REGIONAL Reflections June 2016 West Central Georgia Regional Hospital



JOINT COMMISSION JUNCTION

Among the questions surveyors get asked the most about survey preparation is 'how can our hospital avoid getting requirements for improvement (citations)?' The answer: **take a good look at your environment of care and life safety areas.** Since 2009, the most scored requirements during hospital surveys are those in the Environment of Care (EC) or Life Safety (LS)

chapters of the accreditation manual. Most likely, these requirements will continue to be found out of compliance. Why? Several reasons... The scope of the environment of care is getting broader; Life Safety Code surveyors are receiving more focused training by national and international experts to ensure that these issues are identified; and the follow-up surveys conducted by the Centers for Medicare & Medicaid Services also continue to identify noncompliance issues in the environment of care and Life Safety Code® areas. The tips below would be good things to implement in your departments:

- Love They Neighbor

 Human Resources

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- Assign appropriate departmental and individual responsibility for EC and LS areas and hold them accountable.
- Implement a bounty program, recognizing employees who find environment of care or life safety issues.
- Unblock corridors/hallways. A blocked hallway/corridor is simply unsafe whether or not there's a fire.
- Don't rely on contractors to ensure that the work is done appropriately, carried out safely, and documented accurately; check on it.
- Educate staff about the written fire response plan
- Conduct fire drills and document the drills.

At first glance, these may not seem to be patient safety issues. Unfortunately, a blocked corridor could impede the rapid response team when responding to a code blue, delaying care. Or, in the event of a fire or smoke event, you will have to spend time clearing the corridor instead of attending to patients. Is that hole in the wall exposing your immunocompromised patient to dust or allergens that could exacerbate their condition? The environment of care is everywhere, and that's why it's important to make sure that EC and LS issues are identified and addressed.

Love Thy Neighbor



By: Tina Middleton

Human compassion and resilience are wonderful things. Even in the midst of our individuals working through their own personal challenges, many of them volunteered their time to give to others by participating in the hospital's Love Thy Neighbor community project. By coming together to decorated ordinary terra -cotta pots that were donated for this project, our individuals turned the ordinary into something colorful and spectacular! To add to this "colorfest," our hospital's gardening group planted a variety of house plants and Day Lilies in these works of art- sure to brighten even the grayest of moods. To top it off, our Arts & Crafts group made individual greeting cards for each pot to ensure the recipient felt the warmth of the spirit in which these gifts were made. Several of the individuals who donated their efforts to brighten the day of someone else were able to go to Muscogee Manor Nursing Home on May 6th, many wearing their Sunday best, to participate in the distribution of these gifts of love. Along with staff, our individuals were able to see the joy their selfless efforts brought to the faces of others. . . Isn't this what caring and sharing is all about? Hats off to our individuals who gave their time to share the love!









HUMAN RESOURCE NEWS

Faithful Service Awards

May-June 2016

5 Years:

Pamela Byrd

15 Years:

Alvin Gaskin Mitchell Singletary

June Birthdays

6/11Thomas, lared L

6/1 Jackson, Tanico L 6/I Catrett, Stephanie L 6/I Payton, Dorothy J 6/2 Kirby, Patricia Lynn 6/2 Miles, Angela D 6/3 Story, Catherine K. 6/3 Bush, Tiffany D 6/3 Williams, Rodney 6/4 Kitchens, David J. 6/4 Dean, Alice I 6/7 Brown, Calvin L 6/7 Golden, Taeidrion K 6/7 Sherrell, Yvonne G. 6/7 Brown, Jennifer L. 6/8 West, Sharon D 6/9 Thomas, Shondra Y 6/9 White, Amanda Marie 6/9 Revels, Breonca R

6/12 Weaver, Linda E 6/12 Myers, Emily D 6/12 Mendenhall, Alguan 6/12 Brown, Sandra 6/13 Flowers, Elma Denise 6/13 Rice, Shanice 6/13 Frederick, John P 6/13 Pizarro, Carrie Ann 6/14 Gordon, Isiah A 6/15 Griffin, Jerald Wayne 6/16 Johnson, Belinda L 6/19 Brooks, Luciana T 6/20 Parker, Barbara Ann 6/20 Funderburg, Marashallette L 6/28 Walker Jr., Julian M 6/20 Holloway, Brian K 6/21 Cherrone, Brenda Kay 6/21 Leonard, Wendy R.

