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St. Cloud Hospital

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PATIENT CARE NEWS



Volume 26, Number 5

St. Cloud Hospital, St. Cloud, MN

June 2005

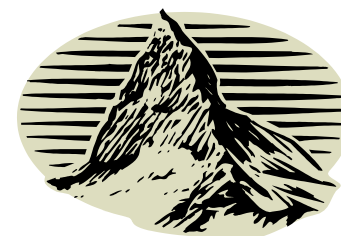


On June 15, 2005 SCH will have been Magnet Designated for one year!! At the time of our Designation there were only 113 Magnet hospitals world wide and only one in MN. We were the 114th worldwide and 2nd in MN. Today there are 145 and still only two in MN. What an honor for our organization to be recognized with the very best. Like I have always said, "You don't get good because you are Magnet; you get Magnet because you are good". We deserve the recognition. The designation commits us to ongoing excellence. Every decision I make is evaluated as to how it promotes and maintains our commitment to the 14 Forces of Magnetism. What a year it has been. Since achieving Magnet we've already seen our low staff/vacancy rate become even lower and our recruitment efforts easier. We continue to produce superior patient outcomes that reflect positively on our employees and to the community that we serve. As a Magnet hospital St. Cloud Hospital continues to look for ways to make our professional practice environment even better. A few examples of our quality focused achievement include: Increased evidenced based practice through participation in nursing research; building expertise through increased education and promotion of professional national certification (St. Cloud Hospital has become a review and testing site for the American Nursing Credentialing Center); remodeling projects that reinforce our patients and family centered care environment; the Catering To You Program and our patient safety initiative-B.Safe. Magnet expects professionalism. Professionals have a commitment to the community. Our staff have taken this obligation seriously. We participate in service organizations, we teach at community centers, we participate in school programs and educational institutions. We work with the media to tell our story and formulate a trusting relationship with the people we serve. We listen to what our community is asking for and work with them to meet their needs. When the news came on June 15, 2004 we started celebrating and haven't stopped yet. Every day is a day of celebration because we know how hard we work and how great it feels to be filled with the ultimate pride that Magnet designation brings to us.

"A Magnet culture reinforces a work environment with positive, collaborative, relationships – making good things happen" said Craig Broman, President of St. Cloud Hospital. Like I have frequently said, "We have a rich tradition of high quality patient care and professional nursing practice that provides the foundation for our Magnet process. The Magnet journey has given us an opportunity to recognize both nursing and the patient care team for outstanding collaboration in achieving superior patient outcomes and to celebrate this level of service with or community".

Without continual growth and progress, such words as
improvement, achievement and success have no meaning.
~Benjamin Franklin

*Linda Chmielewski, MS, RN, CNAA, BC
Vice President, Hospital Operations/CNO*



Please send items that you would like included in the *Nursing News* to Deb Kaufman in the Patient Care Support office via interoffice mail, e-mail, or by calling ext. 54230. The deadline for items is the 22nd of each month.

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VHA Leadership Award

I was privileged to represent the staff of St. Cloud Hospital a few weeks ago at the 2005 Voluntary Hospitals of America (VHA) meeting where we were honored for our achievement of Magnet status with the 2005 VHA Leadership Award for Operational Excellence. Both the Magnet Award and the Leadership Award reflect the ongoing commitment that each of you have to celebrating Nursing excellence through professional practice that results in superior patient outcomes.

One of our organizational goals is to maintain our Magnet status. As a part of our efforts, we look at the Magnet Commission recommendations, one of which encouraged us to increase our participation in Nursing research. In this light, we have a very exciting opportunity. Dr. Marlene Kramer, one of the premier Magnet researchers in the county, has contacted St. Cloud Hospital and requested our participation in her current study evaluating the "Essentials of Magnetism". Her study process involves a three page written survey for RNs, followed by interviews with RNs, Nursing Directors, and physicians on units she selects based on the survey analysis.

