



Welcome to Nursing Student Orientation

2023- 2024

It is our hope that in addition to meeting all regulatory requirements, Education be a positive, informative experience. We welcome your ideas to improve all aspects of the process.

If you experience any difficulties, please contact The Learning Center (8-6841) and we will be happy to assist you.

Mission

Our communities expect and deserve superior medical treatment, compassionate care and expert guidance in maintaining their health and well-being.

At Carroll Hospital, we offer an uncompromising commitment to the highest quality health care experience for people in all stages of life. We are the heart of healthcare in our communities.

Vision

Carroll Hospital is a portal of health and wellness.

We take responsibility for improving the health of our population through care management and delivering high-quality, low-cost services in the most appropriate settings.

We engage our community at all points of care and promise to provide a seamless healthcare experience.

Reminders

- **Parking** is in the garage/designated areas
Park in appropriate areas.
- **Smoking** is prohibited on any
LifeBridge Health campus.



Safety on the Campus



- Please obey all traffic signs!
- Register vehicles
- Lock your vehicle and secure your belongings
- Don't leave valuables in plain sight
- Pay attention to your surroundings



Use Emergency Call Boxes for emergencies and accidents



Code of Conduct

- The Government has laws in place to prevent healthcare fraud and breach of patient confidentiality, HIPPA (Health Insurance Portability & Accountability Act).
- This code describes general guidelines for associates, students, volunteers, physicians, vendors and affiliated organizations on laws and policies affecting their professional activities.
- The Code of Conduct should help you understand what is expected of you at this student rotation site.

Guidance on Behavior

- Maintain associate and patient privacy
- Protect confidential information
- Avoid inappropriate use of technology
- Respect intellectual property
- Control costs
- No personal use of hospital property
- No solicitation

Guidance on Behavior

- Do not discriminate or harass
- Prevent workplace violence
- Drug-Free, Smoke-Free workplace
- Care for health and safety
- Proper disposal of medical waste
- Communicate with Public through proper channels
- Limit on gifts

Maintain Associate and Patient Privacy

- As students in a healthcare organization, you hear and see information about patients, associates and outside agents every day
- This information is confidential and needs to remain so
- Access to personal information is limited to individuals with a clear professional need to know

Protect Confidential Information

- Avoid inadvertent disclosure of confidential business information.
- You are responsible for protecting confidential information that you may have acquired here at Carroll Hospital.
- Confidential information includes; Medical records, Business plans, Financial statements, Marketing and Sales programs, Business methods, Prospective supplies, or customers and human resource information relating to wages, benefits and disciplinary actions.

Respect Intellectual Property

We must respect copyright laws; therefore, we cannot reproduce, distribute or alter in any way, material that is copyrighted without express written consent of the owner (another example is software licensing).

Control Costs

We cannot compromise our patient care but should bear in mind that cost efficiencies are essential to our ability to continue to deliver healthcare.

No Personal Use of Hospital Property

Our assets are intended to assist us in performing our duties while at Carroll Hospital and should not be utilized for personal reasons.

Do Not Discriminate or Harass

- We recognize and respect the uniqueness of all patients, students, associates, volunteers and others and prohibit all forms of discrimination.
- Examples of inappropriate behavior include: jokes, slurs, derogatory comments that are racist, ethnic or sexist.
- Sexual harassment can be difficult to define. What is funny to one person may not be to another. Examples of sexual harassment include unwanted advances or touching, dirty language or jokes. Be cautious and always use good taste, never risk offending someone.

Prevent Workplace Violence

- We must make every effort to resolve conflicts in a reasonable and rational manner.
- When individuals are unable to resolve differences in a professional and mature manner, we expect students to inform their preceptor.

Drug-Free, Smoke-Free Workplace

- Abuse of drugs (legal and illegal) and alcohol can interfere with the safety and well being of patients, the public and fellow students/associates.
- The use, selling, purchasing, possession or transfer of illegal drugs and the abuse of alcohol or legal drugs is prohibited.
- We are also committed to a healthy smoke-free environment.

Care for Health and Safety

- We are dedicated to creating and maintaining a safe work environment that is free of unreasonable hazards and in compliance with workplace health and safety laws.
- It is the student's responsibility to contribute to creating and maintaining their safe environment by wearing proper safety equipment, identifying and reporting potential safety hazards.
- You should notify your preceptor of any safety issues so they can be quickly and appropriately addressed.

Communicate with Public Through Proper Channels

- All requests for information from reporters or the general public should be referred to the marketing/public relations department.
- Students should never release information without permission.

Limit on Gifts

- Students should never offer, give or accept any benefits such as incentive, gifts, discounts or rewards from patients, suppliers or distributors that are beyond generally accepted practices.
- Items considered UNACCEPTABLE include benefits, incentives, gifts and rewards which the recipient does not pay fair market value.
- Small gifts such as flowers or cookies are tokens of appreciation and are acceptable.
- Any questions concerning whether a gift is appropriate should be directed to your preceptor.

