Completion of this training fulfills the employee requirement of the UWMC organization-wide annual education. Employees hired in 2011 or before, must complete this training. Employees who attended the New Employee Orientation in 2012 do not need to take this training.

The training covers six competency modules and quizzes listed below.

• Compliance and Ethics
• Cultural Diversity
• Infection Prevention and Control
• Organization Specific Topics
• Patient Safety
• Workplace Safety
2012 Frequently Asked Questions

These Frequently Asked Questions will help you when completing this training module.

1Q: If I need technical assistance while taking the quiz, who do I contact?

1A: Please send an email to the UWMC LMS Domain Administrator, uwmclms@uw.edu for technical assistance.

2Q: How can I save my work if I am not done taking the quiz?

2A: You may EXIT this training at any time. Once you click EXIT, the system will automatically "bookmark" your location (in the quiz), and when you resume the training, you will be returned to the same place. To EXIT click on the "X" in the upper right corner of this window.

3Q: How do I exit the quiz?

3A: To exit, click on the X in the upper right corner of this window.

4Q: I did not receive credit for completed training. Why?

4A: You will not receive credit for the training until you click on the Finish button on the final slide of the quiz. Call the Help Desk if, after passing the quiz and clicking the Finish button, you still do not receive credit for the course.

5Q: I was hired during 2012. Do I need to complete this quiz?

5A: No, you fulfilled the UWMC annual education training requirements by attending the New Employee Orientation during 2012.

6Q: What if I score less than 80% on my quiz?

6A: If you score less than 80%, you will be required to take the quiz again, until you score at least 80%. The graded quiz is meant to test your knowledge. Once completed, the results page will include the quiz name and your score.
TABLE OF CONTENTS

• Patient’s Rights and Ethics

• Patient Safety

• National Patient Safety Goals

• Universal Protocol

• Training Resources
COURSE OBJECTIVES:

Participants will be able to:

• Understand patient rights and ethics of care at UWMC.

• Understand patient safety, how to maintain patient safety, specifically know how to access available information and resources and how to communicate concerns.

• Understand 2012 focused National Patient Safety Goals.

• Understand Universal Protocol.
PATIENT RIGHTS AND ETHICS OF CARE

Patients and staff are encouraged to review the “Information About Your Healthcare” brochure that can be found in all clinics. This brochure outlines patient rights such as:

• The right to considerate, respectful and appropriate care.

• The right to an interpreter, if needed.

• The right to information about your care.

• The right to know the names and understand the roles of your caregivers.

• The right to effective pain management. Pain will be assessed and managed as deemed medically appropriate.
PATIENT RIGHTS AND ETHICS

• The right to participate in your care.

• The right to know the cost of treatment choices when such information is available.

• The right to privacy and confidentiality.

• The right to a safe environment.

• All patients are encouraged by their clinical team to have an Advance Directive
HOW TO ADDRESS ETHICAL ISSUES

The **Ethics Advisory Committee** provides support for patients, family members, and members of the medical and hospital staff who are faced with ethical problems.

It is important that staff discuss their concerns about the safety and quality of care provided at UWMC to supervisors, managers, and directors.
UWMC PATIENT SAFETY PROGRAM

The #1 Goal at UWMC is to:

“Provide the safest clinical care possible”

To achieve this goal, we have a Quality Improvement and Patient Safety Plan, policies that describe what to do when a patient safety issue comes up, and support pathways for patients, families, caregivers and staff.

Our Patient Safety Plan Promotes:

1. A team approach for finding ways to improve patient safety.

2. Participation by EVERYONE in identifying errors and areas of concern where errors could occur.

3. Open reporting and talking about information that can be used to improve patient safety.
WHY DO ERRORS HAPPEN?
THE PROBLEM IS THE GAPS!

Errors do NOT happen only because of people. Errors happen because the work we do involves gaps that make it easy for accidents to happen. Gaps may occur when:

- Information is incorrect or fails to reach the right person.
- Interruptions distract us.
- A change in the environment causes us to change how we routinely do our work.

As a result of gaps, we must *continuously* try to improve patient safety by identifying the high-risk places where errors can and will happen.

