



St. Elizabeth  
HEALTHCARE

***Patient Safety***  
***It Takes a Team!***



# Patient Safety



✚ **Definition:** Freedom from accidental injury

✚ ~ *Definition from the Institute of Medicine*

✚ **Actuality:** A study in the September 2013 Journal of Patient Safety estimates that 400,000 people in the USA die each year due to preventable adverse events at U.S. hospitals

**This is not what we want for our patients,  
our loved ones, ourselves.**

# Team Techniques for Safety



✚ **TEAMWORK** is the door to safety.

✚ **COMMUNICATION** is the key.



COMMUNICATION & TEAMWORK

# Team Techniques for Safety



✚ Techniques St. Elizabeth is using to **improve team communication** include:

- ✚ checklists
- ✚ structured communication techniques
- ✚ regular visual inspections
- ✚ simulation training



# Team Techniques for Safety



## ✚ Checklists

- ✚ Pre-procedural checklists and the “Ticket-to-Ride” checklist.

- ✚ “Time out” before invasive procedures. Everyone stops and listens to an out-loud confirmation of correct patient, correct procedure, & correct location

Fewer medical errors.



# Team Techniques for Safety



- ✚ Good communication with the patient also reduces errors.
- ✚ **AIDET** is a five-step communication technique that has been proven to provide **higher quality of care** and **better clinical outcomes**.
  - ✚ **A** — Acknowledge the patient
  - ✚ **I** — Introduce yourself and your skill
  - ✚ **D** — Communicate duration of test, treatment or wait
  - ✚ **E** — Explain tests, treatment, next steps, etc.
  - ✚ **T** — Thank you



# Team Techniques for Safety



## # Visual Inspections

- # Preventive maintenance inspections, bedside change of shift report, and hourly patient rounding with the CARE checklist are key opportunities to visually inspect the environment and the patient.
- # These improve patient safety by:
  - # preventing equipment failure
  - # decreasing falls, etc.

## # Simulation Training

- # St. Elizabeth does interdisciplinary simulation training using lifelike high-tech manikins.



# Culture of Team Safety



- ✚ We have been talking about safety **KNOWLEDGE** and **SKILLS**
- ✚ A third component of a safe team is **ATTITUDE**, probably even more important than knowledge and skills. Team attitude for safety means “Everyone is empowered to act.”



All three together are referred to by safety experts as **a culture of safety.**





# Protecting Patients From Falls !It Takes A Team!

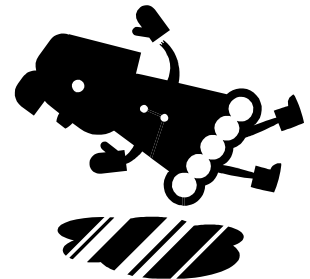


# Falls Reduction

- **Goal:** to minimize risk of falls without compromising patient mobility and functional independence
- **Responsibility:** All associates
- **Definition of a patient fall:** an unplanned, unassisted descent to the floor or extension of the floor, e.g., trash can or other equipment, with or without injury to the patient

# Why Preventing Falls is Important

- Falls are among the most common hospital adverse event reported
- Falls are a leading cause of death in people ages 65 and older
  - 1 in 3 adults 65 and older fall each year
- Falls and injuries sustained by falling add to patient misery, length of stay, and hospital costs



# Protecting our Patients from Falls

Protecting our patients from falls is  
everyone's responsibility

- **Three key steps:**

- ✓ Be aware of environmental causes
- ✓ Notice when a patient is at risk
- ✓ **TAKE ACTION** to prevent the fall



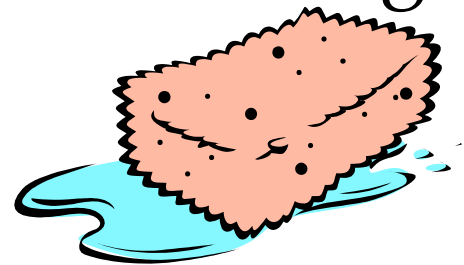
# Be Alert to Environmental Causes

- ✓ Poor lighting/bulbs burned out
- ✓ Loose handrail
- ✓ Leaking, dripping faucets
- ✓ Water or food spills on floor
- ✓ Cluttered room or common area
- ✓ Wheels on beds/chairs not locked
- ✓ Bed in high position
- ✓ Cords/wires in the way
- ✓ Loose floor tiles
- ✓ Trash on the floor



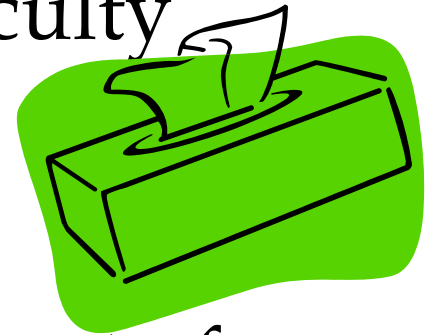
# Take Action!