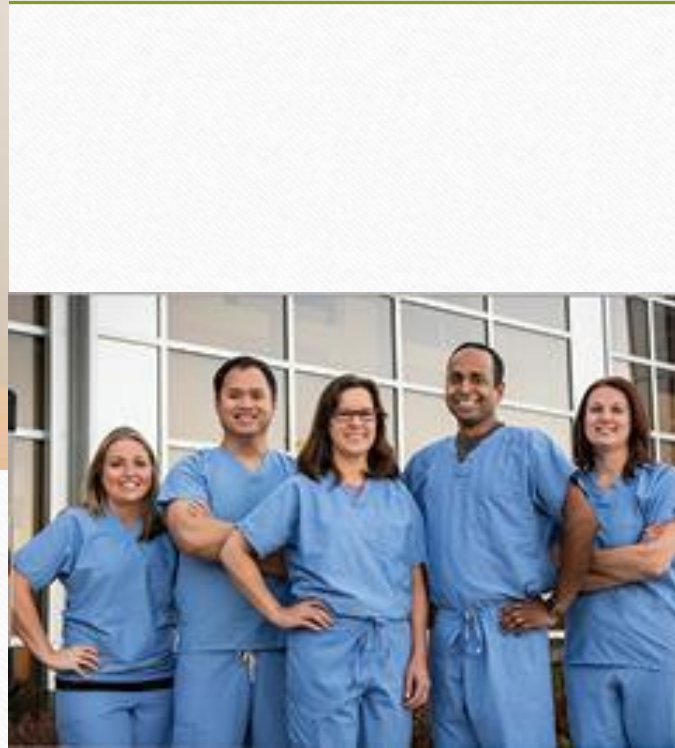
Getting Help and Reporting Problems

It is always better to ask a question if the ethical or lawful answer is not clear than to risk getting it wrong.

Dress Code

- If you need to come in for an assignment dress in casual clothing (no jeans, no offensive logos) or wear a school approved uniform with your student badge visible.
- Cell phones are to be silenced while at the hospital.
- Closed toe shoes are required. If you arrive for your clinical experience in shoes that are not appropriate, you will be asked to leave.

Customer Satisfaction is Everyone's Job!



Make Customers Feel Welcome

- Introduce yourself, smile, make eye contact
- Acknowledge customer in passing, whenever possible
- Call the customer by name, use first name only with permission, refrain from endearments

Follow the “10 Foot Rule”

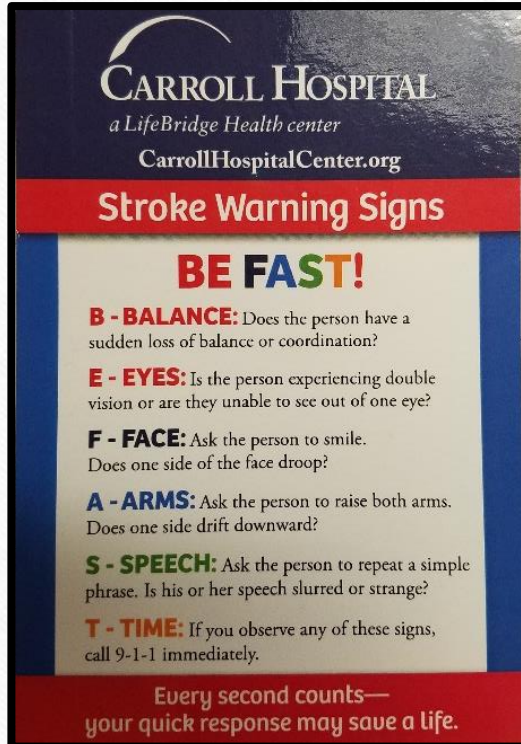
- Greet customers who come within 10 feet of you
- If they appear to need assistance ask, “May I help you?”
- If turned down respond, “I’ll be here if you change your mind”



Primary Stroke Center: Did you know?

- Stroke is the 5th Leading Cause of Death in the United States
- Stroke occurs every **40 SECONDS**
- Carroll Hospital is a designated Primary Stroke Center
- Quick Recognition leads to quicker treatment which can lead to better outcomes

Inpatient Stroke Process



CARROLL HOSPITAL
a LifeBridge Health center
CarrollHospitalCenter.org

Stroke Warning Signs

BE FAST!

B - BALANCE: Does the person have a sudden loss of balance or coordination?

E - EYES: Is the person experiencing double vision or are they unable to see out of one eye?

F - FACE: Ask the person to smile. Does one side of the face droop?

A - ARMS: Ask the person to raise both arms. Does one side drift downward?

S - SPEECH: Ask the person to repeat a simple phrase. Is his or her speech slurred or strange?

T - TIME: If you observe any of these signs, call 9-1-1 immediately.

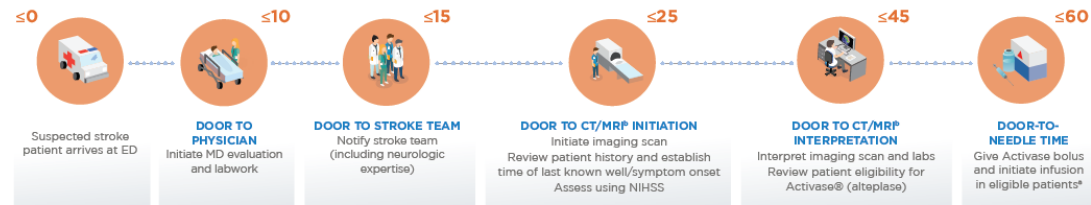
Every second counts—
your quick response may save a life.

