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Patient Care News: April 2008

St. Cloud Hospital

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St. Cloud Hospital, St. Cloud, MN

Congratulations!

Thomson Healthcare and *Modern Healthcare* magazine announced yesterday morning that St. Cloud Hospital is among the nation's 100 Top Hospitals for the third consecutive year! St. Cloud Hospital is now a six-time winner in the Teaching Hospitals category: 1993, 1994, 1999, 2005, 2006 and 2007.

Top 100 Hospitals achieve the highest balance of performance in quality, efficiency, and financial stability. This award affirms St. Cloud Hospital's commitment to its healing mission and is a testament to your commitment in delivering outstanding clinical outcomes and a superior patient experience.

The Top 100 award is one of the most significant honors a hospital can achieve. There are more than 5,700 hospitals in the United States and St. Cloud Hospital is one of just two Minnesota hospitals to receive this 2007 achievement. Lakeview Hospital in Stillwater (Small Community Hospitals category) is the other Minnesota hospital to receive the 2007 award.

Top 100 Hospitals have higher survival rates, keep more patients complication-free, and have lower expenses — all while maintaining financial stability. Thomson Healthcare estimates that if all Medicare inpatients received the same level of care as the 100 Top Hospital winners:

- More than 120,000 additional patients would survive each year
- More than 138,000 patient complications would be avoided annually
- Expenses would decline by an aggregate \$6.2 billion a year
- The average patient stay would decrease by more than half a day

Thank you again for your outstanding commitment to our patients and their families.

Submitted by:

Craig Broman, MHA, FACHE
President, St. Cloud Hospital

Inside This Issue:

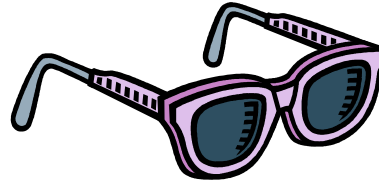
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Student Schedule Changes for the Summer

As the school year draws to an end, we would like to remind those students that will be changing their phone numbers to please call the Staffing Office at 255-5607 as soon as your new information is known.

Also, please let your Scheduling Associate know if your availability for hours over the summer will be different than it was during the school year. Thanks for keeping us up-to-date!

Submitted by:
Terri Krause
Coordinator, Staffing & Scheduling



Recent Policy and Procedure Changes: Highlights of Changes

The policies and procedures listed below were recently revised and approved by Resource Management. Listed below are clarifications and/or highlights of the policy changes for your convenience.

- On Call and Hospital Time Off (HTO) Policy (for areas utilizing Centralized Staffing out of Patient Care Support)
- Exchange of Hours Policy (for areas utilizing Centralized Staffing out of Patient Care Support)

Exchange of Hours Policy - policy changes/clarifications highlights:

- An exchange of hours form should be completed and initialed by those involved in the exchange and signed by your unit charge nurse **at least 36 hours** in advance of the scheduled shift. Last minute “verbal exchanges” are discouraged. In these isolated events you are to call the Staffing Office to alert them of who is working in your place and you must follow-up with the proper paperwork the next time you work.
- Your unit charge nurse is responsible for approving all exchanges for the **current posted schedule only**. They also must verify that the exchange does not create overtime for any individual involved in the exchange.
- Exchanges that overlap from the current posted schedule to the next schedule should be forwarded directly to the Staffing Office. Staffing will note the changes on the current schedule and forward a copy of the remainder of the exchange to the appropriate Scheduling Associate for entry on the new schedule to be posted.
- Exchanges involving dates on future schedules should **never be signed by the unit charge nurse**. These exchanges should be forwarded directly to your unit Scheduling Associate for handling with future schedule requests. If the future exchange is beyond six months in advance of the date, the exchange will be returned to the employee as we cannot accept any exchanges beyond six months.
- Employees should note that any **future schedule weekend exchanges should not be considered approved until the schedule is reviewed by the Director**. This guideline is put in place to guarantee that we have the specialty skill levels needed for unit coverage (charge, chemo, heart, etc.)
- Employees exchanging away their “scheduled hours” to another employee without working hours for that individual **must use PTO hours** to cover that scheduled shift. Unit Kronos Auditors have been instructed to enter PTO when auditing employee’s timecards on Payroll Mondays. Employees may not use HTO to cover these hours.
- We ask that employees not use an Exchange of Hours form to pick up schedule needs posted on the units. When wanting to pick up open shifts posted with your unit schedules, please call Staffing at extension 55607. They have a master schedule needs book where they log all picked up shifts by employees.

On-Call and Hospital Time Off (HTO) – policy changes/clarifications highlights:

- Mandatory HTO hours are recorded in the Staffing Office. Please refer to your unit specific guidelines for maximum number of hours you can be mandated in a fiscal year.