- ✓ Notify Maintenance about needed repairs, light bulbs to be replaced
- ✓ Immediately wipe up small spills
  - ✓ Use gloves! Always protect yourself first.
- ✓ Contact environmental services for larger spills
- ✓ Empty overflowing trash
- ✓ Move frequently used items closer to the patient



# Notice the Patient at Risk of Falling

- Patient unsteady when walking
  - Patient attempting to get out of bed by him/her self and having difficulty
  - Patient appears confused
  - Frequently used items such as tissues and nurse call light out of easy reach
- ✓ Provide Assistance!



# Be Alert to Patients at Risk of Falling

Watch for a yellow arm band

- The patient will have a yellow arm band
  - If they are admitted as a result of a fall, or
  - If they have fallen in the hospital.

**ALERT!!!**  
Patient Has Fallen  
Yellow Arm Band



**Everyone should be on alert for patients at risk.**

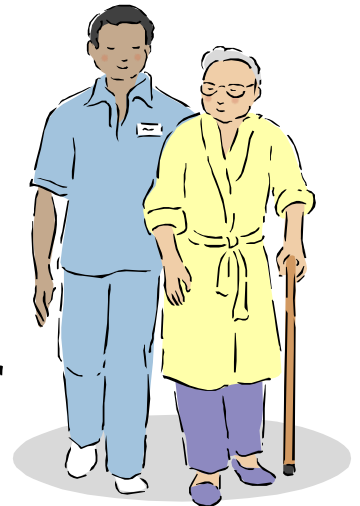


# Take Action!

If you notice a patient having difficulty getting out of bed or walking....

**“Please sit down and I will get a nurse or an aide to help you.”**

- Then use the call light. Please stay with the patient until the nurse or aide come.
- ✓ Don't be afraid to let nursing know that you think a patient might be at risk for falling and ask them to intervene.
- ✓ Keeping our patients safe takes all of our eyes and ears and effort.



# Taking Action: Be Part of the Team

- Notify the nursing staff—they will be grateful for your help
- Participate in the post fall huddles



**It takes a team to prevent falls!**



**Safe Movement And  
Responsible Transfer**

# What is “SMART”?

A safe patient handling program that:

- uses special ergonomically designed equipment to lift and reposition patients
- enhances the level of care administered to our patients by our patient care staff
- decreases manual lifting

SMART reinforces St E's culture of providing the highest quality care within the best working environment

# Examples of Equipment



**Maxi Sky**



**Maxi Slide**



**Maxi Move**

# Examples of Equipment

## Stedy



## Sara Plus



# Program Benefits

- Consistency of care
- Fewer patient injuries – *increases safety*
- Patient dignity is protected
- Contributes to patient comfort
- Reduces patient wait time
- Increases patient satisfaction
- Fewer associate injuries

# Program Results

SMART has and will continue to reduce injuries to associates while assuring safety to our patients

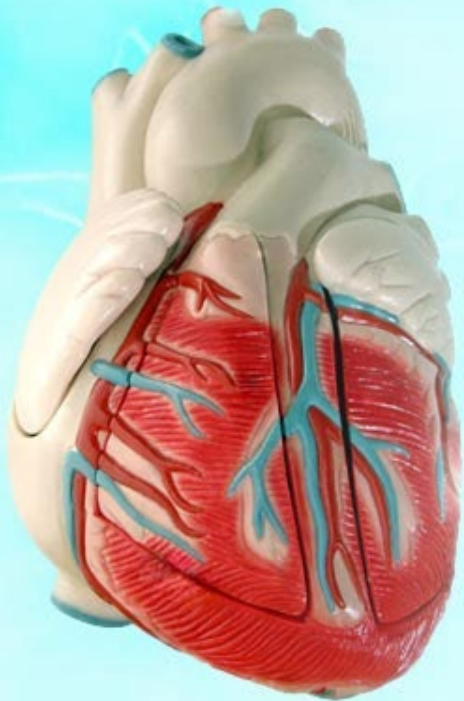
- In **2009 20%** of employee injuries were caused by patient handling
- In **2013** that number decreased to **4%!**