- If you identify a neurologic change in your patient such as:
- **B**-balance-loss of balance or coordination
- **E**-eyes- loss of vision, double vision
- **F**-facial droop present
- **A**-arm drift or weakness or leg weakness
- **S**-slurred Speech
- **T**-time to call a Stroke alert

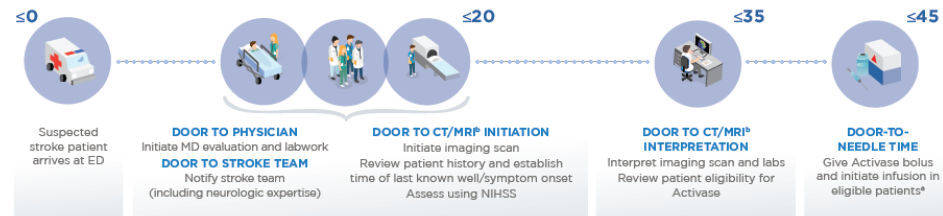
Call 8-4444 for a Stroke Alert

GUIDELINES FOR ACHIEVING DOOR-TO-NEEDLE IN 60 MIN OR LESS

DOOR-TO-NEEDLE IN ≤60 MIN^{1,2}



DOOR-TO-NEEDLE IN ≤45 MIN³



Primary RN Needs to Stay with the Patient

You know “the story”..... Give report to the CCU Resource RN

- What are the neuro changes?
- When was the patient last seen well?
- What's the patients Blood Sugar (needs to be checked)?
- What medications is the patient on?
- What's the patients Code status?

Stroke Alert Process

Patient Needs to get to CT ASAP!

Stroke Alert Head CT's are all read STAT and the Radiologist must call results to ordering Provider

- Orders must be placed for Stroke Alert Head CT and Labs
- The Intensivist or Hospitalist have the ability to reach out telephonically to a Brain Attack Physician (BAT) to discuss the patient
- We also have the capability to do a video consult with the BAT team
- BAT MD's have access to review our Stroke Imaging in real time

Dysphagia Screening



- RN completes dysphagia screening on all admitted patients, including Observation patients regardless of diagnosis
- If you don't see where this was completed ask and then complete the screening if necessary (no physician order is needed)
- Complete this prior to anything PO; meds, drinks, food, oral contrast
- Complete the screening anytime you notice a neuro change
- If the patient fails the screening make them NPO and get a Speech Therapy Consult

Goals of Stroke Evaluation

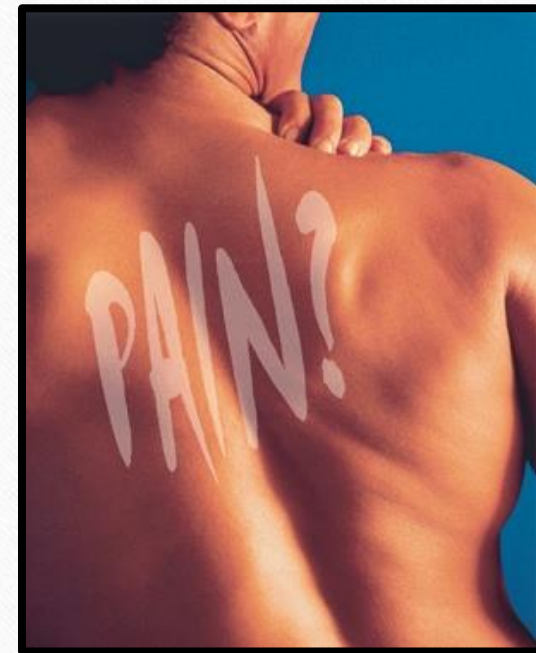
- High quality care
- Is tPA needed?
- Does the patient have a large vessel occlusion? If so transfer for Endovascular Therapy
- Meet our Registry and Electronic Quality Measures



Click on this video to see why we do what we do.

Pain Management

Here at Carroll Hospital, we try to be prompt in responding to a patients' complaint of pain. We utilize a pain scale and medicate as indicated. Once medication has been given, we re-assess and document the patients pain (using the same pain scale) within one hour.



Protective Management: Restraints and Seclusion

Our policy promotes the patients right to be free from restraints and seclusion.

When restraints or seclusion are used, they must be clinically appropriate/justified.

Non-Violent	Violent
Wandering patient	Patient who is a danger to self (accidental/self-mutilation)
Cooperative but disoriented patient	Patient who is a danger to others
Patient is weak or unsteady on their feet	Patient who is causing serious property damage
	Patient who is at risk for unauthorized departure

Medication Safety: Pharmacy at Carroll Hospital

- Decentralized with Pharmacists on the floor M-F
- Weekends: Central Pharmacist
- ED: Pharmacy Technician for Med Histories
- Dosing Service
- Medication to bedside delivery, “Meds to Beds”



Medication Errors- Why?

“Medication errors happen because of breakdowns in systems that have been developed for handling and processing drugs, from prescribing and ordering to distribution and administration.”

