

DATE:

1-18-16

MEETING: CRITICAL CARE COMMITTEE

PRESENT: Marie Boyle Reinman, Melissa Charbonneau, Angela Falzarano, Karen Johns, Mary Kuznia, Robert Marchese, Gael Rodgers, Kelly Adams

ABSENT: Deb Briske, Wendy Jolley, William Hanna, Alfonso O'Neill

LEADER:

R. Marchese

RECORDER: Kelly Adams

Topic	Findings/Conclusions	Recommends/Actions	Follow Up/Eval
Minutes:	The minutes from November 2015 were reviewed and approved.		
Introduction of New Members	Mary Kuznia RN (Day shift CCU) and Karen Johns RN (MN shift CCU) were introduced to the group and welcomed as new members of the committee		
Medical Exec Report:	No report at this time.		
HCAHPS	2015 YTD Summary showed that Critical Care Unit met threshold in all but three categories: Communication with Doctors, Pain and Medication. HCAHPS survey/reports continue into 2016.	Awaiting delivery of white boards for patient rooms Weekly reports of HCAHPS displayed in unit by Kelly Monthly meeting with Dr. Marchese and the CCU RNs to be conducted in the CCU at time when both shifts are available to discuss points of interest impacting RNs/physicians/patient care in the CCU.	
INFECTION CONTROL	Infection control reports presented by Gael (see attached) No CLABSI or CAUTI in the CCU for the last 6 months. Gael asked to be relieved of the duty of data collection as it pertains to % central lines that are femoral, % of femoral lines that are not dialysis caths and % of central lines that are not PICCs.	Continued vigilance regarding the presence of UA/ C & S ordered for patients in the CCU Since info is not necessarily reportable, committee agreed to discontinue data collection as it pertains to % central lines that are femoral, % of femoral lines that are not dialysis caths and % of central lines that are not PICCs.	
CPR Data/CODE STATS	No report at this time.		
SEPSIS DATA	Sepsis core measure in effect as of 10-1-15 Review of charts for those patients with sepsis identifies that fall outs for this core measure occur frequently related to the omission of a repeat lactic acid	Dr. Marchese will review with the House Officers the availability of order sets as they pertain to sepsis Angela will include the sepsis bundles in the nursing education sessions that begin this month. Kelly will contact Charlotta Marion RN (ED) regarding the suggested use of the order sets in	

		order to prompt the repeat draws of Lactic Acid Kelly will re educate the CCU RNs about the 3 and 6 hour bundles as it relates to sepsis and the need to obtain lactic acids as indicated.	
Resp Therapy: Melissa	<p>Terminal Wean of the Ventilator Patient Policy was approved by this committee with a correction to the spelling of 'weaning' in the title of the policy)</p> <p>Non Invasive Ventilatory Support Policy approval tabled at this time</p> <p>Respirator Dept Response to EC-IP Surge Policy approval tabled at this time</p>	<p>Marie and Dr. Marchese to ask for approval of this policy at Quality Care and Safety Committee prior to posting on the website</p> <p>Dr. Marchese to review with Melissa content as it applies to: the AML patient and use of bipap and the listing of hypotension as a relative contraindication versus a contraindication</p> <p>Marie will take forward to the EC-IP nursing meeting for review first before this committee further considers this policy</p>	
New Business:	<p>CCU to OR Handoff process in effect since 12-1-15. OR is to use their own monitor for patient transport. Process moving forward with support from the CCU RNs.</p> <p>Suggestion by CCU Staff members to implement Family Centered Rounds in the CCU. Sample 'education' piece shared with this group. CCU rounds would be at a predictable time and family would be aware and invited to attend the portion pertaining to their loved one. Rounds would need to be 'walking rounds', preferable to begin at 1000 every day, encouraged to keep door to patient room open</p> <p>CRRT policy reviewed and discussed with physicians (Drs. Marchese, Kharullah and Henderson), CNSs from B-RO and input from Dr. Weinstein (B-RO)</p>	<p>Kelly will take to the UPC for a draft 'education piece' for patients and families and return the work to this committee when final</p> <p>Continued support of B-GP policy that does not endorse use of the AV graft as access for CRRT. Dr. Marchese to notify involved physicians.</p>	

	<p>Therapeutic Phlebotomy Policy Review. Group considered appropriateness for CCU admission for the purpose of this procedure and possible alternatives to a CCU admission that would still safely provide care to these patients. Policy approval tabled at this time.</p>	<p>Kelly will discuss with Janet Hamlin the possibility of including the IV team in the execution of this procedure which would then not necessitate transfer of these patients to the CCU. Will discuss and bring back to this committee.</p>	
Adjournment:	0830 Next meeting scheduled for March 21, 2016 at 0730 in the PDR		