



Housestaff NEWSLETTER

KEY TOPICS THIS MONTH:

- Benefits – Open Enrollment
- Reminders from GME
- Utah Medical Association Membership
- National Health Service Corps Opportunities
- Quality and Patient Safety Department



BENEFITS – OPEN ENROLLMENT

The University's Annual Open Enrollment for the 2009 Plan Year (July, 2009 – June, 2010) is in progress and will run from April 1st through April 30th. Now is the time to make changes to your benefits. More information can be found at <http://www.hr.utah.edu/ben/oe/index.php>.

REMINDERS FROM GME

Attention PGY-1s:

You must have a passing score on USMLE Step 3 by June 30th. If you have not yet applied for the exam, do so right away. Instructions are at <http://www.usmle.org/index.html>.

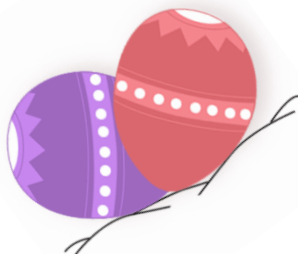
If you are staying with us next year, a certified birth certificate will be required for your Utah license application. You can generally obtain this on-line from the state or county in which you were born. You will be eligible to apply for your Utah license July 1st and must apply by July 31st. Avoid problems in July by ensuring you have the documentation ahead of time.

Completing your Program this Year?:

Check-out packets will be e-mailed to you in May. You may want to start tying up any 'loose-ends' and ensuring you have no outstanding issues or materials.

The check-out packet will require approvals from:

- Health Information (Medical Records) Department of all affiliated hospitals where you have rotated.
- VAMC / VA Library (if applicable)
- Your own department / program
- GME





REMINDERS FROM GME (CONTINUED)

All Continuing Housestaff:

If you have not yet signed your 2009-2010 contract, contact your program coordinator.

Licenses to GME:

If you have applied for a Utah Medical License, DEA license and/or an NPI number, please be sure to get copies to the GME office (1C412) when you receive them. You are welcome to e-mail scanned copies to gme@hsc.utah.edu if this is more convenient for you.

New uCard:

Please note that if you replace your uCard for any reason, meal money balances and door access are not automatically transferred. Please notify the GME office (581-2401) if you obtain a new uCard.

UTAH MEDICAL ASSOCIATION MEMBERSHIP



Join Utah Medical Association (UMA) today! If you had joined last year, you could have saved thousands of dollars in discounts or services through UMA such as advocacy in the legislature. Advocacy is the top member benefit. We have a full-time lobbyist, Michelle McOmber, who works year-round on legislative issues to protect physicians and improve health care in Utah.

One example of how UMA fights to protect physicians is a bill that was passed in the 2009 legislative session for emergency physicians and on-call specialists. It provides for medical liability reform for emergency care and tightening the standard of evidence for those bringing a lawsuit. The passage of this bill will protect physicians of all specialties in the emergency room.

Go to <http://www.utahmed.org/benefits.html> to learn more about the benefits of membership.





NATIONAL HEALTH SERVICE CORPS OPPORTUNITIES

The federal stimulus package includes funding for significant expansion of the National Health Service Corps.

The American Recovery and Reinvestment Act of 2009 provides \$300 million to the National Health Service Corps to support health professions educational loan repayment and scholarships.



Over the next two years, the National Health Service Corps (NHSC) will be recruiting over 4,000 new clinicians who are seeking a once-in-a-lifetime experience serving in our nation's needy communities.

The NHSC can assist physicians who are ready, willing and able to answer this call to service by repaying health profession student loans in exchange for practicing at one of many NHSC sites across the country.

The first step to applying for NHSC loan repayment is to secure a position at an NHSC site.

For more information about eligible sites, please visit the NHSC Job Opportunities website at <http://nhsc.hrsa.gov/jobs> to view over 7,000 current vacancies.

The NHSC Loan Repayment program offers up to \$50,000 towards qualifying educational loan debt in exchange for a minimum service commitment of 2 years at an NHSC site. Additionally, the Loan Repayment Program offers an opportunity to apply for continued educational loan repayment as long as funding is available and the awardee continues to serve at an eligible site.

For additional information about this program, including a list of disciplines eligible for loan repayment, please visit the website: http://nhsc.hrsa.gov/join_us/lrp.asp.

For the latest updates and information about the NHSC, please visit <http://nhsc.bhpr.hrsa.gov> or call 1 (800) 221-9393.





