

Survey Readiness

This is your chance to shine!

- Assist unit in completing survey unit readiness checklist
- Greet surveyors with name and title
- No food or drinks in patient care areas
- If you don't know the answers say, "I am not sure, let me find that information for you"
- Policies, personnel files, or printouts of the patient record should be requested and provided through survey support team




Escalation Process

Escalate issues/concerns to CNC in real time:

- Broken/missing essential equipment. Broken equipment must be removed from service
- Patient/family request to speak with leadership
- Placing a pt. in restraints
- Procedural sedation
- Change in pt. status requiring immediate bedding/change in location d/t higher acuity resource needs
- Staff needs for in the moment guidance
- Immediate threat to patient/staff safety
- Assaults from a patient

CIWA


CIWA: Alcohol Withdrawal Plan


- Assess any patient who have actively been using alcohol
-  Complete assessment **within 1 hour of order and begin treatment per protocol**
- CIWA assessment does **NOT** require an order to complete

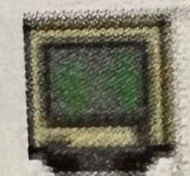
CIWA Assessment Benefits:

- Help to control the patient behavior, from escalating and from the development of seizures and DT's
- Patient receives appropriate medications and placed in the appropriate level of care.
- Supports safety of all patients, visitors and staff.



Patient Monitoring

 **Vital Signs:** Initially on all patients, at least q4h while in ED (except medically cleared BH q8h)

 **12-Lead EKG:** Goal is 10 minutes from order for medically indicated patients

 **Continuous ECG monitoring:** Goal is 30 minutes from order. Document start/stop, notify CMU, and cardiac rhythm (initiation and changes)

Lab Labs: Goal is collection within 30 minutes of order

  **CT:** Goal is 30 mins from order to completion

Pediatric/Minor Consent

Each patient is required to sign a general authorization for treatment

Minor- anyone under age 18 who is not emancipated

Parent or legal guardian of the minor must consent unless one of the special circumstances listed below:

- STDs
- Pregnancy
- Abuse of controlled substance/alcohol
- Emotional disturbance (ED/outpatient only)
- Abortion (reach out to risk for guidance)

Separate contents are required for surgery, invasive procedures, blood transfusions, sedation, etc.

Reporting Safety Concerns

How we keep our patients, visitors,
and staff safe

VigiLanz

- Any staff member can report a safety concern and escalate as appropriate.
- If the concern involves **patient safety** it is **mandatory** to escalate and report via VigiLanz

Pain Assessment/Reassessment

Every ED patient is assessed for pain:

- Initial pain assessment
- Prior to administration of PRN pain medication

Reassessment:



- Within 1 hr after a pain intervention/medication
- Following a change in patient status
- Tracking board icon as reminder when due

Document pain assessments and reassessments

Patient Arrival/Triage

Goal is 10 minutes

Triage alert- when more than 3 patients waiting

- Patients arriving to the ED must be seen, triaged, and care assumed by RN within 10 mins. This includes pts. brought by EMS.
- Triage desk- completes rapid triage
- IPA RN- completes full triage



- Emergency Severity Index (ESI).
Lower the number the **sicker** the patient