

# Vital Signs

Blue Ridge Regional Hospital Newsletter

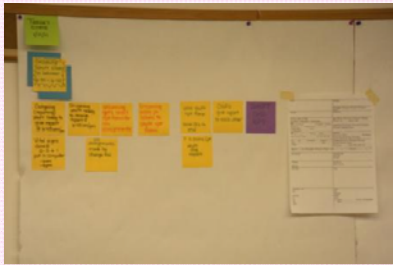


February 2011

## Message from the CEO

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It always seems exciting to begin a new year with fresh opportunities and resolutions. As we continue into 2011 BRRH's overriding focus will be on enhancing our quality and patient family centered care through the use of LEAN.



Over the past month or so there has been some exciting rapid improvement events (RIE's) conducted on the Med/Surg/CCU floor. Both RIE's focused on patient safety and more interaction with the patients and their families. I think it is fair to say that a number of the team members "drank the Kool Aid" and saw the power of changing processes by the people who do the work.



As you also know we are "in the zone:" for The Joint Commission (TJC) survey. The three year anniversary will not be until May however, they literally could show up at any time so we must be ready. Hopefully, all we do on an ongoing basis keeps us ready however; it's always good to review the standards to ensure that all our processes and procedures are in compliance.

I would like to thank you for all that you do as we continue our journey to provide the highest quality, safest and patient focused care possible.

## National Heart Health Month



Did you know that **Cardiovascular Disease, including heart disease and stroke, is the leading cause of death for men and women in the United States?**

February is National Heart Health Month, or American Heart Month. Help celebrate this month by taking steps towards a healthier heart for you and your family.

### Do you know your risks for Cardiovascular Disease?

There are many risk factors many of which are controllable factors. Risk factors that can be controlled or changed include :

- **Smoking:** Smoking is the biggest risk factor for sudden cardiac death. Someone who smokes is two to four times more likely to have a heart attack than a non smoker.
- **Physical Inactivity:** An inactive lifestyle is a risk factor for coronary heart disease. Regular exercise helps prevent heart and blood vessel disease.

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## Remembering a Friend



We are saddened by the loss of our co-worker Lisa Ingram, RN to breast cancer. Lisa joined our staff in November 2006

and worked nights on the Medical/Surgical Unit. She leaves behind her beloved family: Loren, Lindsey, Christian and Vinson her husband, along with her working family at BRRH. Her ever present smile and gentle nature will truly be missed by all who came to know her.

*“Lisa will be missed so much. She was the strongest person I have ever met. Although she was sick for many years, you would never hear her complain. Most people who met her never even knew that she was sick. Lisa always came to work to care for her patients with a smile on her face. She would listen and care for their problems even though her problems were greater. That is just who she was. A caring, selfless, person, co-worker and friend. I can only hope to be half of the person she was.”*

—Danielle Vance

*“I respect so much, the fact that her faith was such an obvious part of her life. She was a wonderful reflection of God’s love.”*

— Deborah Huskins

*“She was very close to us. Lisa, how we miss you! We know that you are in heaven watching over us. I will carry you in my heart forever.”*

—Lala McKinney

*“Truly great friends are hard to find, difficult to leave, and impossible to forget. We miss you Lisa!”*

—Deborah Verla

*“Lisa was an amazing person. Our thoughts and prayers are with her family.”*

—Edna Wood



## BRRH Board Report

**Our CEO Search Committee has selected Martin Godwin, Partner in Cameron Carmichael Company, to assist us with the search process.** Martin is very familiar with our area and has a 13 year record of successful hospital related searches, primarily in North Carolina.



Martin spent January 26 and 27 in Spruce Pine. He talked with a number of our staff, with physicians, and with several community leaders. Before he left, he met with our Search Committee to outline the process going forward.

**During the first week in February, we will complete a position description for our new CEO, as well as a profile of those qualifications we feel are essential for this position.** Much of this information will come from interviews Martin has conducted. I again encourage anyone who would like to share input to contact any member of our Search Committee or Martin directly. His email: [mgodwin@cameroncarmichael.com](mailto:mgodwin@cameroncarmichael.com). His telephone #: 704-364-3434, ext. 4.

After our CEO profile is complete, Martin will begin the search. Our expectation is that by late March we will have identified 6 to 8 potential candidates. We will then reduce that list to the 4 most qualified and expect to begin intensive interviews before the end of April.