Please consider completing this research tool when you receive it. You have a wonderful opportunity to participate in a national study and make a difference to the nursing profession.

*Linda Chmielewski, MS, RN, CNAA, BC
Vice President, Hospital Operations/CNO*

Patient Care News Now On-Line

Patient Care News (Nursing News) is now available to you on-line in addition to the printed copies we send out. To access issues, go to *CentraNet*, select the *Messenger* tab, go down to *Publications*, and click on *Patient Care News*. It will bring you to

an index listing of current and past publications. Happy reading!

*Website maintained by:
Patient Care Support*

CentraCare Dialysis now offers Therapeutic Plasma Exchange (TPE)

This procedure allows us to remove a patient's plasma, which contains toxic substances unique to a particular disease state, and replace that plasma with an albumin and saline mixture or with donor plasma. To make a referral for TPE or for any of our dialysis services, please call Cathy Sindelir at 240-7808 or CentraCare Dialysis at (800) 835-6652 and ask for the nephrologist on call.

Requesting a Cut for: July 4th Weekend Labor Day Weekend

Sign up forms for the summer holidays will be available on the patient care units according to the following timeline:

- **July 4th Weekend** – Forms will be delivered to the units on Thursday, June 9th, and picked back up from the units around 6:00 am on Wednesday, June 29th.
- **Labor Day Weekend** – Forms will be delivered to the units on Thursday, August 18th, and picked back up from the units around 6:00 am on Wednesday, August 31st.

Please make sure to **print** your name and a phone number where you can be reached. We will try to honor as many requests as possible.

The cut-off times the Staffing Office uses to notify staff at home are:

- 1:30 pm for the 3:00 pm shift
- 5:30 pm for the 7:00 pm shift

- 8:30 pm for the 11:00 pm shift
- 9:30 pm for the 7:00 am next day shift

If the shift does not start at one of the above times, the general rule is that notification should take place 1 ½ hours before the start of the shift.

Cut-off times for staff **who are working** are:

- 2:00 pm for the 3:00 pm shift
- 6:30 pm for the 7:00 pm shift
- 10:30 pm for the 11:00 shift

Sue Laudenbach

Coordinator, Staffing/Scheduling/Secretarial Svcs.

Congratulations...

To all of the over 25 posters entered in the Nurse Week Poster contest. What a display of knowledge and expertise. A special congratulations to:

Best Overall Poster:

Tracey Dearing-Jude and Cathy Tieva
White Lab Coats as a Dress Code for Nurses

Top Posters:

- Karen Neis and Brenda Hommerding
The Gift of Hope
- Mary Schimnich, Carol Upcraft, Deb Eisenstadt and Kay Greenlee
CORE
- Krista Ophoven
Looking Beyond the Scope
- Karen Kinsley
Peri-operative Nursing

What a display of all the roles of nursing here at St. Cloud Hospital. We want to recognize all of those who took the time and tremendous effort to share what their area is working on. Thanks for all you do!

- Karen Schmidt, Children's Center
- Mary Struffert, Children's Center
- Joy Plamann, Medical / Oncology
- Susan Aune, AMHU
- Jean Beckel, Magnet Steering
- Jennifer Krebsbach, Imaging
- Pam Rickbeil, Medical/Education
- Renee Chapa, Imaging
- Melissa Winans, Neuro
- Bonnie Curtis, CCNS
- Brandon Ruprecht, CCNS
- Roberta Basol, CCNS
- Chris McLaughlin, Rehab
- Rose Dwyer, Rehab

- Michelle Parson, IS
- Terri McCaffrey, Peds
- Tracy Arduser, Peds
- Michelle Scepaniak, Peds
- Carrie Gertken, FBC
- Kathy Toulouse, Rehab
- JoAnn Olson, Rehab
- Kirsten Skillings, CCNS
- Donna Kamps, CCNS
- Tracey Cousin, PCW
- Triniti Feldhege, PCW