6/22 Felton, Lakeshia A 6/24 Williams, Robin H 6/24 Antoine, Ancy 6/24 Riley, Curtis Dale 6/25 Vaughn, Jamal Nigeil 6/26 Jones, Andez L 6/26 Nalls, Gloria A 6/27 Carvajal, Maritza E. 6/27 Perez, Taylor R 6/28 Gardner, Priscilla 6/28 Kinavey, Jo T 6/28 Deas, Corey B 6/28 Wynn, Ahkelia L 6/28 Johnson, Shirley A 6/28 Moss, Lois M 6/29 Henley, Syreeta L 6/29 Garvin, Akisha K

Farewell...

Davis, Naomi C Bailey, LaRhonda Y Garey, Markita L Heiskill, Amber N

Joyner, Johanna C

Tyler, Anthony R Joseph, Uriel M. Morgan, Charlene E Kirby, Patricia Lynn

Important Dates: Pay Days:

June 15th & June 30th.

Kronos: Manager Approval days: June 2nd & June 17th (subject to change). Please reconcile and move all FSLA to OT premium.

Orientation:

une 1st & 16th | 1 PM to 5 PM Human Resources Conference Room

New Hires: Welcome to WCGRH!



(L to R): Cordary Allen (FST), John Robertson (Regional Hospital Administrator), Thomas Singleton (RN), Tiara Powell (Social Service Provider), Richard Joseph (FST), Arthur Jordan (FST), Benjamin Barry (FST)



Front Row (L to R): John Robertson (Regional Hospital Administrator) Dieon Miles (FST), Talesha Wilson (FST), Kriston Slater (FST), Marlo Harris (LPN), Kimberly Wells (Pharmacy Director)

Back Row (L to R): Carol Williams (LPN), David Phillips (FST), Jennifer Bowers (RN), Tre'lisha Banks (LPN), Lakesha Bower (PSR Facilitator)

STAFF DEVELOPMENT NEWS

June Block Schedule for Annual Updates

Staff will attend according to their Safety Care date, and must attend the entire block. Staff will then be current for the next year! Unit PA's will register Unit Staff.

Block I:

Tues, June 14: 8:00 CPR and First Aid

Wed, June 15: 8:00-10:00 Infection Control and Incident Management

10:00-12:00 Seizure

1:00-3:00 PNS

Thur, June 16: 8:00 Safety Care Re-cert

Block 2:

Mon, June 20: 8:00 CPR and First Aid

Tues, June 21: 8:00-10:00 Infection Control and Incident Management

10:00-12:00 Seizure 1:00-3:00 PNS

Wed, June 22: 8:00 Safety Care Re-cert

Block 3:

Tues, June 28: 8:00 Safety Care Re-cert Wed, June 29: 8:00 CPR and First Aid

Thur, June 30: 8:00-10:00 Infection Control and Incident Management

10:00-12:00 Seizure 1:00-3:00 PNS



And the Oscar goes to...

Congratulations to UNIT 7 for being this quarter's OSCAR Award Winner with 98.17% in Bowel Management!



Meningococcal disease: What it is and how to prevent it.

What is meningococcal disease?

Meningococcal disease is a bacterial infection It can cause bloodstream infections or meningitis—an inflammation in the lining that covers the brain and spinal cord. The type of meningitis that is caused by meningococcal disease is referred to as meningococcal meningitis. It will strike otherwise healthy individuals and can cause devastating illness—even death. Death can occur in as little as a few hours. In non-fatal cases, permanent disabilities can include hearing loss, brain damage, and loss of fingers or toes.

How does meningococcal disease spread?

Meningococcal disease is spread from person to person. The bacteria are spread by exchanging saliva (respiratory or throat secretions) with someone who has meningococcal disease or who is a carrier. It's possible to get it by kissing, sharing drinking glasses or toothbrushes, or being in very close contact while coughing.

What are symptoms of meningococcal meningitis?

Symptoms of meningococcal meningitis include sudden onset of fever, headache, and stiff neck accompanied by nausea, vomiting, an increased sensitivity to light, or a change in mental status. Symptoms can come on quickly or over several days. Typically they develop within 3 to 7 days after exposure.

What are symptoms of a bloodstream infection?