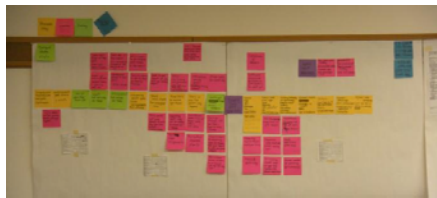


I have been asked the role Mission Hospital will play in our selection. **While we share a number of beneficial affiliations with Mission, the responsibility for the selection and the employment of the new BRRH CEO rests with our Search Committee and our own Board of Trustees. Another reason to let us hear from you as we move forward.**

Courtney Mauzy  
Chairman, BRRH Board of Trustees  
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## LEAN Update

The Medical Surgical Unit conducted their second Lean Rapid Improvement Event January 10<sup>th</sup> through 13<sup>th</sup>.



The team consisted of Georgann Mathis, Sarah Burlison, Elizabeth Payne, Danielle Vance, and Brenda Boston from Med Surg/CCU, Connie Harrison from the ER, and Ashley Gouge from L&D, who worked to improve the timeliness of shift change report.

Before the event, there was no consistent start or end time for shift change report, due to some reports not starting on time, shift change report taking anywhere from 20 to 60 minutes, and having no standard way to report.

The team created a new standard report sheet for CNA's to use, while also experimenting with walking rounds for CNA's. At shift change, they could give report on the patient, introduce the patient to the oncoming CNA and take care of any patient needs or wants, while also updating the whiteboard in the patient's room. CNA's also have started putting in vitals at 10, 2, and 6, so vitals are in before the physicians begin their rounds and the CNA's are free to do shift change report with each other.

RN's also received a new standard report sheet to help streamline the process of giving information to the oncoming shift. Nurses are able to go through the information in the same order each time.

HANDOFF COMMUNICATION SHEET	
Admit Transfer To _____	Diagnosis _____
Physician _____	Notified _____
Allergies _____	C FALL RISK _____
Code Status _____	Isolation _____
MBSA swab _____	Y/N _____
IV Site _____	Size _____
IVF _____	Rate _____
Started By _____	
Site _____	Size _____
IVF _____	Rate _____
Started By _____	
Vital Signs BP _____	T _____
P _____	R _____
O2 Sat _____	EDL _____
Diet _____	Activity Restrictions _____
Communication Deficits _____	
Pacer Y/N _____	Delib. Y/N _____
Nicotine Patch Y/N _____	
Medical History _____	
Monitor Rhythm _____	
Abnormal Assessment Findings _____	

The team also worked on several issues that caused interruptions during shift change. The unit secretaries and RN's often receive many calls from

family and friends of their patients for updates on the patient's status. A new field in the initial interview lets the patient designate their family informant, so nurses can communicate with this one informant, who then can dispense information to other family members and friends.

*Continued on page 4...*

## Kudos Corner

*"Kudos to the Maintenance Techs for the cold hard winter work they have endured the last two months (and it's not over yet) while keeping the sidewalks and parking areas clean during the recent snow and ice. They have been coming in early and working weekends to keep sidewalks and parking areas clean for patients, staff and visitors. Thanks guys!"*

*—Jean Edwards*

*"I would like to thank Sharon and the entire OR staff for the fine job that they perform when working with the visiting specialty surgeons. The feedback from these groups (Asheville Gastro, Dr. Nenow, etc) has been very complimentary and positive. Customer service is a major component of our daily success and the OR staff should be recognized for their contributions. Thank you!"*

*—Lisa Sthay*

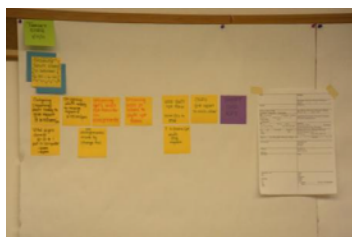
*"Kudos to the housekeeping staff for making the halls look so great in the newly renovated business suite on the first floor! Kudos to the maintenance department for moving us all down here!"*

*—Business Suite Staff*

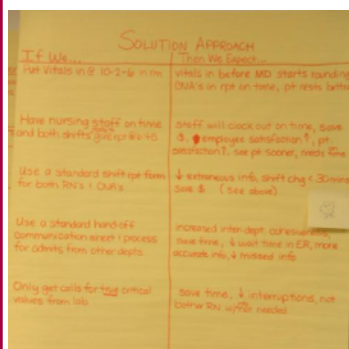
**Would you like to send someone a Kudos?  
Contact Allison Grindstaff at  
828-766-1752 or at  
allison.grindstaff@msj.org**

Lean update continued from page 3...

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The team also made suggestions on switching calls on glucose critical values from 300 to 400 (laboratory calls on any value over



300, although Med Surg/CCU counts anything over 400 as a critical value) to cut down on calls, while synthroids given to patients have been switched to 6, so RN's can give these medications to patients before they start shift change report.