HAVE AN IDEA FOR IMPROVING PATIENT SAFETY?

Use Plan, Do, Check, Act (PDCA) to help you test your idea!

**Plan:** What change are you trying to make?

**Do:** What will you do and how will you use measures to improve patient safety?

**Check:** What did you learn from the change?

**Act:** What will you do as a result of what you learned?
JOB RELATED RESPONSIBILITIES FOR PATIENT SAFETY

Identifying hazards in the work environment is everyone’s job. This means we are all responsible for knowing how our specific roles affect patient safety.

How can you find the hazards in your work area?

1. **Be observant!** By knowing what normally happens in your area, you will be more likely to spot something that is not right.

2. **Slow down!** Take a minute to make sure everything is just right and is in order.

3. **Ask for and share information!** Ask others if they have noticed anything that might be a patient safety risk so that you can learn from what they have seen and done. Tell others about potential risks you have noted.

WHAT IS PSN (PATIENT SAFETY NET)?

PSN is UWMC’s online incident reporting system.

It is easy to access and easy to use. The icon to access the program is available from any clinical computer desktop in the medical center.

Managers of the department involved are notified immediately by email after a PSN report has been submitted.

PSN events can be entered anonymously.
WHAT ARE THE RISK OF PATIENT SAFETY IN THE HOSPITAL?

Unsafe working conditions
  • Spills
  • Distractions
  • Interruptions

Clinical Risks
  • Medication
  • Procedures
  • Treatment
  • Equipment
  • Documentation
  • Identification
  • Infection Control

Staffing Factors
  • Communication
  • Experience and training
  • Workload

Patient Factors
  • Patient understanding
  • English as a second language
YOU CAN TAKE ACTION TO ELIMINATE AND MINIMIZE RISKS

• Be Aware of Your Surroundings
• Ask for help
• Speak up and take the lead when you notice something that can be improved
• Ask questions
• Get the support you need
• Support your colleagues
• Encourage patients and their families to be active members of their healthcare team

Always Put Patient Safety First!
NATIONAL PATIENT SAFETY GOALS

The National Patient Safety Goals are established by The Joint Commission (TJC) to improve patient safety. All accredited healthcare organization such as UWMC must comply with each National Patient Safety Goal (NPSG).

Medication Safety


2012 Hospital National Patient Safety Goals

http://www.jointcommission.org/assets/1/6/2012_NPSG_HAP.pdf
HAND OFF COMMUNICATION:  
A *standardized approach*

- Allow the opportunity for questions and answers between the giver and receiver of patient information.

- Assure information is up-to-date regarding patient’s care, treatment and services, condition, isolation status and any recent or anticipated changes.

- Avoid interruptions during hand-offs to minimize the possibility that information will be missed or forgotten.

- Assure that the receiver of the hand off information has an opportunity to review relevant patient historical data.

- Utilize a standard method such as repeat back or read back to verify that information has been received correctly.
HANDOFFS USING THE 4-Ps

Communicate the following information during a hand off:

**Patient**: Patient name, date of birth, U number, and provider

**Problem**: What is the patient's diagnosis, current condition, and any anticipated changes?

**Plan**: Where will the patient be going and when?

**Precautions**: Include information such as allergies, code status, fall history, isolation status, power of attorney, ADL status (Activities of Daily Living)

*Make sure the next care provider has the necessary information to safely care for the patient.*
ASSESS EACH PATIENT’S RISK FOR FALLING AND TAKE ACTION TO ADDRESS IDENTIFIED RISK

• Every patient is at risk for falling.

• Review patient’s medication regimen, for potential fall risk.

• For patients who are at risk, use fall mats and a bed alarm when the patient is in bed. This decreases the potential for injury if he/she does fall.

• Up to 40% of falls occur during toileting. Assist confused patients to the bathroom every 2 hours. If you assist a patient to the bathroom, stay with them until he/she has finished.