From Preventing Medication Errors –
Edited by Michael R. Cohen

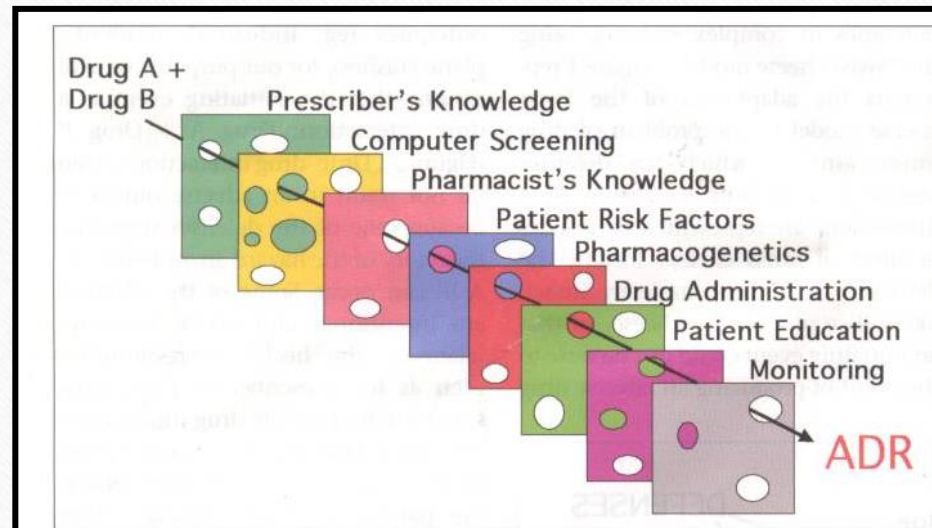


Figure 3—Sometimes “the holes line up,” and the hazard arrow can penetrate each of the defenses unimpeded. Each defense also has other holes, which are called latent failures. These are gaps in the defenses that are not involved in the interaction between Drug A and Drug B, but rather would come into play with other drug interactions. As such, they are accidents waiting to happen. ADR = adverse drug reaction.

ADE and Safety Hotline: Ext. 8-7233

CARROLL HOSPITAL
A LifeBridge Health Center **CARE BRAVELY**

QUICK LINKS
API || Citrix || Outlook Q || HBI Dashboard || ReadySet || My LBH Pay || Infor GHR || LBH Payroll || MPV
Lawson || DBs & Surveys || Physician Documents || Physician Feedback || MPF || RelayHealth || Phone Directory
Tableau || Work Request || Flu Absence Tracking || Healthstream LMS || MSDS Online || LifeBridge Intranet

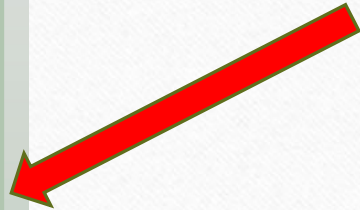
Departments:

Business Development	Alteon Hospitalists	Behavioral Health Resources	Bright Ideas	Carefusion Feedback	Cerner	Clinical Ladder
Carroll Health Group	Community Benefit Worksheet	Contract Management	EBSCO Nurse Resource Center	Emergency Management	Emergent Care Committee	Engagement
Case Management	Enterprise Data Governance	Forms	GetWell! Network	Green Team	Happenings	Incident / Safety Reporting
Community Partnership	InterQual View	Joint Commission / CMS Standard	Journey To Excellence	Just Culture	LB Points	Lean / Operational Excellence
Compliance	Maps	Make a Gift	Medical Library	Medical Abbreviations	Milliman Care Guidelines	Mission, Vision, Values
Emergency Department	MOLST	Nursing Resources	Office 365 Apps and Info	Paragon FAQ	Patient Communication	Patient Satisfaction
Family Birth Place	Policies, Procedures, & Care Guidelines	Privileges	Quality Dashboard	Recognition -- WOW Nominations	Safety	Sepsis
Finance	Stroke	Subway	Videos	Vision 2020	Visitation Information	

Currently **75°F** Overcast Tomorrow **High 85°F** Low **69°F**

forecast provided by **wu** WEATHER UNDERGROUND
[Click for weather forecast](#)

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Be Careful of Look alike Sound alike Drugs!

High Alert Drugs

We are **Medication Safety** formerly A-Chicken

C = Controlled substance continuous infusion, Chemotherapy
CONTROLLED SUBSTANCE DANGEROUS UNLESS USED AS DIRECTED

H = Heparin

A = Alteplase, Antiplatelet, Anticoagulant

M = Magnesium (L&D ONLY)

P = PCA & PCEA

I = Insulins, Intravenous Total Parenteral Nutrition (TPN)

N = Oxytocin

S = Narcotics, Neuromuscular blocking agents

S = Sodium Chloride greater than 0.9% [Na+].[Cl-]



RRT Exceptions!

- Due to strict regulations from Medicare which **MANDATE** that the Cardio-Pulmonary Rehabilitation have emergency access to a Physician, the Pulmonary Rehab department will call a **Rapid Response**.
- Unlike inpatient RRT's, these patients will be taken to the ED for final management and disposition.
- Outpatient Infusion Center will call 911 if there is an emergency.
- These departments may also call a Code Blue depending on the situation. Since transport to the ED may also be necessary a Code Emergency Response may be initiated to expedite safe transfer to the ED as needed.