QUALITY & PATIENT SAFETY DEPARTMENT

The Joint Commission (JCAHO) addresses matters of safety through its accreditation process, in its standards and in the National Patient Safety Goals. The term “safety culture” describes an organization’s attitudes, values, goals and practices regarding the safety of patients and staff. The organizational culture defines, to a large degree, how employees understand their individual roles and how they fit into the larger picture of the organization’s work. This culture also defines the ways in which individuals go about fulfilling those roles and how they interact with each other and their patients.



Every staff member has a part to play in our safety culture. Safety is not an afterthought or just one more item on a “to do” list. Patient safety is this organization’s top priority and is integral to everything we do.

How can Housestaff help us build on a culture of safety?

1. Encourage a collaborative work environment in which every member of the care team has a voice.
2. Ensure that patients and their families are treated with respect and are active participants in the care process.
3. Educate and communicate with our staff and patients about patient safety.
4. Exhibit passion and compassion. Be passionate about safety and compassionate toward patients and staff.
5. Demonstrate a willingness to share lessons learned with staff to encourage future error prevention. One way this sharing is done is by completing a Patient Safety Net (PSN) Event Report.

What is the Patient Safety Net (PSN)?

- It is a web-based, real time reporting tool we use here at UUHC to enhance patient safety and improve health care quality.
- Includes reporting on both actual and potential (near-miss) events.
- Its link is found on our intranet home-page site (just type ‘intranet’ in the address bar).
- PSN is available for all employees and all physicians to use.
- It has 24/7 secure availability – instant e-mail notifications go to unit managers.
- Reports can be anonymous or you can put your name on them.
- There is a standard terminology and classification system for medical errors.
- Once submitted, the information is password-protected for further analysis by quality, risk, nurse managers, physician leaders and pharmacy managers.





QUALITY & PATIENT SAFETY DEPARTMENT (CONTINUED)

Patient Safety Net (PSN) (continued)

- The system is useful for both inpatient and outpatient settings.
- All reports are confidential and non-discoverable – printing reports is discouraged.
- It incorporates adverse drug reaction / adverse drug event and medication error reporting.
- Manager's review of events includes an analysis of Human Factors.

Enhancing patient safety requires creating a culture in which openness and learning are valued. The core of PSN event reporting is to ask what happened, how it happened, what can be learned and which changes, if any, should be made. When blame, but not accountability, is taken out of error reporting, it creates an environment where workers feel comfortable sharing information about contributory factors. This is a step forward in helping us develop our Culture of Safety here at University Health Care.



For more information or for questions, contact
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Patient Safety Specialist
University Health Care
801-585-1335

Abbreviations

In response to a rising national concern for patient safety and numerous medication errors that are traced back to abbreviations, the following abbreviations have been prohibited from use:

- U,u, IU
- Q.D., QD, q.d., qd
- Q.O.D., QOD, q.o.d., qod
- MS, MSO₄, MgSO₄
- Trailing zero (5.0 mg)
- Lack of leading zero (.25 mg)



This applies to all orders and all medication / blood product-related documentation that are handwritten (including free-text computer entry) or on pre-printed forms.





QUALITY & PATIENT SAFETY DEPARTMENT (CONTINUED)

Need to Know: TB or suspected TB patients:

Under OSHA's TB Respiratory Standard, UUHC is required by federal law to train and fit-test all healthcare workers who routinely care for TB or suspected TB patients. As it is not feasible to train all staff on all units, 4N, 6S, MICU and STBU have been designated as 'TB accepting units.'

All suspected TB patients should be admitted under the pulmonary service to the TB accepting units. If a patient is admitted for another reason and under another service and r/o TB is suddenly on the differential, the patient MUST be transferred to a TB accepting unit ASAP.

If r/o TB patient is not on a TB accepting unit, call the nursing supervisor to request a TB negative pressure room ASAP. If the patient cannot be transferred within an hour, the patient should be moved to the unit's negative pressure room ASAP. Housestaff are not fit-tested to the N-95 respirators and must wear the Powered Air Purifying Respirator (PAPR). Students should not enter the room.



If we have a critical census and the patient meets the STBU (5W) medical admission criteria, a patient can be temporarily placed by the nursing supervisor in the STBU until a more suitable bed is found.

Exclusion criteria for STBU admission:

- No blood transfusions, TPN, or chemotherapy
- No oxygen needs over 5.5 L/min
- No confusion or delirium
- No IV medications that need to be titrated or "pushed"
- No telemetry patients
- No sepsis or major organ failure
- MD needs to understand that there are 3 locked doors between patient and nurse – this means there are no "regular" checks more frequently than once an hour

Information is readily available 24/7 on the Infection Prevention and Control Website
<http://intranet.uuhsc.utah.edu/qps/infection>.

Spring Is Here



Have a Great April!