• Use the Post Fall Evaluation Policy to help you provide safe care to your patient if they experience a fall.
ENCOURAGE PATIENTS TO REPORT CONCERNS ABOUT SAFETY

• If a patient has a concern, about their care or wish to report a safety concern, encourage them to contact the supervisor or manager of the department where they received their care.

• If the patient is not satisfied with the response or results from the manager, the patient can contact a:

  UWMC Patient Relations Representative
  206-598-8382
RAPID RESPONSE TEAM

The Rapid Response Team is made up of trained health care staff who are called in when a patient suddenly is getting much sicker. The purpose of the team is to help the patient avoid a medical emergency.

- Call **222** and tell the paging operator that you want to call a rapid response. Give the operator the patient's name, location and service.

- Who can contact the team?
  - Any staff member
  - Patients and family members should always contact their RN first. However if a patient or family member perceives that his/her condition has changed and his/her needs are not being addressed by their RN, the patient or family member can contact the charge RN for the unit.
NATIONAL PATIENT SAFETY GOAL #1
Identify Patients Correctly

For all Inpatients and Outpatients required to wear a name band, the two (2) patient identifiers are:

- Inpatient: patient name and U number
- Outpatient patient name and birth date

Always verify the two (2) patient identifiers prior to:

- Administering any medication or contrast media by any route
- Phlebotomy
- Obtaining specimens for clinical testing
- Providing any exam
- Performing any procedure
- For Blood/Blood products administration always use patient name and U number. Patient must wear a name band.
NATIONAL PATIENT SAFETY GOAL #2
Improve Staff Communication

Test Results and Critical Test Results Reporting

• Write down the test result.

• Read back the test result.

• Receive confirmation from the individual reporting the test result.

• Only licensed staff can accept a critical test result.

• Use the 2 patient identifiers: patient name and U number or date of birth when reporting a critical test result to ensure correct patient identity.
NATIONAL PATIENT SAFETY GOAL #3
Use Medicines Safely

• *Label all medications, medication containers (including syringes, medicine cups and basins) and other solutions both on and off the sterile field.*

• Labels include drug name, strength and/or concentration, quantity, diluent and volume, expiration date when not used within 24 hrs., expiration time when expiration occurs in less than 24 hours.

• All labels are verified both verbally and visually by 2 qualified individuals when the person preparing the medication is not the person administering the medication.
NATIONAL PATIENT SAFETY GOAL #3
Use Medicines Safely

• Label all medications, medication containers, or other solutions (continues)

  • Before a procedure, label medicines that are not labeled. For example, medicines in syringes, cups and basins.

  • Do this in the area where medicines and supplies are set up.

  • Any medications or solutions found unlabeled are immediately discarded.
NATIONAL PATIENT SAFETY GOAL #3
Use Medicines Safely

• Improve the safety of using medications

• Concentrated electrolytes have been removed from patient care areas.

• There are standardized Patient Controlled Analgesia (PCA) order, insulin and heparin protocols.

• Pharmacy annually reviews a list of look-alike/sound-alike drugs used at UWMC and takes actions to prevent errors involving the confusion of these drugs.

• Antithrombotic medications/agents current protocols, guidelines, recommendations and patient education materials are available at www.uwmcacc.org.
NATIONAL PATIENT SAFETY GOAL #3
Use Medicines Safely

• Improve the safety of using high-alert medications

• It is **UNACCEPTABLE to tape** the medication vial to the syringe that contains the medication.

• It is **UNACCEPTABLE to use** unlabeled medications during a procedure.
NATIONAL PATIENT SAFETY GOAL #3
Use Medicines Safely

• Reduce the likelihood of patient harm associated with the use of anticoagulation therapy

• Mandatory Nursing Training on the Heparin Protocol is available at CLINICAL TOOLS WEBSITE.

• The Heparin Protocol must be used for any heparin continuous infusion orders.

• Current protocols, guidelines and patient educational materials for all antithrombotic agents are available with links from the Patient Care Services CLINICAL TOOLS WEBSITE.
NATIONAL PATIENT SAFETY GOAL #3
Use Medicines Safely

• Maintain and communicate accurate patient medication information

• All patients visiting any clinic or admitted as an inpatient will have an updated home medication list in ORCA available for all staff to view. This list will be reviewed and updated at each clinic visit.