Code Emergency Response

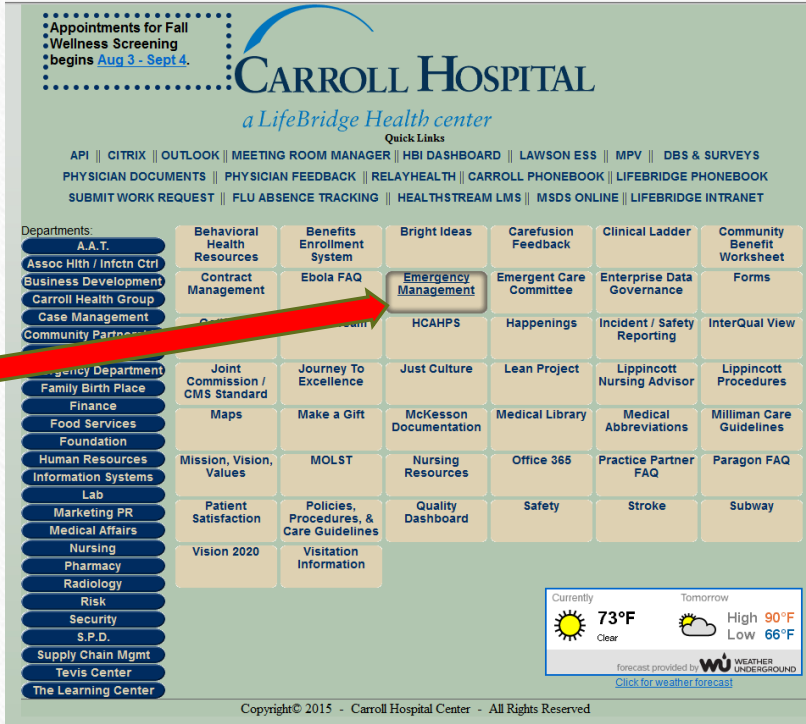
- Staff, Visitor, or Outpatient in need of medical assistance
- Ensures that all individuals requiring emergency care, who are located on the hospital campus, receive care in a well-coordinated manner



Emergency Management Plan

Emergency documents can be easily accessed via the Hospital's Intranet

Click on the Emergency Management button on the Home Page to access these documents!



Appointments for Fall Wellness Screening begins Aug 3 - Sept 4.

CARROLL HOSPITAL
a LifeBridge Health center

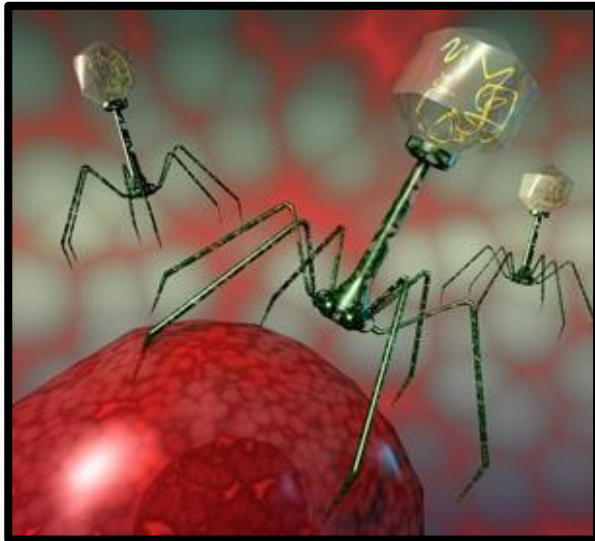
Quick Links
 API || CITRIX || OUTLOOK || MEETING ROOM MANAGER || HBI DASHBOARD || LAWSON ESS || MPV || DBS & SURVEYS
 PHYSICIAN DOCUMENTS || PHYSICIAN FEEDBACK || RELAYHEALTH || CARROLL PHONEBOOK || LIFEBRIDGE PHONEBOOK
 SUBMIT WORK REQUEST || FLU ABSENCE TRACKING || HEALTHSTREAM LMS || MSDS ONLINE || LIFEBRIDGE INTRANET

Departments	Behavioral Health Resources	Benefits Enrollment System	Bright Ideas	Carefusion Feedback	Clinical Ladder	Community Benefit Worksheet
A.A.T.	Contract Management	Ebola FAQ	Emergency Management	Emergent Care Committee	Enterprise Data Governance	Forms
Assoc Hlth / Infctn Ctrl			HCAHPS	Happenings	Incident / Safety Reporting	InterQual View
Business Development	Joint Commission / CMS Standard	Journey To Excellence	Just Culture	Lean Project	Lippincott Nursing Advisor	Lippincott Procedures
Carroll Health Group	Maps	Make a Gift	McKesson Documentation	Medical Library	Medical Abbreviations	Milliman Care Guidelines
Case Management	Mission, Vision, Values	MOLST	Nursing Resources	Office 365	Practice Partner FAQ	Paragon FAQ
Community Partners	Patient Satisfaction	Policies, Procedures, & Care Guidelines	Quality Dashboard	Safety	Stroke	Subway
Emergency Department	Vision 2020	Visitation Information				
Family Birth Place						
Finance						
Food Services						
Foundation						
Human Resources						
Information Systems						
Lab						
Marketing PR						
Medical Affairs						
Nursing						
Pharmacy						
Radiology						
Risk						
Security						
S.P.D.						
Supply Chain Mgmt						
Tevis Center						
The Learning Center						

Currently: 73°F Clear
 Tomorrow: High 90°F Low 66°F
 forecast provided by WU WEATHER UNDERGROUND
[Click for weather forecast!](#)

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Infection Control



Standard Precautions and Transmission-Based Precaution guidelines and signage still present a challenge throughout the organization.

Everyone must abide by the standards identified on the Infection Control signs!

5 Standard Precautions to Prevent the Spread of Infection

These Precautions Apply to ALL Patients!

1. Practice PROPER HAND HYGIENE

- When hands are visibly soiled, wash with soap and water.
- Before and after patient care, use alcohol foam or antimicrobial soap and water.

2. Use Personal Protective Equipment (PPE)

You must wear PPE when possible contact or splash with blood or body fluids may occur.