Nurses Week Committee

"Look Alike/Sound Alike" Medications – Chapter XV

ANSAID	ASACOL
BETAGAN	BETOPTIC
CEFTIN	CIPRO
CEFTIN	CEFZIL
CEFTIN	CEFOTAN
ESTRATEST HS	ESTRATEST
iodine	codeine
iodine	LODINE
metoclopramide	metolazone
NASALIDE	NASALCROM

Medication error reports may be caused by drug names that sound or look alike. When handwritten or verbally communicated, some names could cause a mix-up. The list above includes recent and common mix-ups that have occurred or have the potential to cause a mix-up, nationally or here at St. Cloud Hospital. (Brand names are capitalized.)

Nancy A. Sibert

Medication Safety Pharmacist

Educational and Professional Development Programs

September, 2005

13th Basic Preceptor Class, Fireside

20th/27th TNCC Initial, Conference Center

*Upcoming Initial BLS Classes:

July 14th, 21st, 28th, 31st

August 7th, 11th, 18th, 24th, 25th, 31st

September 1st, 8th, 15th, 25th, 29th

(All BLS classes are held in the Skyview Conference Room.)

***Upcoming Renewal BLS Classes:**

July 14th, 21st

August 4th, 11th, 18th

September 1st, 8th, 15th, 22nd, 29th

(All BLS classes are held in the Skyview Conference Room.)

Call Ext. 55642 for more details.

Education Department

Gallup Survey

Seventy-two percent CentraCare Health System employees participated in the Gallup Q¹² survey, which ended May 16. That rate is comparable with Gallup's health care clients and is considered very good for a first-year survey. Gallup says that most of its health care clients see participation rates go up in subsequent years as staff see that the survey makes a difference in their work environment. The next step: leaders will undergo Gallup training this month and then will share work unit results with their staffs. Together, leaders and staff will use the valuable information gained through the survey to make changes.

Cheri Tollefson Lehse

Communications Specialist, St. Cloud Hospital

LCT Transfer Form

The attached form is a new communication tool that area nursing homes developed in collaboration with St. Cloud Hospital Case Managers and Social Workers. It will be effective July 1st. It should be placed in the tri-fold care plan for quick reference. This will help the bedside nurse have a clear concise picture of the patient without having to page through the numerous other pages that accompany the patient.

Please familiarize yourself with this form so you can recognize it when it comes with a patient from a nursing home. Call with any questions.

Marci Timlin, RN, BSN

Surgical Case Manager

Ext. 53423, Pager: 89-0113

Patient Care Support

Ext. 56699

Recent Decisions at CPCC/CNPC

At CPCC, two decisions were recently made that will be implemented **June 15th, 2005**.

1. A all oxygen tanks, wheelchairs and carts should be cleaned after each patient use. In addition, oxygen tanks should be checked to insure that they are not empty. Those units that check all tanks on nights should CONTINUE that process also. Also, all empty oxygen tanks should be placed in the clean (NOT SOILED) room. Place a "TANK EMPTY" tag on the tank to indicate which tanks are empty. Continue to send the slip to Distribution by 3 a.m. Slips have been revised and will now be orange in color so that you know you have the newest revised slips.
2. Patients in isolation: To improve communication with other departments when patients are transported for procedures, etc., a sticker indicating the type of isolation the patient is in should be placed on a white card and then slipped into a slot on the front of the chart on all patients who are in isolation. These stickers are preprinted and color coded to indicate type of isolation and will be in the isolation cabinets/carts starting June 15th. ***You still need to continue to indicate on the Plan of Care the type of isolation by checking the appropriate preprinted box also.***

If there are any questions, please contact your CPCC/CNPC representative.

Sally Petrowski, Infection Control

Joannie Nei, Materials Mgmt.