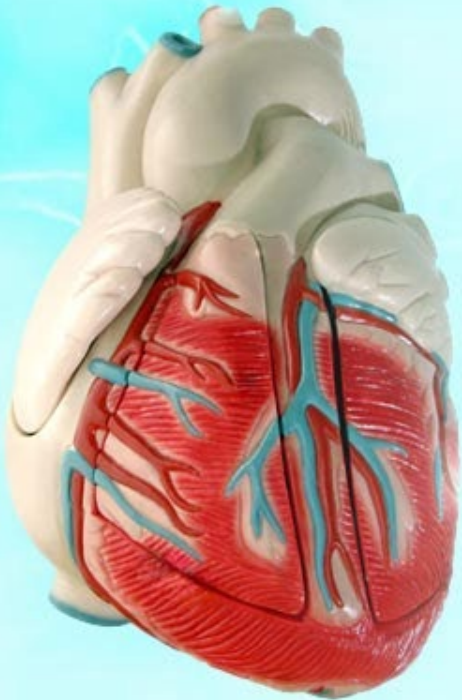
# **Acute Coronary Syndrome (ACS)**

## **Recognition & Prevention**



# What is Acute Coronary Syndrome (ACS)?

- Acute Coronary Syndrome is when a blockage of one or more of the coronary arteries occurs, resulting in decreased oxygen supply to the heart muscle
- Usually called a Heart Attack



# What is the impact of ACS?

- 600,000 people die of heart disease in the United States every year—that's **1 in every 4 deaths**
- Every 25 seconds, an American will have a coronary event, and every minute, someone will die of one
- Every year about 715,000 Americans have a heart attack.
- Of these, 525,000 are a first heart attack
- 190,000 happen in people who have already experienced one heart attack



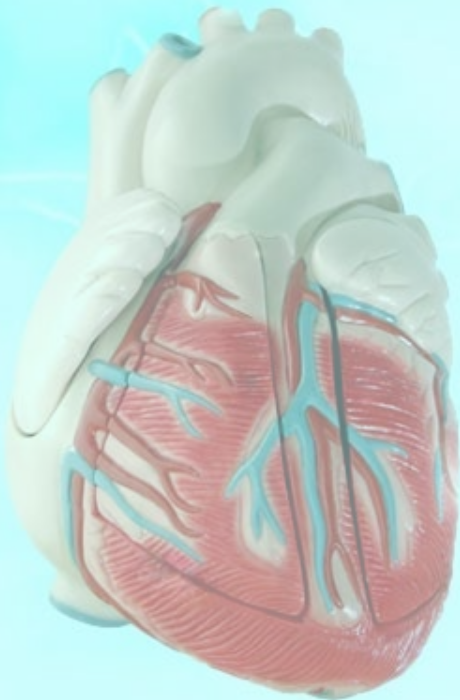


# Heart Attacks have “Beginnings”

- “Beginnings” can occur days or weeks before a heart attack takes place.
- The “beginnings” occur in over 50% of patients.
  - If recognized in time, these “beginnings” can be treated before the heart is damaged!
  - Damage to the heart can begin 2 hours prior to a heart attack.
  - 85% of heart damage occurs within the first two hours of a heart attack.

***BEFORE HEART DAMAGE OCCURS***

***!!TAKE ACTION!!***



# Recognizing Symptoms of ACS

(People may or may not experience any or all of these symptoms)

**Nausea**

**Chest  
pressure,  
squeezing,  
fullness or  
discomfort**

**Upper  
back pain**

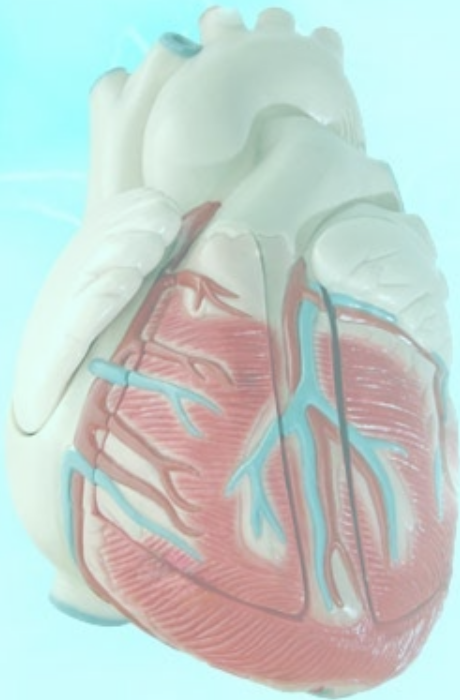
**Pain that  
travels down  
one or both  
arms**