Wear PPE such as gloves, gowns, mouth, nose, eye protection appropriate to task:

- When accessing a vein or artery, you must wear gloves.
- For contact with mucous membranes, non-intact skin and potentially contaminated intact skin, wear gloves.

Remember to wash hands after removing PPE!

3. Practice Respiratory Etiquette

Teach everyone with respiratory symptoms to:

- Cough and sneeze into their sleeves, or
- Use and dispose of tissues
- Practice good hand hygiene

4. Be Cautious with Sharps

- Take extreme caution when handling needles, scalpels and sharp instruments.
- Carefully dispose of all sharps in sharps containers.

5. Keep Your Environment Clean

Clean and disinfect surfaces likely to be contaminated with harmful organisms, particularly those in close proximity to patients.



Transmission-Based Precautions Require:

- Patients to be placed in a private room
- Appropriate precautions sign on the door frame
- PPE (gowns, gloves, masks) in caddy on the door or on the cart

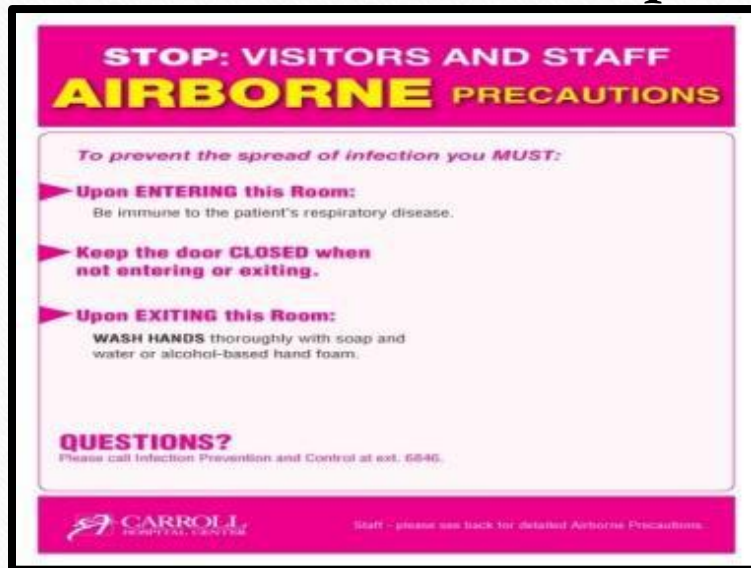
Airborne Precautions

Droplet Precautions

Contact Precautions

Airborne Precautions

For Measles/Chickenpox




STOP: VISITORS AND STAFF
AIRBORNE PRECAUTIONS

To prevent the spread of infection you MUST:

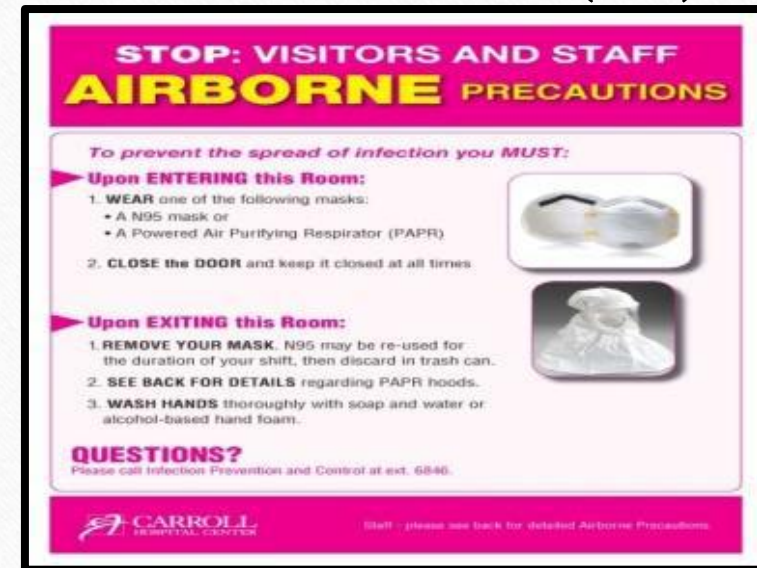
- ▶ **Upon ENTERING this Room:**
Be immune to the patient's respiratory disease.
- ▶ **Keep the door CLOSED when not entering or exiting.**
- ▶ **Upon EXITING this Room:**
WASH HANDS thoroughly with soap and water or alcohol-based hand foam.

QUESTIONS?
Please call Infection Prevention and Control at ext. 6846.

 **CARROLL HOSPITAL CENTER** Staff - please see back for detailed Airborne Precautions.

Persons entering the room **MUST** be immune to measles or chickenpox.

For Tuberculosis (TB)






STOP: VISITORS AND STAFF
AIRBORNE PRECAUTIONS

To prevent the spread of infection you MUST:

- ▶ **Upon ENTERING this Room:**
 1. **WEAR** one of the following masks:
 - A N95 mask or
 - A Powered Air Purifying Respirator (PAPR)
 2. **CLOSE the DOOR** and keep it closed at all times.
- ▶ **Upon EXITING this Room:**
 1. **REMOVE YOUR MASK.** N95 may be re-used for the duration of your shift, then discard in trash can.
 2. **SEE BACK FOR DETAILS** regarding PAPR hoods.
 3. **WASH HANDS** thoroughly with soap and water or alcohol-based hand foam.

QUESTIONS?
Please call Infection Prevention and Control at ext. 6846.