• All patients must have the following completed during their inpatient stay:

  1. Home Medications: Orders & Reconciliation for Admission
  2. Inpatient Transfer Orders/Medication Reconciliation Form
  3. Discharge Prescriptions

• Explain the importance of managing medication information to the patient when he or she is discharged from hospital or at the end of an outpatient visit.
NATIONAL PATIENT SAFETY GOAL #7
Prevent Infections

- **ALWAYS** practice the following hand hygiene rules:
  - Wash visibly soiled hands with soap and water.
  - Use hand gel or wash hands before and after touching patients, patient care equipment, the patient environment or wearing gloves.
NATIONAL PATIENT SAFETY GOAL #15
The organization identifies patients at risk for suicide

Patients presenting in the Emergency Department with behavioral or emotional disorders will be screened for risk of suicide
UNIVERSAL PROTOCOL
Pre-Procedure Verification Process

• Prior to starting the procedure, confirm the following as needed:

  • Verify the patient identity by using two patient identifiers
  • Verify the correct procedure and site
  • Site is marked
  • Check Allergy Profile
  • Relevant documentation available (i.e. history and physical) and matched to patient
  • Consent form signed
**UNIVERSAL PROTOCOL**
Pre-Procedure Verification Process
(continues)

- Applicable test results available and matched to patient
- Applicable blood, equipment, devices or implants available for the procedure
- Missing information or discrepancies are addressed before starting the procedure.
- The surgeon or physician marks the procedural site with their initials. The procedural site is marked before the patient is moved to the location where the procedure will be performed and takes place with the patient involved, awake and aware, if possible.
The billing provider or senior practitioner is responsible for leading the final verification/time-out.

The entire team uses active communication and verbally confirms the following prior to starting the procedure:

• Correct patient

• Correct procedure

• Correct site/side

• Correct Position

• Availability of special equipment or correct implants
UNIVERSAL PROTOCOL FINAL VERIFICATION

- An accurate procedure consent form
- Safety precautions based on patient history or medication use
- Relevant images and results are properly labeled and appropriately displayed
- The need to administer antibiotics or fluids for irrigation purposes
RESOURCES FOR PATIENT SAFETY
(1 OR 3)

STAFF CONTACTS:
It is important that staff discuss their concerns about the safety and quality of care provided at UWMC to supervisors, managers, and directors.

Issues of quality of care provided at UWMC may also be directly reported to:

**Patient Safety Officer**

Call Center for Clinical Excellence Office

Phone: 598-6843
Mobile: 604-5513

Report all cases of unanticipated death or major permanent loss of function due to a health care acquired infection to your supervisor and Healthcare Epidemiologist at 598-6122, or uwmnic@u.washington.edu
RESOURCES FOR PATIENT SAFETY
(2 OF 3)

If you have an ethical problem or concern:
1) Call the paging operator and ask for the ethics consultant on call: 598-6190
2) You will be contacted within 24 hours by the on-call ethics consultant to decide on the most appropriate way to deal with your concern.

These numbers can be found in the Information About Your Healthcare brochure.
PATIENT CONTACTS:
How patients can notify caregivers if they have concerns about their care

Patients can tell their caregivers if they have a concern about any part of their care by calling:

*Patient Relations:*
598-8382

Washington State Department of Health
1-800-633-6828
or
The Joint Commission (TJC):
1-800-944-6610
QUIZ INSTRUCTIONS

• Thank you for reading these materials.
• Your next step is to complete the quiz and check your answers.
• Please provide the completed quiz to your manager/supervisor, as evidence of completion.
• Your paper quiz will be manually entered in the LMS and show up in the completion reports after the quiz results have been submitted by your manager/supervisor to uwmclms@uw.edu.
• To satisfy the 2012 UWMC Annual Education requirements you must score 80% or better on all of the following quizzes:
  • Compliance & Ethics and Ethics
  • Cultural Diversity
  • Infection Prevention and Control
  • Organization Specific Topics
  • Patient Safety
  • Workplace Safety