

## **Committee Minutes**

Attendees: Kathy Grady BSN, RN, Angela Falzarrano, MSN, RN-BC, Debra Briske, MSN-Ed, RN, CEN, Dr. Paul Bozyk MD, Dr. Aveh Bastani MD, Dr. Williams Anderson MD, Andrea Carr, DNP, MSN, MSA, RN, CCRN, Marianne Perraut PA-C, Adina Lesperance CBAP, MS, Karen Dittrick BSN, RN, Deb Luchini RN, BSN, Melissa Keck RN, MSN, MSBA		Date: March 30, 2016  Time Called to Order: 1200  Time Adjourned: 1300  Location of Meeting: conference call
Review of pilot alert and concerns	Group reviewed Alert messaging, & acknowledgements Feedback shared by the team members who touched based with RNs from the pilot units. Recommended changes include:  • add information that will help us with deciding whether or not to contact the RRT,  • Decrease the number of times that we see the alert- it is firing every 4 hours sometimes on the same patient,  • Education needed for RRT in their role when RN calls with Sepsis alert  Reviewed the patients in which sepsis alert had fired for on the pilot units. It seems like we are capturing too many patients that are not septic.	ACTIONS/RECOMMENTATIONS/FOLLOW-UP (WHO/WHAT/WHEN)  K. Grady will schedule a separate meeting to discuss the development hyperlink within the alert that will contain the following: definition of sepsis criteria for new/worsening infection

e e	Group decided to remove "immunosuppression" from the criteria list. Group agreed to decrease the frequency of alert firing to Q12 hours instead of Q 4 hours	K. Grady will follow up with appropriate IT personnel to adjust the timing of the alert and revise screening criteria
EPIC concerns and Flowsheet changes for nursing	Nursing Feedback regarding their documentation flowsheet:  Flowsheet screen - Read Only MAP and SI will display for all users We need to review Row information language, row placement (up/down) or new Group (Pilot) with the team on Row information discussed, will revise as advised.  They should not be adjacent on VS flowsheet to prevent confusion	Will work with IT to make adjustments to nursing flowsheet rows and bring back to next meeting.  Adina will work on adding information to nursing flowsheet
Education Concerns	What lead time is required for education?  At least two weeks to education clinical nursing staff. Would like to include overall sepsis education for RNs too  RRT specific education needed.  Alert could be ready for production by 4/26/2016	A.Carr is leading the education team for sepsis education and roll-out. She will touch base with site educators and share the timeline.