New EMR/Automated Documentation Project

Epic has been chosen as the vendor for our new electronic medical record. The contract has been signed and the process of forming the project teams has begun. Several application teams have been identified with each needing a number of full time and part time positions drawn from a variety of backgrounds such as nursing, providers, pharmacists, operations, etc. Brief descriptions of these positions are as follows:

- Application Coordinators – Full time positions – Individuals familiar with the workflow and patient flow in the system. These individuals will be involved in day to day build of the system.
- Principal Trainers – Full time positions - These individuals will be responsible for documenting the system for CentraCare and then training users at the time of startup.
- Trainers – Part time positions – These individuals will assist with end user training.
- Physician Champions/Nurse Champions – Part time positions – Individuals who will be supporting and promoting the project among staff, administration etc.
- Subject Matter Experts – Part time positions – Physicians, nurses, clinicians and ancillary staff from each area or specialty who understand the unique workflow needs of their particular area.
- Medical Abstractors– Full time positions – Individuals who will be entering typically handwritten information such as medication lists, allergy lists, etc, from the physician office charts into the EMR.
- Workflow Analysts – Full time positions on the Clinic Team – Individuals who will be charged to evaluate what we are currently doing and converting this into a computer process such as appearance of reports, development of master lists, categories, etc.

The Application Coordinators and Principal Trainers have been recruited as core team members for the hospital implementation teams, and they are as follows:

- EpicCare Inpatient Doc. & Order Entry Team
 - Rose Schulz, RN from Medical Oncology
 - Doreen Schultz, RN from FBC
 - Carol Ann Zika, RN from PCS
 - Cindy Johnson, RN from Surgical Care Unit
 - Lisa Krebs, RN from Behavioral Access
 - Sandie Selander, RN from Critical Care
 - Sandie Stone, RN from Telemetry
 - Kris Menke, RN from CPRU
 - Julie Wood, HUC from CPRU
 - Becca Rosha, HUC from Medical Oncology
 - Nancy Sibert, Pharmacist
 - Lisa Mullen, RN Clinical Sys. Educator from PCS
 - Sue Abraham, Sr. Programmer Analyst from Information Systems
- EpicRx Pharmacy Team
 - David Menzhuber, Pharmacist
 - Ryan Newman, Pharmacy Technician
- EpicCare OpTime Surgery Team
 - Patrick Justin, RN from Surgery
 - Sheila Campbell, RN from Surgery
 - Rose Weiser, RN from PACU
 - Denise Honkomp, Surgery Scheduler
 - Pat Mance, Surgical Technician
 - Margie Poser, Programmer Analyst from Information Systems
- EpicCare Emergency Department Team
 - Brenda Meyer, RN from ETC
 - Shelley Zink, RN from ETC
 - Corey Azure, ETC Technician
- EpicCare Radiant Team (Imaging Services)
 - Mary Croat, Imaging Services
 - Ann Stamm, Programmer from Information Systems
 - Sue Josewski, Imaging Services Administration

Starting in July, these individuals listed above will begin training in Madison, WI to become familiar with the Epic system and their role in the implementation process. The planned kickoff date for actually building the system will be in early September, with much of the design and build of the system occurring over the next 9 -12 months. During this phase, the core team members will consult with Subject Matter Experts to analyze and validate existing workflows as well as the new system build. Subject Matter Experts have not been selected yet, but volunteers for these positions will be recruited this summer.

There will be a testing and training phase in the summer and fall of 2006 with a planned start of use by some parts of the system by the fall and winter of 2006.

Input from all affected will be appreciated but the large volume and speed of this change will not allow all alterations to be thoroughly debated by all potentially affected. Please be patient with the process as we try to build a system that promotes excellent care, the highest standards of patient safety and improvements in clinical workflow.