 **CARROLL HOSPITAL CENTER** Staff - please see back for detailed Airborne Precautions.



For suspected or known TB patient, people entering the room must wear an N-95 or PAPR

Contact Precautions

STOP: VISITORS AND STAFF
CONTACT PRECAUTIONS

To prevent the spread of infection you MUST:

▶ **Upon ENTERING this Room:**

WEAR the following:

1. Isolation Gown *and*
2. Gloves



▶ **Upon EXITING this Room:**

1. **REMOVE YOUR GOWN AND GLOVES** immediately and discard in a waste can. *Do not reuse!*
2. **WASH HANDS** thoroughly with soap and water or alcohol-based hand foam.



QUESTIONS?
Please call Infection Prevention and Control at ext. 6846.

 **CARROLL HOSPITAL CENTER** Staff - please see back for detailed Contact Precautions.


For patients with MRSA, VRE, and other highly antibiotic-resistant organisms, RSV, Scabies, etc.

Contact Precautions: Enhanced Contact


**STOP: VISITORS AND STAFF
ENHANCED CONTACT
PRECAUTIONS**

To prevent the spread of infection you MUST:

Upon ENTERING this Room:
WEAR the following:
1. Isolation Gown and
2. Gloves




Upon EXITING this Room:
1. **REMOVE YOUR GOWN AND GLOVES** immediately and discard in a waste can. *Do not reuse!*
2. **WASH HANDS** thoroughly with soap and water. **DO NOT** touch other team.



Staff – Room must be cleaned using bleach after patient is discharged or after Precautions are discontinued.

QUESTIONS?
Please call Infection Prevention and Control at ext. 6846.

 **CARROLL HOSPITAL CENTER**
Staff - please see back for detailed Enhanced Contact Precautions.


- For patients with Clostridium difficile (C.Diff.)
- Wash hands thoroughly with soap and water only.

Droplet Precautions

STOP: VISITORS AND STAFF
DROPLET PRECAUTIONS

To prevent the spread of infection you MUST:


Upon ENTERING this Room:
WEAR a SURGICAL MASK (preferably with a face shield)



Upon EXITING this Room:

1. **REMOVE YOUR MASK** immediately and discard in a waste can.
2. **WASH HANDS** thoroughly with soap and water or alcohol-based hand foam.

QUESTIONS?
Please call Infection Prevention and Control at ext. 6846.

 **CARROLL HOSPITAL CENTER** Staff - please see back for detailed Droplet Precautions.

For patients with influenza, bacterial meningitis, pertussis, or RSV, a surgical tie mask preferably with face shield is recommended

NOTE: Patients with RSV also need to be placed in **Contact Precautions**

COVID-19 Precautions

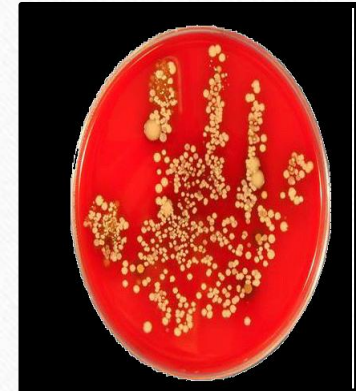
- Staff will use specific guidelines when caring for COVID + patients or Patients Under Investigation (PUI)



Reducing Healthcare Associated Infections

Associates must wash hands or apply a waterless hand antiseptic:

- Before having direct contact with a patient
- Before putting on sterile gloves to insert catheters or other invasive devices
- After any contact with a patient, including intact skin (taking a pulse, BP, or lifting a patient, etc.)



Associates **MUST** Wash Hands or Apply a Waterless Hand Antiseptic:

- After contact with body fluids or excretions, mucous membranes, non-intact skin, and wound dressings, even if hands are not visibly soiled
- When moving from a contaminated-body site to a clean-body site during patient care
- After contact with inanimate objects in the immediate vicinity of the patient
- After using a computer keyboard and/or mouse and before patient contact
- After removing gloves



Hand Hygiene

Hand Hygiene Guidelines Staff must wash hands with **soap and water**:

- When hands are visibly soiled
- After using a restroom
- After caring for a patient with *C. difficile*



Corporate Compliance

- All Jump Drives (USB, Thumb drives, Flash drives, Memory sticks, etc) must be cleared through IS (Information Systems) before used by Associates, Physicians or Outside speakers.
- You **MUST** minimize or sign off a computer when there is the potential for others to see information.
- Everyone has the responsibility to protect PHI (Patient Health Information). This can be verbal, electronic or written. Never use this as scrap paper. Be aware of how you dispose of any paper with PHI on it!!

Corporate Compliance

- Do NOT access any information, especially a patient's chart, unless you have a work-related reason to be there.
- Armbands for HIPAA/OPT-OUT privacy issues are clear with "PRIVACY" written in black.

Patient Safety and Joint Commission

Your role:



You are an Advocate For Patient Safety!

The Institute of Safe Medication (IOM) reports there are 44,000-98,000 deaths/year from medical errors! This equals the number of deaths from one 747 airplane crashing everyday for 1 year. Medical errors are the **6th** leading cause of death.

IOM “To Err is Human” (1999)



Joint Commission



In 2002, Joint Commission established National Patient Safety Goals (NPSG) to help educate Healthcare personnel on Medical Errors. The Joint Commission developed Standards of Practice that must be consistently met. Each Patient Safety Goal comes from a Nationally Reported Sentinel Event. A Sentinel Event is when a patient is severely harmed or dies.

