Jan Szewczyk

Nicole Prusak

LEADER:

RECORDER:

## Beaumont Hospitals<sup>®</sup>

Grosse Pointe

DATE:

May 28, 2014

MEETING: CCS UNIT PRACTICE COUNCIL

LOCATION: CCSU Conference Room

PRESENT: Jan Szewczyk, Theresa Lopez, Edna Kouzukas, Nicole Prusak, Melissa Haezebrouck, Lindsay Parks, Sue Wolka, Marie Reinman

Topic	Findings/Conclusions	Recommendations/Actions	Follow/Eval
Physician – Nurse DYAD:	<ul> <li>Dr./RN rounding purposefully.</li> <li>1 Dr. and 1 RN assigned to unit to make sure patient is safe and taken care of.</li> </ul>	<ul> <li>Continue Dr./RN DYAD meetings.</li> <li>Rounding sheet to streamline rounding.</li> </ul>	Theresa, Dr. Ghafar and Marie.
PNC:	<ul> <li>Walking report being trialed on 2S.</li> <li>Per Lindsay (at St. John) – Very loud; takes longer; report at chart box and then go in and meet the patient; lots of commotion and distraction; leaving late.</li> </ul>		
Miscellaneous:	Shift section on EPIC – Morse not listed.		
	Vocera – not available to take calls at Royal Oak?	Contact pod 7 Royal Oak.	
	Mandatories.	Due October 31st.	
	Paper teaching forms.	Can either be done on paper form or "Critical Care" option under pt teaching on EPIC.	
	T-Code: should they have a patient assignment once ANM is here? Clarification of T-Code responsibilities.	<ul> <li>Should take a lighter assignment (1-2 pts) so they are an available resource.</li> <li>Charge phone to be given to ANM once they arrive (unless they have an interview or meeting).</li> <li>Once ANM's arrive, then T-Code can joint floor and take patients.</li> <li>The ultimate goal will be to have one "T" code</li> </ul>	Will follow up with Anne Stewart at the next Culture of Safety meeting.
		and one "Q" code each day without patients.	
	Debriefing after RR/code.	Should house officer lead debrief?	
	Matrix clarification.		Marie
	T-bar – where can they transfer? (Ortho/3SE?)		Marie
Pharmacy/ Nursing: (Mei)	When meds are ordered, the time is put in at that time and then med comes up 1 hour later and it looks like we are giving med late.	Change time to 0600 & 1800.	Mei
	Synthroid to be given on empty stomach per Dr. Brennan.	Already scheduled for 0600.	
	Barcode scanning problem sheet.	Need more forms for unit.	Mei
	Peroxide bottles.	Will add new labels.	Mei
	TID – can it automatically be Q8?		Mei
	BID – can they be Q12 (unless diuretic 0900 & 1700)?		
	Dual sign-off for heparin infusion.	Sign names in comments.	
	Glucophage warning; hold 48 hours after contrast dye.	Warning only when ordering. Prior to giving Glucophage/metformin, check to see if patient has had contrast dye in the last 48 hours.	

**MEETING:** 

CCS Unit Practice Council

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nt.	2 RN's only for transfer or new admission.	
	Not by room number anymore. Some boxes being repaired.	
le – need to be checked off on 2 pts.	Checked off by stroke champion.	Next 2 weeks Andrea/Sundara.
	Must be done by RN.	
nd (must have 8 RN's scheduled per	Volunteers for extra weekends.	
s: Sams		
A – Margaret. 2 new RN's.		
PIC.	Gale has clearance to chart in EPIC.	Sue
on doc flow for "other".	Also add in progress notes.	
ead.	Nursing staff showing up escalates patient.	Call Security (#3911).
y.	9	Laura from SPD/Sue.
ertain sizes.	Order from SPD.	The state of the s
		Eric
pe completed by 0630/1830.		
eep phone until 1920; night shift 0720.	NCA's need a place to keep phones.	
n and given to HUC at desk.	Needs to be given to Security.	
ole for making their assignment?	RN controller is responsible for making assignments. Isolations need to be split amongst NCAs.	