**Sudden  
heavy  
sweating**

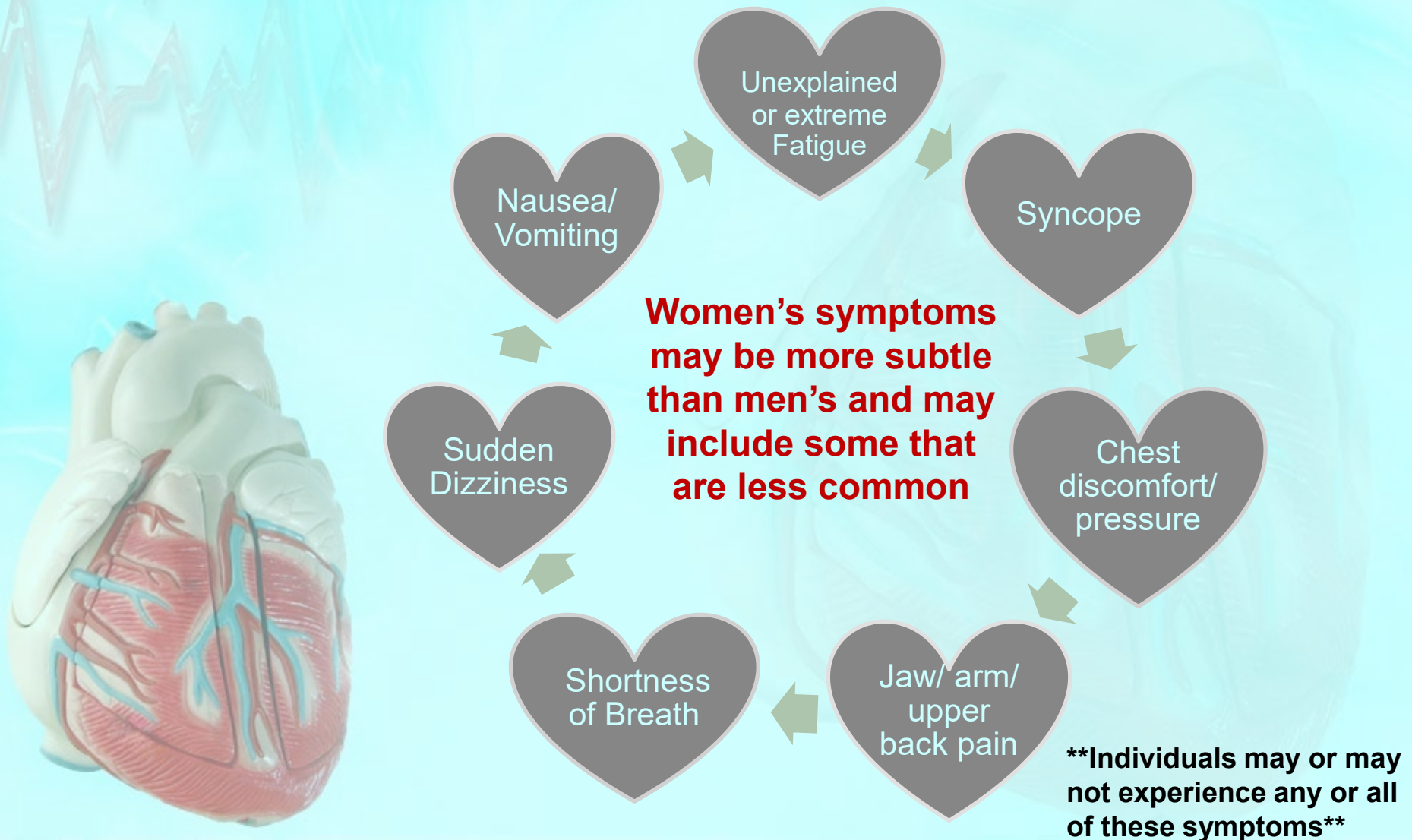
**Shortness  
of breath**

**Jaw Pain**

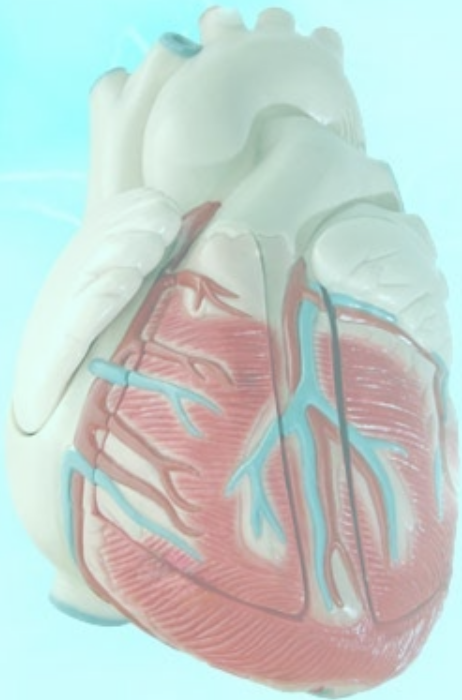
**\*\* Sudden dizziness or light  
headedness, unusual unexplained  
fatigue and/or anxiety; may be  
combined with one or more of the  
above symptoms**



