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Nursing News: August, 2002

St. Cloud Hospital

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NURSING NEWS



Volume 23 Number 8

St. Cloud Hospital, St. Cloud, MN

AUGUST, 2002

HTO Policy

The Staffing Associates often entertain questions relating to the guidelines on cutting staff or placing them on-call.



The following is an excerpt from the revised HTO policy for those areas staffed through the centralized Staffing Office that was approved for implementation February 17, 2002:

Staff are to be cut and/or placed on-call in the following order:

- 1. Honor cuts for all staff by seniority
- 2. Casual and Reserve staff
- 3. All other regular staff (part-time, full-time, extra shifts, bonus, etc.) on a seniority rotation

Note: Staff may be floated to another unit to grant a request cut, rather than mandate staff HTO.

Susan Laudenbach, Coordinator Staffing/Scheduling/Secretarial Services

Make the most of your summer!



Transporters

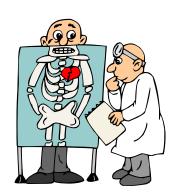
The Transporters job can be a very hard one sometimes. They take patients of all kinds down to Imaging and back. With the new areas opening up, it is even a longer trip. If it is at all possible to have the patient ready when the transporter gets there, it would save a lot of time.

I would like to ask for your help with another item. If a patient is too difficult for one transporter to bring down, it would be greatly appreciated if someone on the floor could help.

This does not happen very often, but it really helps our Transporters out when someone gives them a little help. We really appreciate all the hard work and help you do give us.

Also another reminder: X-rays do not belong on the floors unless a physician is looking at them. All x-rays need to come down daily to the film room. They can be tubed or hand delivered. The longer they are gone from the film room, the greater chance there is of them getting lost.

If you have any questions or concerns please call Deb Schultz at Ext. 55600 - Film Room



New and improved CentraNet

Celebrate CentraNet's fifth birthday and its new look and feel!

- Easier navigation
- Faster access to important information (less clicks)
- New sections: Security, Administration, Messenger and more!
- New CentraNet Messenger: includes Wellness information, educational offerings and more!
- Use the CentraNet to look up doctors' photos and clinics

Why is this such a big deal? The CentraNet is the answer to many people's prayers! It streamlines important information for employees across the health system. It eliminates some of the unwanted clutter in email. It provides fast, easy access to important information at one's fingertips. This is an under utilized tool and we are working to make it more useful, more interactive and more userfriendly. We also need to increase people's knowledge of this important tool. The launch of this new look is just the beginning! There also are new features to this site you should find very valuable.



CentraNet is your online employee information resource!



Did You Know...

The Health Science Library is always looking for donations of current magazines, as well as fiction and non-fiction books for its Kiwanis Patient Library collection. Please bring them to the library on 1st floor, C Lobby. We never seem to be able to keep up with the demand from patients and their families.

The Library has a copy of the video, "The Freedom Program: Reducing the Use of Physical Restraint," available for viewing for those of you who may have missed it. The video is 13 minutes in length and has a manual with it. It is available during staffed hours only, which are Monday through Thursday, 7:30 a.m. - 4:30 p.m. and Fridays, 7:30 a.m. - 12:30 p.m.

Remember, the Library has FREE CEUs via the HSTN video programs. Stop by and take a look at our collection of over 350 titles.

If you have any questions, please contact either Judy or Karen at Ext. 54686 or E-mail them at library@centracare.com



Violence Among Elderly Women

- Research studies indicate that only 1 in 4 elder abuse incidents are reported.
 (National Aging Resource Center on Elder Abuse, 1990)
- ❖ An estimated 1.01 million elders became victims of various types of domestic elder abuse in 1996, excluding self-neglect. (National Center on Elder Abuse, 1996)
- ❖ Women make up 68.3% of elder abuse victims. (National Center on Elder Abuse, 1994) Approximately two-thirds of perpetrators are family members, typically adult children, most often those serving as caregiver, followed respectively by spouses and "other relatives." (National Aging Resource Center on Elder Abuse, 1993)
- ❖ Neglect is the most common form of elder maltreatment (55%). This is followed by physical abuse (14.6%), financial exploitation (12.3%), emotional abuse (7.7%), and sexual abuse (0.3%). (National Center on Elder Abuse, 1996)
- The median age of elder abuse victims was 77.9 years. (National Center on Elder Abuse, 1996)
- ❖ In 1996, 66.4% of the victims of domestic elder abuse were white, 18.7% were African American, and 10.4% were Hispanic. (National Center on Elder Abuse, 1996)

Submitted by: Juanita Bell Breummer, Ext. 53224 St. Cloud Hospital Advocacy



The Profile of an Abuser

David Mandell has written a multi-part series called Five Elements in the Profile of an Abuser. His article seeks to explain the five psychological mechanisms that support abusive behaviors in men. The five elements "offer a road map toward developing effective community and clinical interventions."

Five Elements in the Profile of an Abuser:

- 1. Entitlement thinking
- 2. Avoidance of feelings of helplessness, fear and powerlessness
- 3. Denial about the impact his behavior has on himself and others
- 4. Benefits from institutional and cultural forms of inequality
- 5. Potentially aggravating factors: substance abuse, mental illness

For more information on this topic, go to www.endingviolence.com

Submitted by: Marilyn Keith, Ext. 53213 St. Cloud Hospital Based Advocacy

Congratulations to the Following Who Have Achieved or Maintained Their Level III or IV Clinical Ladder Status!

Level III's

Rhonda Fitzhumm, RN

ICU

- Protocol Committee
- Restraints/Seclusion Inservice
- PI Committee
- Preceptor
- Hemodynamic Station Education Day
- Night Charge Nurse Task Force

Level III's (cont'd)

Kathy Fluegel, RN

CSC

- Preceptor
- Champion Pain Audits/Patient Satisfaction
- Pain Poster
- President, SDSA
- Attitude Committee
- Coordinator Fall SDSA Workshop
- PI Committee

Jill Heinen, RN

KDU

- IV Att Mixture Inservice
- PI Committee
- ROE Committee
- CBA Acute RN/Dialysis Charge RN
- Preceptor
- Planning Committee, Renal Symposium
- Chair, Unit Education Committee
- ANNA Treasurer
- CPC Committee
- Education Council

Ann Ohmann, RNC

Med/Onc

- MESA/VRE Resource
- Assessment and Treatment Audits
- Preceptor
- Poster Documentation
- Education Council
- Staff Certification Chemo/Port
- Neutropenia Noodle Works Committee

Karen Skudlarck, RN

MHU

- Antabuse Administration Policy
- Antabuse Consent Form
- Policies and Procedures Revisions
- Champions Audits
- Inservice on Doctor Standards
- Chair, Behavior Health Revision Plan of Care

Level IV's

Mary Newcomb, RNC

FBC

- Woman's Didactic
- Epidural Care Labor Orientation
- Fetal Monitoring Strip Review
- Preceptor
- Mom and Baby Didactic Class
- PCW Care Unit Committee
- AWON
- Sigma Theta Tau
- Care Plans Task Force
- H Works

JoAnn Olson, RNC

Inpatient Rehab

- PPS Inservice
- PPS Resource Sheet
- Preceptor
- Aphasia Poster
- Clinical Ladder Committee
- Education Committee
- Co-Chair, Ortho/Neuro Rehab Committee
- ARN/MARN