*Michelle Parson, RN Clinical Informatics Specialist
Project Manager Hospital EMR*

Febrile Neutropenia Project

A team of oncology nurses, physicians and pharmacists has developed a plan to improve the care delivered to our patients with febrile neutropenia. Using the NCCN (National Comprehensive Cancer Network) Practice Guidelines in Oncology-Fever and Neutropenia v.1.2002, the group has created Febrile Neutropenia, Neutropenic Precautions Signage, and patient/family education material: "*Neutropenia and Infection, What You Need to Know*". All the pieces are necessary to provide a template for excellent care and patient outcomes.

Staff on 5 South, Oncology unit and Coborn Cancer Center have been educated on the use of these forms and have been using them since June 2004. Chart audits conducted on charts of patients admitted with the diagnosis of Febrile Neutropenia indicated that further education is required. Currently education of lab, pharmacy, all levels of staff on Medical/Oncology, and physicians and practice nurses at the Coborn Cancer Center. Use of the forms has been extended to ETC and Critical Care units in January when those areas were educated on the use of this plan.

Members of the Febrile Neutropenia group presented this project to the Research Committee in February. A presentation to the Medical Staff was also being planned.

*Submitted by:
Ann M. Ohmann, RNC
Medical/Oncology*

Zoom Beds

Zoom beds and carts have been purchased for your safety. Following are some of the benefits of using Zoom beds and carts:

1. Zoom features help minimize the incidence of occupational injuries
2. It encourages proper ergonomic posture and leverage during transport.
3. It is self-propelled so no one person driver of one person operation is possible. With this zoom capability, it is not necessary to exert additional push. Slow down!
4. Centrally located drive wheel improves cornering, minimizes turning effort.

For a safer, better transport, please use these. There should be at least one cart available on all nursing units. Before using the zoom beds and carts, please make sure you understand how to properly operate them.

The chains located underneath zoom beds and carts help fight against static electricity. When transporting with the use of a zoom cart or bed, it is important to remember that for proper grounding, the chain located underneath the bed must be kept in place and touching the floor at all times.

*Fay T. Chawla
Occupational Health Services*

Clinical Ladder

Congratulations to the following individuals for achieving and/or maintaining their Level IV and Level III Clinical Ladder status!

Level IV

June Bohlig, RN

OR

- PI Committee
- Preceptor
- CNOR National Certification
- Employee Satisfaction Committee
- Presented Classes to Area Schools
- Defibrillator and Crash Cart Stations
- Member of AORN

Level III**Georgia Dinndorf-Hogenson, RN OR**

- OR Open House
- Preceptor
- CNOR National Certification
- Member of AORN - Board of Directors

Desiree Fuecker, RN OR

- OR Open House
- Preceptor
- Family Center Care Committee
- Posters on Instruments and Family Care
- OR Nurses Week Task Force

Brenda Hommerding, RN Med/Onc

- Developed Inpatient Chemotherapy Log Book for life
- Relay for Life
- Chair of Practice Council
- Gift of Hope Poster and Project
- PI Committee and Champions PI Audits
- Relay for Life Caption

Teri Klaphake, RN Telemetry

- Updated and Taught Basic EKG Class
- Preceptor
- Member of Heart Center Clinical Nurse Practice Committee
- Taught Code Master and Biphasic PACU at Education Day

Leigh Klaverkamp, RN Children's Center

- Coordinated a Care Conference
- Children's Center Magnet Rep
- Preceptor/Mentor
- Made Poster on Intracranial Pressure Monitoring
- Member of EMR Task Force

Mary Rennie, RNC CSC

- OR Open House
- PI Committee and Champions PI Audits
- Medical/Surgical National Certification
- Preceptor
- Customer Satisfaction Committee

Our apologies to Jill Harris, RN, KDU for incorrectly listing her name in last months issue. Here is the correct information:

Jill Harris, RN Kidney Dialysis

- Member, PI Committee
- Member, ANNA
- Developed Patient Teaching Board on Fluid Management
- Member, Fire Brigade for Brainerd Hospital