# Women may have different signs and symptoms of chest pain then men!



# ACS risk factors that can be **CHANGED!**



- Stop Smoking
- Decrease high blood pressure
- Decrease high cholesterol
- Lose weight
- Comply with diabetes treatment
- Decrease stress
- Increase exercise
- Eat a healthier diet

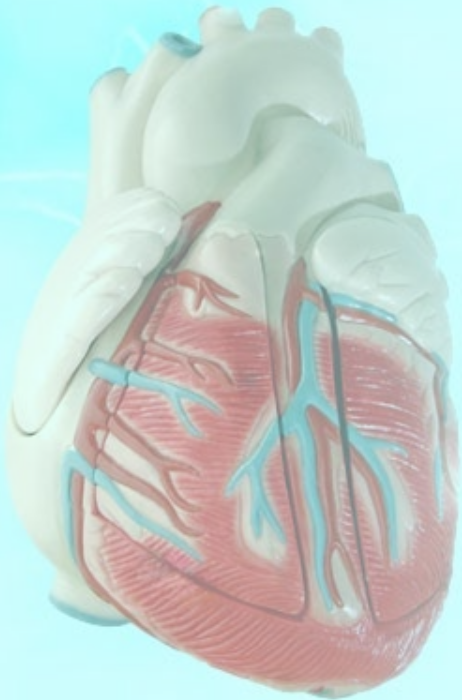
**PREVENTION, PREVENTION!!**



# Early Heart Attack Care (EHAC)

**Early Heart Attack Care (EHAC) is designed to promote public awareness by:**

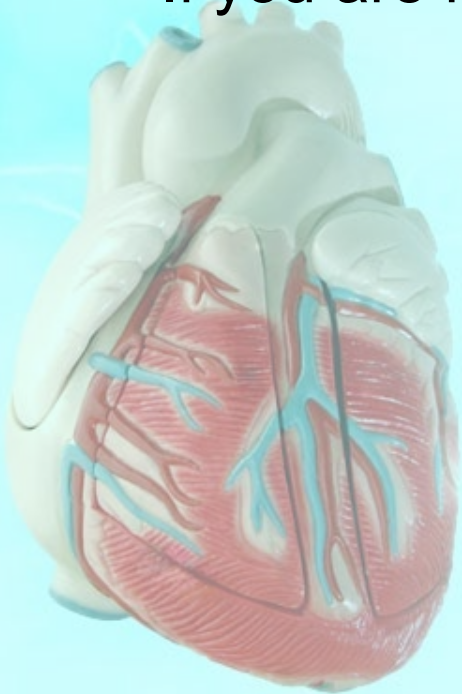
- Knowing the signs and symptoms of heart attacks
- Know that signs and symptoms of heart attacks can start days to weeks before the actual attack
- If symptoms occur get evaluated by an emergency departments or chest pain center
- Recognize and treat early symptoms to help prevent full-blown heart attacks





# Acute Coronary Syndrome is a “Medical Emergency”

- It is your duty to recognize the symptoms of ACS and act upon it
- You are the first link in initiating a response
- If you are in a hospital call a Rapid Response:
  - St. Elizabeth Covington, Edgewood, Florence, Ft. Thomas, or Grant dial **2-2222**
  - At an outpatient location or in the community call **911**