Work also has started on improving the process of admitting a patient to Med Surg/CCU from the ER. A new policy called "4:30 Roundup" has ER physicians looking at their patients at 4:30, like a second triage, to see which ones may be

admitted. This gives the ER time to get these patients admitted before the 6:00 shift change of ER physicians, preventing a batch of ER patients admitted to the floor at Med Surg/CCU's shift change at 7:00. A new, abbreviated Handoff Communication sheet tubed ahead of time also give the Med Surg/CCU RN time to familiarize themselves with the newly admitted patient before they arrive on the floor.

During the week, the shift change report per patient for Med Surg decreased from 5 minutes to 1.5 - 3 minutes. For CCU patients, the average report time per patient decreased from 7 minutes to 3-5 minutes. All CNA's do walking rounds on patients; while this has also been implemented by the department for RN's starting 1/26/11.

The next Rapid Improvement Event in the Medical Surgical Unit will take place February 7<sup>th</sup> - 10<sup>th</sup>, while the first RIE for the OR will take place the following week, February 14<sup>th</sup> - 17<sup>th</sup>.

National Heart Health Month continued from page 1...

- **High Blood Cholesterol:** As blood cholesterol rises so does the risk of coronary heart disease. Taking steps to control your high cholesterol can reduce your risk. These steps include diet, exercise and in some cases medication. Speak with your healthcare provider about controlling your cholesterol.



- **High Blood Pressure:** High blood pressure increases the heart's workload, causing the heart to thicken and become stiffer. It also increases the risk of heart attack and stroke. Keeping your blood pressure under control is vitally important.
- **Diabetes Mellitus:** Diabetes seriously increases the risk of heart attacks and strokes. Keeping your blood sugar under control can reduce your risk for heart attack and stroke. It is important to work with your healthcare provider to manage your diabetes.
- **Stress:** Individual responses to stress may be a contributing factor to heart disease in some people. Taking steps to reduce your stress and manage your stress in healthy ways can greatly reduce your risk for heart disease.

### Do you know the signs of a heart attack or stroke?

If you suspect someone is having a stroke think FAST:

- Face:** facial weakness is a sign/symptom of stroke.
- Arm:** weakness or loss of use of an arm can be a sign/symptom of stroke.
- Speech:** slurred speech or difficulty speaking can be a sign/symptom of stroke.
- Time:** call 911 immediately if you suspect someone is having a stroke.

### Early signs/symptoms of a heart attack include:

- Chest discomfort that lasts more than a few minutes.
- Shortness of breath.
- Discomfort in other areas of the upper body such as in one or both arms, the back of the neck, jaw or stomach.
- Other signs may include breaking out in a cold sweat, nausea or lightheadedness.

## The Payroll Tax Cut:

An opportunity to pad your pocket ... and your retirement.

The new tax law President Obama signed in December offered something for almost everyone. One key benefit was the so-called **payroll tax holiday**: This year most of you will see 2% more in your paychecks thanks to a temporary cut in the federal FICA (Social Security and Medicare) tax on earnings up to \$106,800.



The tax cut was intended to give Americans more money to spend, and thus help stimulate the nation's slowly growing economy. But before you unwrap your gift from Uncle Sam, think about what's best for your *household's* economy.

Here's a quick look at why contributing that extra 2% toward retirement might be the best choice for you:

**First, the tax cut offers a rare opportunity to increase your retirement savings *without forking over a dime*.** In fact, by bumping up your pre-tax plan contribution rate by 2% this year, you'll *still* see a bigger paycheck along with a larger account balance. If you're not yet contributing to your retirement plan, you might even be eligible to receive a matching contribution from the hospital, effectively doubling your contribution ... all without reducing your take-home pay!



**Next, consider the state of Social Security itself.** As with the extension of the Bush-era income tax cuts, some observers think Congress will end up extending the FICA tax break into 2012 or beyond. Trouble is, the less money that goes into the system today, the sooner federal benefits – *your* Social Security payments – could fall short tomorrow. So, by shifting your *tax* savings into *retirement* savings, you could be *fixing* a potential hole in your own safety net.

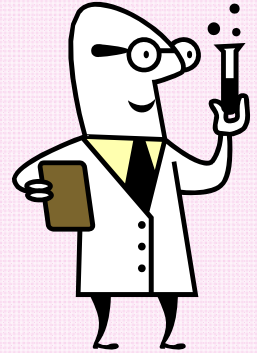
To enroll or increase your contribution rate, sign in to your account at [www.divinvest.com](http://www.divinvest.com), and click on *Deferrals/Payroll Deduction* in the *Transactions* menu, or call 800-755-5801.

