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| **INVITEES/ATTENDEES** | | | | | | | | | | |  | |  | |
| **Co-Chairs: Christine Reuscher, Candi Haggard, Jennifer Thomas** | | | | | | **Quality Support: Lauren White** | | | | |  | |  | |
| **Invited: Next meeting: 7/2/19, 3:00p – 4:00p, 6T3 Conference Room** | | | | | | | | | | |  | |  | |
|  | Blake, Megan (8N) | P | Culwell, Laura (APMI) |  | Hobt-Bingham, Teresa (AD) | |  | Russell, Jensine (8N) | P | Bertrand, Kristen (SICU) | |  | |
|  | Buehring, Kyndall (10N) |  | Currie, Kevin (10N) |  | Kuntz, Audrey (7RW/4RW) | |  | Sames, Michelle (8MCE) |  | Demarco, Morgan (11S) | |  | |
| P | Bunch, Devin (8T3) |  | Davidson, Martha (WOCN) | P | Land, Edward (3RW) | |  | Smith, Brittany (8S) |  |  | |  | |
|  | Bone, Kate (10T3) |  | Dee, Cat (8N) |  | Lee, Sheree (WOCN) | |  | Stephens, Jennifer (9T3) |  |  | |  | |
|  | Boudreaux, Arlene (6N/6S) |  | Eastburn, Chris (APMI) |  | McNeil, Veronica (8N) | |  | Swor, Britney (WOCN) |  |  | |  | |
|  | Bradford, Caitlan (9T3) | P | Ezzell, Andrew (8S) |  | Moore, Kimberly (5N) | | P | Thomas, Jennifer (8MCE) |  |  | |  | |
|  | Carter, Kim (7T3) |  | Ferreira, Nicole (10T3) |  | Morlan, Karen (Supply) | | P | Thompson, Bonnie (WOCN) |  |  | |  | |
|  | Champaneria, Trushar (APMI) | P | Gerant, Kimberly (APMI) |  | Mueller, Dorothee (ICU MD) | |  | Vorholt, Elizabeth (11S) |  |  | |  | |
|  | Chitwood, Miranda (WOCN) |  | Godby, Shannon (10N) |  | Mueller, Jocelyn (11S) | |  | Walker, Kelli (7S) |  |  | |  | |
|  | Clark, Eric (5N) |  | Hale, Sydney (6N/6S) |  | Polk, Brittany (5N) | |  | Werenczuk, Emily (9T3) |  |  | |  | |
|  | Clifford, Kristen (8T3) | P | Haggard, Candi (WOCN) |  | Pruett, DeAnn (5N) | | P | White, Lauren (APMI) |  |  | |  | |
|  | Collins, Sam (5N) |  | Hargrove, Marilyn (WOCN) |  | Raymond, Paul (5RW/3RW) | | P | White, Sherri (10T3) |  |  | |  | |
|  | Cox, Randy (APMI) |  | Hirsch, Aaron (9N/9S) |  | Reuscher, Christine (WOCN) | |  | Yatteau, Leslie (APMI) |  |  | |  | |

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| **AGENDA** | | | | |
| Time | Agenda Item | Purpose  (Inform, decision, input, etc.) | Desired Outcomes | Notes/ Comments |
| 5 min. | **Data Review and HAPI Review Tool in REDCap**  Lauren White | Inform, discussion |  |  |
| 15 min. | **Focus for Nurse Residents – Culture Building**  Christine Reuscher | Discussion |  |  |
| 15 min. | **WOCN Rounding**  Christine, Candi | Inform, discussion |  |  |
| 15 min. | **Cosign – Questions, Expectations, Barriers**  Candi, Christine, Lauren | Inform, discussion |  |  |
| 10 min. | **Turn Audit – Feedback**  All | Input |  |  |

PIP Committee Meeting Minutes June 18, 2019

Documentation

Lauren:

* Once go live with Epic: every 2-hour documentation on turning patients was removed due to risk of missing documentation and being held liable for hospital acquired pressure injuries.
* Should we bring back the requirement of every 2-hour documentation on turning? Is more documentation better? Would it hold us more accountable?
* Lauren will follow-up with Risk Management to see if we can bring that back into our charting as a requirement.
* Can we also add into the Brain and function to auto populate Q2Turn task for nurses and care partners?

Reminders

Lauren and WOCNs:

* Audit forms are due to Lauren White every Friday by 5pm with a minimum for 10 patients
* To request a cosign: document your assessment, flag as significant, highlight the assessment, right click and request cosign.

Questions

Lauren and WOCNs:

* If an LDA is started as a PI then a Skin Champion comes in to assess and discovers it is more moisture, etc related (not pressure) can/should that LDA be removed?
  + If there was never a cosign completed and it is within 8 hours of documentation the LDA can be removed. Lauren is working with the data team to get this information removed from our current data.
* Christine usually spends 30 with the new nurse residents on PI prevention and staging. Should she be doing something else?
  + Committee suggested to leave out PI staging due to the complexity.
  + Focus on VUMC Culture building, prevention methods, PI algorithm, and resources.

WOCN Rounding

WOCNs:

* The WOCNs will start rounding on the units. They will be spending about 15 minutes per unit and speaking with 1-2 nurses. They will be offering staff education and assistance. They will also be asking about patient turns, turn audits, who their units skin champions are, and barriers to turning.
* As always, the Quality Team is here to help assist in anyways they can!

Next meeting: July 2, 2019

See you then!!

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| *ACTION ITEMS / Future Agenda items* | | |
| *Action Item / Agenda items* | *Responsible* | *Date* |
| *Documentation - where to find PI interventions, starting wounds* |  |  |
| *Case reviews* |  |  |
| *REDCap learning module – assessment and documentation* |  |  |