- The definition of on-call has been clarified to state that the employee is required to be available for the scheduled shift 1 hour prior to the start of that shift and must be able to be reached by phone and reports to work within 1 hour after being called in by Staffing.
 - Process for assigning On-Call/HTO is done in the following order:
 - Honor request cuts first by seniority
 - Extra shifts **
 - Casual
 - Reserve
 - Requests for On-Call/HTO will be awarded in the following order:
 - The most senior person at the start of the shift (7 am, 3 pm, 7 pm and 11 pm) will get the on-call/HTO for the portion of the shift they have the highest seniority
 - On weekends (starting at 3 pm on Friday through 7 am on Monday) and holidays (starting at 11 pm the evening before until 7 am the day after) will be rotated with the most senior person honored the first day and the next most senior the second day, etc. On holidays, cut/call sign-up sheets are posted on the units for staff to sign up for on-call/HTO.
 - When requesting a cut from your scheduled shift, it is understood that on-call may be assigned in lieu of HTO. **Requesting a cut only is not allowed.**
 - On-call starts one hour prior to the start of your scheduled shift and ends 1 ½ hours prior to the end of your scheduled shift. For example: The call hours for a 7:00 a.m. – 3:30 p.m. shift would be from 6:00 a.m. - 2:00 p.m.
 - If your scheduled shift is a 12 hour shift and you were placed on-call for the first 8 hours your on-call continues until you report to work at 3:00 p.m. which means that you receive 9 hours of on-call pay (on-call from 6:00 a.m. – 3:00 p.m.)
 - If you are sent home on-call after working the first 8 hours of your scheduled shift, your on-call would not start until after you leave. For example, you work from 7:00 a.m. and clock out at 3:30 p.m. Your on-call begins at 3:31 and would end at 6:00 p.m.
 - Whether you have been mandated or you are requesting HTO, PTO can be used in place of HTO. If you choose to use PTO, HTO cannot be entered for the same timeframe. Employees that are part of the two way interface are not to clock their own PTO, as it is paid off the schedule in ANSOS/One Staff. If you decide you would like to use PTO in place of HTO you need to submit an adjustment form to your unit Kronos Auditor. Employees electing to use PTO for their mandated HTO hours will still have those hours recorded as mandated hours.
- ** In order to remain consistent with other policy guidelines regarding extra shifts that have been picked up by employees in regards to needing to use PTX hours if you are ill/absent for the shift, likewise employees who pick up extra shifts also must agree to be cut/ placed on-call for these extra shifts if census needs change.**

You are encouraged to review these policies in detail by accessing these policies on CentraNet. If you have any questions or would like further explanation of these policies, please contact your unit Scheduling Associate or myself and we will be glad to review these changes in more detail with you.

Submitted by:
Terri Krause
Coordinator, Staffing & Scheduling
Ext. 55705

Paging Hospitalists Quick Reference

Evening & Night Hospitalist: The evening/night Hospitalist (5 p.m. – 8 a.m.) is primarily here for admissions and urgent pages. Examples: Medication orders, new or unexpected critical lab values, or if nursing is unsure or uncomfortable with any situation.

Treatment Team: Please check the treatment team before paging a Hospitalist. The attending provider is the primary physician following the patient during their hospital stay; if it is not a primary Hospitalist patient or Hospitalist related please page the appropriate physician and not the Hospitalist. Please make sure a Hospitalist is following the patient before paging.

- To check the treatment team in EPIC, Right click on the patients name and open the treatment team.
- Primary Physicians are usually available from 8 a.m. to 5 p.m., please page appropriately.

New Grads: New Grads (less than 1 year) double check with your unit resource/charge nurse prior to paging a physician.

SBAR: It is extremely important that **BEFORE** paging a physician all important information is available (SBAR – Situation, Background, Assessment & Recommendation).

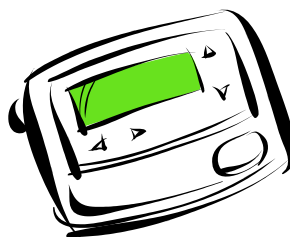
Top of the Hour Paging: All non-urgent pages should be paged to the hospitalist at 18:00, 19:00, 20:00, etc. This will assist the hospitalists with returning pages at one time and knowing that any pages that come in at other times are urgent and need immediate attention.

- Please continue to page all stat pages right away.

Paging Format for Alpha Pagers: Please use the following paging format when using the Alpha pagers or paging through the operators.

- (Doctor Name), (Your Name) (Spectralink phone #) re: (Pt First Initial and Full Last Name) (room #)-(bed #) (short reason for page).
- **For Example:**
 - Dr. McFarling, Mark 59123 re: J. Doe rm. 583-1 order clarification
OR
 - Dr. Mercuri, STAT Kim 59156 re: J. Doe rm. 567-2 resp distress
OR
 - CONSULT: Doe, J. MRN(123456) rm. 567-2 RE: Post-op HTN,DM.
OR
 - NEW ADMIT: Doe, J. MRN(123456) rm. 5 67-2 RE: direct admit, need orders.

Submitted by:
Vickie Ruegemer
Director, Learning & Development



Coborn Cancer Center Radiation Department Receives Three-Year Accreditation

The Coborn Cancer Center Radiation Department is only the second radiation department in Minnesota to achieve a voluntary three-year accreditation from The American College of Radiology (ACR). The ACR is a national organization accrediting radiation oncologists, medical physicists and radiation programs. Evaluations are conducted by board-certified physicians and medical physicists who are experts in the field. For more information or physician referral, call Derek Peterson, Radiation Oncology Department Director at (320) 229-4901.