Meningococcal disease can also cause bloodstream infections. A bloodstream infection causes damage to the walls of the blood vessels. Symptoms of this include fatigue, vomiting, cold hands and feet, chills, severe aches in the muscles, joints or abdomen, rapid breathing, diarrhea, and the development of a dark purple skin rash.

Who is at risk for meningococcal disease?

- College students living in a dormitory
- Military recruits
- Anyone with a damaged spleen or no spleen
- Anyone with an immune system disorder
- Anyone traveling or residing in countries in which the disease is common
- Anyone with a weakened immune system
- Anyone who has skipped routine recommended vaccinations

How can you prevent meningococcal disease?

Fortunately, there are safe vaccines available to prevent the most common types (also known as serogroups) of meningococcal infections. Talk with your doctor for more information.

Source: Association for Professionals in Epidemiology and Infection Control, 2016

POLICY CORNER

This month's policy highlight is:

"Levels of Observation for Individuals in DBHDD Hospitals, 03-501".

This policy utilizes the procedures for three levels of observation to maintain the "clinical care needs of individuals being served". Besides the grammatical changes made there are a few changes that are important to know. Please be sure to read Sec. A Routine Observation #5 to see the revisions. Also read Sec. D Longer-term of continuous or one to one observation #1 for revision.



PBS TEAM



On April 1st, West Central's *Positive Behavior Support Team (PBS)* hosted the 1st Annual Statewide *PBS* Meeting. Hospitals in attendance were Central State from Milledgeville, GA Regional from Atlanta, and GA Regional from Savannah. The meeting was created by our staff in order to unite PBS Teams across the state, serve as a forum for the exchange of ideas and strategies, and explore how PBS can impact staff and individuals moving forward. Each team brought a unique perspective to the role of PBS and the expected results are improved services for those we help. The PBS team would like to issue a special thanks to Mr. John Robertson, RHA, Dr. John Parmer, Forensic Director, Mr. Paul Fahnestock- HR Recruiter, and our wonderful Food Service staff for making this event a success.

PSR EMPLOYEE SPOTLIGHT



Martina

Baggs
My name is Martina
Baggs. I've been with
WCGRH for over
15 years and I'm
currently a PSR
Instructor III in
Rehabilitation

Services. I was hired in June of 2000 as an HST; I was later promoted to HST Lead in 2003. After the MR unit closed in 2004, I was reassigned to Unit 9 as a FST Lead. I've been a CNA for over 20 years and I use my medical training at Columbus Hospice. Some of the changes I've seen at this hospital over the years are, implementation of the holdover policy, more in-service classes, treatment mall upgrades, updates to in-service trainings and changes in various policies and procedures. In my free time I enjoy gardening and charitable opportunities as well as providing companionship to elderly neighbors. I spend a lot of time working on the hospitality committee at Mt. Mariah Baptist Church. Additionally, I also enjoy reading and spending time with my husband and children. My fondest memories are making a difference in the lives of the individuals housed at WCGRH. I enjoy working one-on-one with literacy challenged individuals that want to learn. I also provide a listening ear and encouraging words no matter the individual circumstances. I love my job and truly believe that every day is an opportunity to make a difference through teaching, listening and caring.

NURSING SERVICES

Nursing Services would like to recognize the nominees for FST and Nurse of the Year 2016. They are:

Unit 2:

Courtney Jones, RN Willie Womack, FST

Unit 3:

Miosotis Ridley, RN Desaray Newman

Unit 7:

Tylet Washington, LPN
Destry Sales

Unit 9:

Tamara Lyn, LPN Barbara Cunningham

Unit 10:

Timothy O'Brien, RN
David Dunn

Floater FST:

Dianne Lawrence

The winner for the Nurse of the Year 2016 was **Miosotis Ridley, RN (Unit 3)** and FST of the Year 2016 was **David Dunn, FST (Unit 10).** Congratulations to all of the individuals for going above and beyond the call of duty!

Regional Reflections is published monthly. The mission of the newsletter is to provide a forum to educate and inform its readership on issues in behavioral health, strengthen teamwork, and archive hospital events and activities. Regional Reflections staff welcomes items including articles, news items, and photos submitted for publication. However, all items are subject to editorial discretion and will be published on a "space available" basis. Please contact the editor if you have any questions or concerns regarding the newsletter. Thank you for your support.

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