Charles Thompson, our onsite retirement representative with Diversified, schedules weekly visits on Thursdays. You can call him at 828-707-2100 or email him at [chthompson@divinvest.com](mailto:chthompson@divinvest.com) if you have any questions.

*This information is general in nature and should not be considered as investment advice. Everyone's situation is unique, and you should consider your risk tolerance, personal circumstances and complete financial situation.*

## HIPAA Corner

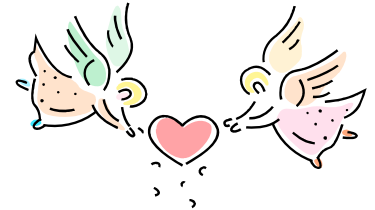
**Q:** A patient underwent diagnostic testing in the hospital where she was employed. She received a copy of the lab results and when she read them, she noticed that a physician has noted her employee status. Does this violate HIPAA?



**A:** *No, this doesn't violate HIPAA. Much depends on the hospital's specific privacy policies, but many entities take steps to protect their employees' privacy. The physician may have included the notation to alert others that distribution of the test results should be limited to certain employees. Also, noting a patient's status as an employee of any covered or noncovered entity does not violate HIPAA unless this information is inappropriately accessed along with other PHI or a security breach occurs.*

## Volunteer Vitals

The Gift Shop has the Willow Tree "Loving Angels" collection. Stop by and pick one up for the angel in your life.



Valentines Day is just around the corner, don't forget to stop by the Gift Shop for the perfect gift for that special someone in your life!



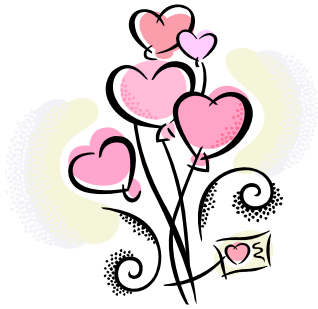
Mark your calendar for the Uniform Sale on March 10th and 11th.

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## Candy Grams

Valentine's Day will be here before you know it, and the Foundation is selling Candy Grams again this year. **Pre-order your candy gram to be delivered on Monday February 14, 2011.**



Candy Grams are \$3 each and all proceeds benefit the BRRH Foundation. Send a note to a co-worker or Friend! Deliveries will be made to 2nd and 3rd shift employees as well as all hospital owned clinics.

**Call Allison Grindstaff at 828-766-1752 or email her at [allison.grindstaff@msj.org](mailto:allison.grindstaff@msj.org) to order a candy gram today!**



## Vital Sign Classifieds

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**For Sale:** Magnavox T.V. remote included. \$50 or best offer. Contact Jessica Autrey at 828-766-7262.

Vital Signs is a monthly publication for the staff, physicians, and volunteers of Blue Ridge Regional Hospital.



This publication is produced by the Communications and Marketing Department at Blue Ridge Regional Hospital.

**Any newsletter ideas? Contact Allison Grindstaff at ext. 1752 or [allison.grindstaff@msj.org](mailto:allison.grindstaff@msj.org).**

## February Birthdays

Chris Day	Feb. 4th
Cynthia Wilson	Feb. 5th
Jean Edwards	Feb. 5th
Heather Greene	Feb. 7th
Shella Buchanan	Feb. 7th
Keeley Beasley	Feb. 8th
Dawn La Luzerne	Feb. 8th
Lesley Slate	Feb. 10th
Marie Brown	Feb. 10th
Sandra Wheeler	Feb. 10th
James Potter	Feb. 12th
Diane Broadbent	Feb. 14th
Tammy Price	Feb. 14th
Vanessa Penland	Feb. 15th
Ashly VandenBerg	Feb. 15th
Kevin Hollifield	Feb. 16th
Joseph Brinster	Feb. 16th
Michael Zilles	Feb. 16th
Jennifer McMahan	Feb. 19th
Christy Duncan	Feb. 20th
Angela Willis	Feb. 21st
Linda McFalls	Feb. 23rd
Laura Mabee	Feb. 23rd
Jennifer Saylor	Feb. 23rd
Robert Bennett	Feb. 24th
Sharon Jackson	Feb. 24th
Pamela Jones	Feb. 24th
Kelley Stewart	Feb. 24th
Melinda Maney	Feb. 25th
Lena Weisman	Feb. 25th
Robert Miller	Feb. 26th
Amy McClellan	Feb. 27th
Patti Smith	Feb. 27th
Bobbie Fox	Feb. 28th
Tammy Hoilman	Feb. 28th

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