including upon admission, at least every 4 hours and PRN, and after intervention. An appropriate pain scale rating is used in conjunction with physiological data to guide pharmacological management of pain.

PRN MEDICATIONS, continued

Standard Scale

(0 – 10 Numeric Pain Intensity Scale)

This pain scale is used to assess an adult patient's pain level if they display appropriate cognitive and verbal skills.

Wong Baker Faces Pain Rating Scale

This pain scale will be considered for pediatric patients, as well as those with impaired cognition and communication barriers.

| No Hurt | Hurts Little Bit | Hurts Little More | Hurts Even More | Hurts Whole Lot | Hurts Worst |

Diversity

Health Central Hospital is an organization committed to a belief in the potential of its people. Fundamental to this belief is an endorsement of the concept of persons. This concept begins with an understanding of not only our differences in terms of culture, gender, race, ethnicity, age, education, lifestyle, and disability, but in our unique talents and skills. Recognizing these similarities and differences helps us to understand and appreciate the diversity of our employees and patients

Cultural Awareness

Cultural Awareness is a Health Central Hospital competency requirement. It is the ability to recognize, respect, enable, and encourage similarities and differences on an individual, group, and organizational level. This awareness allows us to work effectively with our changing, diverse employees and community, and increases the quality of care for our customers.

Interpreter Services

Hospitals must assure the competence of interpreters by providing qualified and trained interpreters and should not use family members, friends, or children as interpreters. Language competency of staff members, including medical staff, is determined through use of standardized verbal simulated discussion about healthcare, which is evaluated by another staff member previously deemed competent.

For other languages, or if no qualified interpreter can be reached, contact Medical Staff Services, who will assist you with accessing a qualified interpreter or an electronic service. In addition, the hospital provides telecommunication devices including iPads for video remote interpreting.

Hearing Impaired

For the purpose of rendering emergency healthcare, the hospital provides telecommunication devices including iPads for Video Remote Interpreting for the hearing impaired/deaf individual. In addition, qualified sign language interpreters can be obtained through Medical Staff Services or Patient Relations.

Ethics Committee

The Ethics Committee provides consultation on specific cases presenting ethical dilemmas, forums for education regarding ethical issues and decision-making, and develops and reviews policies that impact patient rights and responsibilities, as well as organizational ethics. To initiate an ethics consult, enter the order into HEO under the *Spiritual Care Tab* indicating that an ethics consult is requested.

Compliance Program Guidelines

Health Central Hospital must comply with literally thousands of healthcare rules that have been created by both the State and federal government. It is our responsibility to know and understand the laws and regulations that apply to our jobs. If we fail to comply with these rules, the government can impose significant fines and penalties and we could lose our right to participate in the Medicare and Medicaid programs.

Confidentiality Guidelines

The rules of privacy and security are closely aligned; they ensure that patient and employee rights are protected. All patient medical records (paper or electronic) are confidential. Access to this information is on a 'need to know' basis. 'Need to know' is defined as a person who is directly involved in the care of the patient.

Health Central Hospital has specific administrative and departmental policies and procedures about information protection. Contact Medical Staff Services with questions.

Physicians are responsible for ensuring the staff in their respective offices ONLY access information they have a 'need to know' and are authorized to access.

All staff members are encouraged and required by policy to report violations/abuses of protected patient health information to their immediate supervisor(s), Human Resources, or Risk Management.

Alarm Safety

Clinical alarm systems are intended to alert caregivers of potential patient problems, but if they are not properly managed, they can compromise patient safety.

Because of the many alarms heard by the caregiver, they can become desensitized or develop alarm fatigue. Alarm fatigue is sensory overload when healthcare providers are exposed to an excessive number of alarms. For this reason Health Central Hospital will monitor only those patients with clinical indications for monitoring.

How can we improve alarm safety?

- Clinical alarms will be maintained in the ON position
- Alarms should be sufficiently audible to hear outside the patient's room.
- Alarm parameters should be adjusted to meet the individual needs of the patient.
- No alarms will be ignored!
- Change the electrocardiogram electrodes daily in order to minimize unnecessary alarms.

Alarms have been categorized into one of three risk groups:

1. High Risk Alarms – Could lead to death if unattended (example: Ventilator Alarm, Telemetry Alarm, etc.)
2. Medium Risk Alarms – Could lead to unintended outcomes if unattended (example: feeding pump alarms, CPM alarms, bed alarms, etc.)
3. Low Risk Alarms – Little patient risk if unattended (example: Acudose, SCD pump alarms, blanket warmer alarms, etc.)

Recognizing that patients may be compromised if clinical alarm signals are not properly managed is one of Health Central Hospital's patient safety priorities; one that each team member may have a significant role in supporting.

MEDICAL STAFF BYLAWS, POLICIES AND PROCEDURES

Access and download bylaws, policies and procedures at healthcentralmedicalstaff.org.

Medical Staff Services contact information is available at healthcentralmedicalstaff.org/medical-staff/.