Next we will review the National Patient Safety Goals



Identify Patients Correctly

Use at least **TWO** ways to Identify Patients!

1



2

Ask the Patient their
Name and Date of Birth

Improve Staff Communication

- Get important test results to the right staff person on time
- Report abnormal test results
- Bedside Handoff reporting
- Suicide risk patients? Have we taken all the proper precautions?



Use Medication Safely



- Before a procedure, label medications that are not labeled. *For example, medicines in syringes, cups and basins. Do this in the area where medicines and supplies are set up.*
- Take extra care with patients who take medications to thin their blood.
- Record and pass along correct information about a patient's medications. What medications is the patient taking? Compare those to the new medications given to the patient. Make sure the patient knows which medications to take when they are at home. Tell the patient it is important to bring their up-to-date list of medications every time they visit a doctor.

Use Alarms Safely



Make sure that all alarms on medical equipment are heard and responded to in a timely manner.

Prevent Infection

Use	Use the hand cleaning guidelines from the Centers for Disease Control and Prevention or the World Health Organization. Set goals for improving hand cleaning. Use the goals to improve hand cleaning.
Use	Use proven guidelines to prevent infections that are difficult to treat.
Use	Use proven guidelines to prevent infection of the blood from central lines.
Use	Use proven guidelines to prevent infection after surgery.
Use	Use proven guidelines to prevent infections of the urinary tract that are caused by catheters.



Prevent Mistakes in Surgery

- Make sure that the correct surgery is done on the correct patient and at the correct place on the patient's body.
- Mark the correct place on the patient's body where the surgery is to be done.
- **Pause** before the surgery to make sure that a mistake is not being made.



Hand-off Communication

...is mandated by the Joint Commission. It is a team effort that helps to maintain patient safety.



Hand-Off Between Caregivers



- Ticket to Ride
- Passport to Surgery
- Pre-Op Checklist
- SCIP

Ticket To Ride

- This form is used when a patient is taken off unit for a test, transfer room, surgery etc.
- The nurse generates the form in Cerner
- The form is completed legibly in “real time”
- The Nurse completes the form and gives to the Transport associate
- This form will be used in all areas of the hospital



Ticket to Ride:

The sending nurse initiates the form in Cerner.

For Cerner Medical Chart under the Miscellaneous Tab
Permanent part of the Medical Record

TICKET TO RIDE

Name: _____ DOB: _____
 MRN: _____ Admit Date: _____
 Location: _____ Attending Dr: _____
 Service: _____

Allergies: codeine, oxyCODONE, OxyCONTIN
 Reason For Visit: REVERSE SHOULDER

Level of Consciousness: _____ 02/07/19 07:56:00 Alert

Patient Care 02/07/19 07:20
Resuscitation Status 02/07/19 7:20:00, Full Resuscitation, MOLST Form

HR: 91 02/07/19 06:55:00 **BP:** 102/62 02/07/19 06:55:00 **RR:** 18 02/07/19 06:55:00 **TEMP:** _____

Destination: _____ **Transporter Initials:** _____

Sending Unit Nurse _____ / _____ / _____ / _____
 PRINTED Name / Phone#/Vocera# / Date / Time

Pertinent Patient Information (please circle appropriate response)
 NPO Diet Status Yes No For this Test Only
 Patient Hard of Hearing Yes No
 Known Pressure Areas Yes No If yes, specify: _____

Additional Information: _____

Returning Clinician _____ / _____ / _____ / _____
 PRINTED Name / Title / Phone#/Vocera# / Date / Time

Most recent vitals*: HR _____ BP _____ RR _____ TEMP _____
 *attach EKG strip to back of page if applicable

Comments: _____

Ticket to Ride: Upon Return to the “Home Unit”

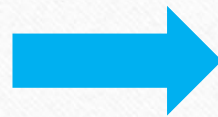
- The returning clinician completes the bottom of the form
- Print Name-
 - ✓ Phone/Vocera # -Date/Time
 - ✓ Most recent vitals
 - ✓ Any Comments
- The form is placed in the patient’s hard copy medical record under the Miscellaneous tab
- Maintained as a permanent part of the medical record



2022 National Patient Safety Goals



Here are several links to help you review Joint Commission and the National Patient Safety Goals



- [Hospital: 2022 National Patient Safety Goals | The Joint Commission](#)
- [G:\Users\SHARED\pharmacy\rx 3webdocs\LASA 2021 LBH.pdf](#)

Additional Goals at Carroll Hospital

- Encourage patients to report safety concerns. On admission, patients and families are made aware how to report safety concerns. For example, calling for the Rapid Response Team (RRT).
- Encourage patients & families to ask for assistance when their condition gets worse. Don't hesitate to ask for assistance if you see a patient getting worse.



Universal Protocol

Universal Protocol focuses on safety for all surgical & non-surgical invasive procedures. It promotes “right site-right patient” surgery.

Take a Time Out!



After years of working on safety, the airline industry has become very safe. Our goal is to make Carroll Hospital extremely safe too!



Reporting Safety Issues

- **You** are instrumental to keep our hospital safe.
- Whenever you see an unsafe condition, report it to your Supervisor, call the Safety Hotline at 86909, or record it under “Incident Reporting” on the intranet.
- **Don’t wait for someone to get hurt.**



We Impact Our Patients

First Touch.....

Last Touch.....

Heart to Heart.....