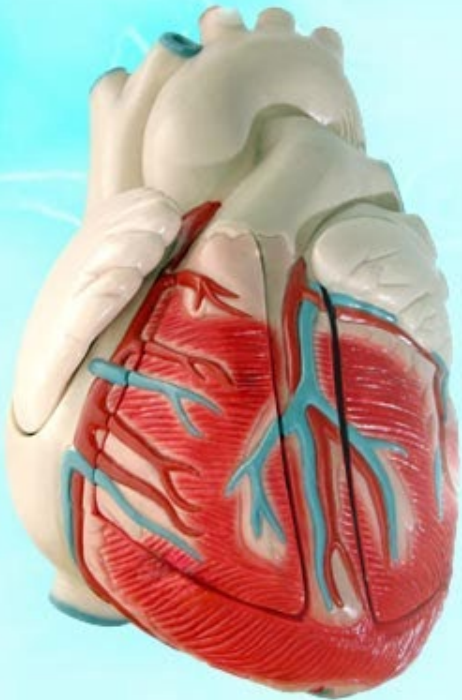
*“Extraordinary Heart Care”*

# St. Elizabeth is working towards Chest Pain Center Accreditation

## What Can You Do? !!COMMIT!!

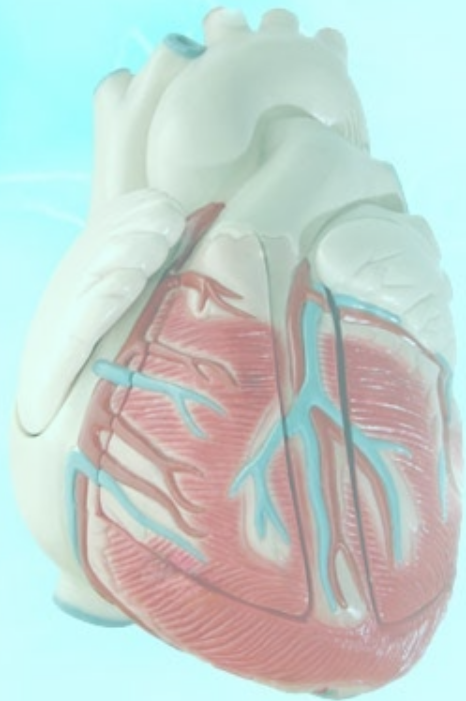
1. Learn the early signs and symptoms of a heart attack
2. Share early heart attack care (EHAC) with others
3. Take the Oath

*"Extraordinary Heart Care"*



# Early Heart Attack Care Oath

I understand that heart attacks have beginnings that may include chest discomfort, shortness of breath, shoulder and/or arm pain, and weakness. These may occur hours or weeks before the actual heart attack.



*I solemnly swear* that if it happens to me or anyone I know, I will call 9-1-1 or activate our Emergency Medical Service (2-2222).



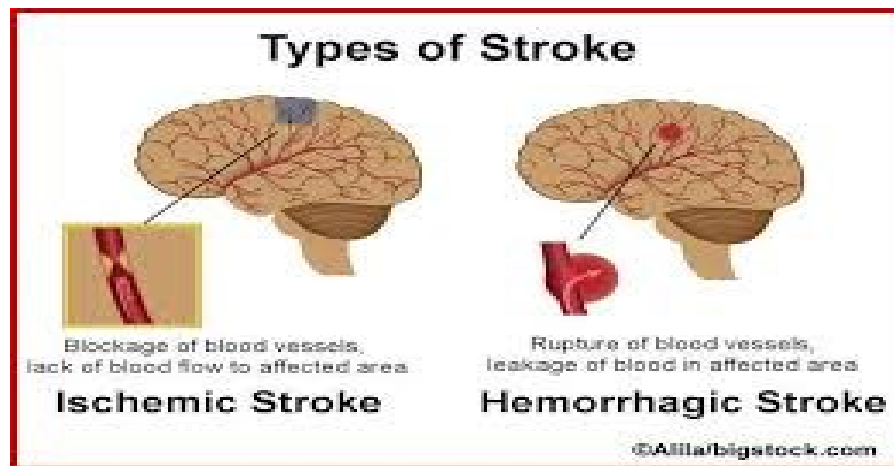


# **Recognizing Stroke and Stroke Prevention**



# What is a Stroke?

- Stroke:
  - Is a disease that affects the arteries leading to and within the brain.
  - Occurs when blood vessels that carry oxygen and blood to the brain become blocked or rupture.



# What is the Impact of a Stroke?

- About 795,000 Americans suffer a new or recurrent stroke every year.
  - a stroke occurs about every 40 seconds
- Stroke kills more than 137,000 people a year.
  - 1 of every 18 deaths
  - #4 cause of death behind diseases of the heart and cancer
- Stroke is the leading cause of functional impairment
  - In 2010, the estimated cost for stroke care was \$73.7 billion

# **SIGNS and SYMPTOMS of Stroke**

**For a Brain Attack think F-A-S-T**

**F**= face numbness or weakness especially one side

**A**= arm numbness or weakness especially one side of body

**S**= speech slurred or difficulty speaking or understanding

**T**= time to call 911 if these occur suddenly or are accompanied by: the loss of vision, the loss of balance with dizziness or the worst headache of your life, with no known cause, both sudden and severe.