Submitted by:

*Chris Nelson
CentraCare Health System
Communications Specialist*

St. Cloud Hospital Women & Children's Joins NACHRI

The non-profit National Association of Children's Hospitals and Related Institutions (NACHRI) has accepted St. Cloud Hospital's Women and Children's Center as one of its 218 members. As part of NACHRI, SCH will participate in national programs to increase public awareness of children's health requirements, ensuring the well-being of America's 70 million children and their families – no matter how sick or how poor.

Submitted by:

*Chris Nelson
CentraCare Health System
Communications Specialist*



CentraCare Health Foundation awards \$32,001 in Health Related Grants

The CentraCare Health Foundation approved six grants for a total of \$32,001 in January. Each year, the CentraCare Health Foundation averages more than \$200,000 in health-related grants. The Foundation's grants support projects that promote health education, conduct research and provide services or programs that improve health and health care for residents of our 13-county region.

Submitted by:

*Chris Nelson
CentraCare Health System
Communications Specialist*



The History of the School of Nursing

When: Wednesday May 14, 2008

Time: 10:30 am to 11:30 am

Where: Spruce Room - SCH

Presented by Mary Schaffer – SCH Archivist

In honor of the 100 year anniversary of the St. Cloud Hospital School of Nursing (1908-1987) please join us for a historical presentation. This special presentation is being offered in conjunction with Nurses Week. Please plan to join us for a delightful presentation about the origins and development of the St. Cloud Hospital School of Nursing from its inception in 1908 until its closure in 1987.

All are welcome!

Upcoming Developmental Programs: Educational and Professional

May

- | | |
|-------|--|
| 13 | NRP (Neonatal Resuscitation Renewal Course), 9:00 a.m.-12:00 noon, Family Birthing Center Classroom |
| 13/14 | AWHONN Fetal Heart Monitoring Program, Intermediate Course, 8:00 am-4:30 pm, Windfeldt Room, CentraCare Health Plaza |
| 21 | Spring Training for the Medical Nursing Health Care Professional Conference, 7:30 a.m.-4:30 p.m., CentraCare Health Plaza Education Center |
| 22/23 | Basic Electrocardiography, 8:00 a.m.-4:00 p.m., Heart Center Conference Room |
| 27 | NRP (Neonatal Resuscitation Renewal Course), 9:00 a.m.- 12:00 noon, Family Birthing Center Classroom |
| 27 | APA Citation Style: Getting Started, 2:00 p.m.-3:00 p.m., Oak Room |
| 29 | Research Begins at the Bedside Conference, 7:30 am-4:45 pm, Windfeldt Room, CentraCare Health Plaza |

Please contact the Education Department at Ext. 55642 with questions or for additional information.

Submitted by:

*Kate Hoelscher, Administrative Asst.
Education & Professional Development Dept.*



Clinical Ladder

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

Amy White, RN **Intensive Care**

- Nursing Process Core Group Leader
- Preceptor
- Poster – Ventilator Associated Pneumonia
- CCRN

Kami Petrek, RN **Cardiac Care**

- IABP and Hypothermia Education
- Welcome letter for CCU patients
- Preceptor
- IABP/Pacer Recertifications

Stacy Brzezinski, RN **Critical Care**

- Restraint Audit
- Restraint Poster
- IABP/Lucas Recertifications
- Preceptor

Donna Braun, RN **Kidney Dialysis-KDIP**

- Dialysis Inservice
- TPE/CRRT Education
- Preceptor
- Multiple Committees - Member

Nicole Robinson, RN **OR**

- Lap Towers/Printers Curbside Education
- Laparoscopic Procedure Education for Patients/Families
- Preceptor
- OR Satisfaction Committee

Jennifer Krebsbach, RN **Imaging**

- EPIC – Subject Matter Expert
- Vena Cova Filter Discharge Instructions
- Contrast Allergy Pre-Treatment Protocol
- RNC – Med/Surg

Marci Timlin, RN **Surgical Care**

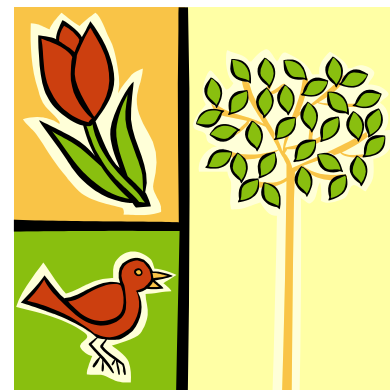
- Vascular Surgery Education
- Family Focus Group
- Suprapubic Class Discharge Instructions
- RNC – Med/Surg

Sherry Sonsalla, RN **Surgical Care**

- EPIC Secondary Trainer
- EPIC Pamphlets
- Subject Matter Expert
- EPIC Teaching Plans

Tiffany Tangen, RN **Family Birthing**

- Preceptor
- EPIC Supervisor
- Develop bundles for Triage



Happy Spring!