**Time is of the essence – treatment with tPA needs to begin within three hours of onset.**

# Stroke is a Medical Emergency!

***Don't wait*** to call,  
remember seconds  
count!



- If you see warning signs of stroke in someone at
  - ✓ Covington,
  - ✓ Edgewood,
  - ✓ Florence
  - ✓ Ft. Thomas
  - ✓ Grant

**Call 2-2222 to call  
a rapid response**



# Stroke Prevention

## How to Reduce the Risk:

- The more risk factors you have, the greater your chance of having a stroke.
- You can't control some risk factors but you can modify, treat, or control them to lower your risks.
- Speak with your doctor to find out if you have any of these *health risks*...



# Stroke Risk Factors

You **CAN NOT** Change Your –

- Age
- Gender
- Race
- Sickle Cell Disease
- Family History
- Prior stroke, TIA, or heart attack

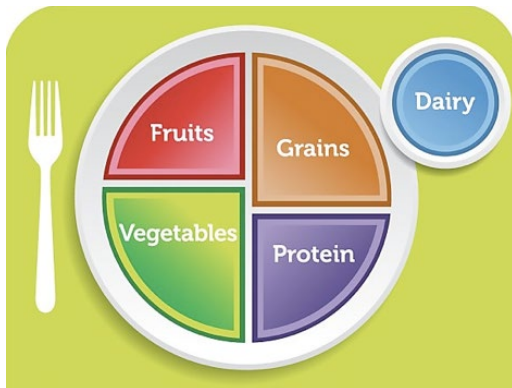


# Stroke Risk Factors

## **You *Can* Control Many Risk Factors**



- You can change many conditions through diet and exercise.
- Others may need medication.
- Your best defense is knowledge.
- Talk to your doctor to find out more



# Controllable Stroke Risk Factors

- High Blood Pressure
- Cigarette Smoking
- Diabetes
- Carotid or other artery disease
- Atrial Fibrillation
- Diet
- High Cholesterol
- Peripheral artery disease
- Physical Inactivity/Obesity
- Other Heart Disease
- Alcohol/Drug Abuse

# Transient Ischemic Attack (TIA)

- Occurs when a blood clot *temporarily* clogs an artery in the brain
- These are “warning strokes” or “mini-strokes”
- Symptoms of a TIA are the same as a stroke *except* that they only last a short time
- Unlike a stroke, there is no lasting damage to the brain
- A person who has a TIA is 9.5 times more likely to have a stroke

Don't ignore the signs! If symptoms appear

*Seek medical treatment immediately*

# Joint Commission Certified Stroke Center



- St. Elizabeth Edgewood, Covington, Florence, and Fort Thomas are certified by the Joint Commission as a Primary Stroke Center
- We believe our programs are “*Certifiably the Best*”
  - We provide the highest level of care for our stroke patients

# Learn to Recognize a Stroke

## *Time Lost is Brain Lost!*

- Know the warning signs of a stroke and teach them to others
- There are treatments to reduce the risk of damage from a stroke
  - ✓ The earlier treatment is started, the better the outcome!
- Stroke is a medical emergency
- If you notice one or more of the warning signs for stroke

***GET HELP IMMEDIATELY!***

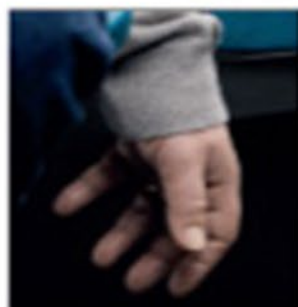
# When Stroke Strikes, Act F.A.S.T.



## FACE

Smile.

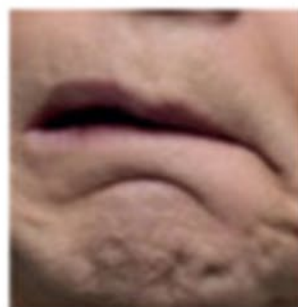
Does one side of the face droop?



## ARMS

Raise both arms.

Does one arm drift downward?



## SPEECH

Repeat a sentence.

Are they able to speak clearly?  
Can they repeat the sentence?



## TIME

Time is critical.

**Call 911.** Get to the hospital immediately. Brain cells are dying.  
**Every Minute Counts!**



# Keeping Our Patients Safe



- It takes everyone to keep our patients safe
- Understand that you play a role
  - Keep Alert
  - Take Action



# Taking Action: Be Part of the Team



Let the manager in the area where you volunteer know if you have...

- ✚ A good patient safety idea
- ✚ A better way to do something that will protect our patients

*Your idea could save a patient from injury!*



# Taking Action: Be Part of the Team

**Goal:**



# Patient Safety Review

1. The Institute of Medicine defines patient safety as “freedom from accidental injury”.

**A. True**

**B. False**

# Patient Safety Review

2. Using standardized checklists is a recommended team work strategy to improve communication.
  - A. True
  - B. False

# Patient Safety Review

3. Structured communication techniques such as AIDET have been proven to improve safety.

**A. True**

**B. False**

# Patient Safety Review

4. The team referred to in this presentation to promote patient safety is made up of:
  - A. Physicians and nurses**
  - B. Physicians, nurses and physical therapists**
  - C. Clinical staff and maintenance**
  - D. All associates & volunteers of SEH**

# Patient Safety Review

5. If you cannot fix a safety concern that you see, you should report it to ensure that the problem gets fixed.
- A. True**
  - B. False**



# Patient Safety Review

6. Patient safety is everyone's responsibility.
  - A. True
  - B. False

# Patient Safety Review

7. A patient fall is defined as:
- A. Unplanned**
  - B. Unassisted**
  - C. A descent to the floor**
  - D. May or may not result in injury**
  - E. All of the above**

# Patient Safety Review

8. Falls reduction is the responsibility of:
- A. All associates and volunteers**
  - B. Nursing only**
  - C. Physicians only**
  - D. Physical Therapy only**

# Patient Safety Review

9. It is important to prevent falls because:
- A.** Falls are a leading cause of death in people ages 65 and older.
  - B.** Injuries from falls can increase a patient's length of stay.
  - C.** It is the right thing to do.
  - D.** All of the above.

# Patient Safety Review

10. You have noticed a light bulb burned out and a loose handrail in the hallway. You should:
- A. Pay no attention. Someone else will take care of it.**
  - B. Pay no attention. These do not have anything to do with you.**
  - C. Notify maintenance or your supervisor that the bulb needs to be replaced and the handrail needs to be repaired.**

# Patient Safety Review

11. You observe that a patient who is walking down the hall alone appears unsteady and confused. You should:
- A. Pay no attention. Someone else will take care of it.**
  - B. Pay no attention. You are not a nurse, so this doesn't have anything to do with you.**
  - C. Stay with the patient and call for a nurse.**



# Patient Safety Review

12. I have reviewed the Safe Movement And Responsible Transfer Patient Handling program and understand how it is important to patient safety.

**A. Yes**

**B. No**



# Patient Safety Review

13. Which of the following are symptoms of acute coronary syndrome?

- A. Nausea
- B. Jaw pain
- C. Upper back pain
- D. Unusual or unexplained fatigue and anxiety
- E. Pain that travels down one or both arms
- F. Chest pressure, squeezing, fullness or discomfort
- G. Shortness of breath
- H. Sudden heavy sweating
- I. Sudden dizziness or light headedness
- J. All of the above

# Patient Safety Review

14. If you observe a patient with the signs and symptoms of ACS at Edgewood, Florence, Ft. Thomas, Covington or Grant County you call 2-2222

**A. True**

**B. False**

# Patient Safety Review

15. Which of the following is NOT a risk factor for ACS (Acute Coronary Syndrome)?

- A. High blood pressure**
- B. Smoking**
- C. Obesity**
- D. Left sided weakness**

# Patient Safety Review

16. Heart attacks can have ‘beginnings’ which can occur hours or weeks before the actual heart attack.

**A. True**

**B. False**

# Patient Safety Review

17. I understand that I am responsible for knowing the signs and symptoms of ACS and what actions to take. I will take the Early Heart Attack Oath:

**I understand that heart attacks have beginnings that may include chest discomfort, shortness of breath, shoulder and/or arm pain, and weakness. These may occur hours or weeks before the actual heart attack. I solemnly swear that if it happens to me or anyone I know, I will call 911 or activate our Emergency Medical Service**

**A. Yes**

**B. No**



# Patient Safety Review

18. Which of the following is a symptom of stroke?

- A. Facial droop**
- B. Arm weakness**
- C. Slurred speech or difficulty speaking**
- D. All of the above**

# Patient Safety Review

19. If you observe a patient with the signs and symptoms of a stroke inside one of the hospitals you will call 2-2222 and call a Rapid Response.

**A. True**

**B. False**

# Patient Safety Review

20. Which of the following is NOT a risk factor for stroke?
- A. High blood pressure**
  - B. Smoking**
  - C. Obesity**
  - D. Red hair**

# Patient Safety Review

21. TIAs place you at a higher risk to have a stroke.

**A. True**

**B. False**

# Patient Safety Review

22. What word helps you remember the signs and symptoms of a stroke?
- A. P-U-L-L
  - B. P-A-S-S
  - C. F-A-S-T
  - D. R-A-C-E

# Patient Safety Review

23. St. Elizabeth Edgewood, Florence, and Ft. Thomas are certified as a Primary Stroke Center by The Joint Commission.

A. True

B. False