Focus on JCAHO

SURVEYORS REACH ALABAMA

The Joint Commission on Accreditation of Healthcare Organizations (JCAHO), the national organization that evaluates and accredits hospitals, freestanding clinics, and home health facilities, is well into its meticulous 2006 surveys. As an administrator of a southeastern Alabama hospital reports of JCAHO's recent visit, “Focus areas were safety, quality improvement, and medication management. Of course, they used the tracer methodology. A psychiatry patient, cardiac patient, CV surgery patient, orthopaedic patient, and a dialysis patient were followed. “When they picked tracer patients, these were the files they asked us to pull, including the names of physicians involved in care of these patients,” she observed. “They made sure all our i's were dotted and t's were crossed. They were a tough team and left no stone unturned. It was a long 4 days.”

During the extremely thorough visit, 12 requests for improvement (RFIs) were generated; it was “the most that we ever had in the past three surveys,” says the 32-year veteran hospital administrator. There is a 45-day period to address RFIs.

“The key is preparation,” says Deborah Grimes, RN, JD, UAB director of JCAHO and Regulatory Compliance. “When surveyors enter a unit, everyday questions are asked about how physicians communicate with residents, nurses, patients, and family members, how verbal orders are done (the nurse receives the information, writes it down, and reads it back to the physician); and how care is assessed.”

JCAHO also visited a local Baptist hospital. There, Grimes says, the team completed 10 tracers in 4 days, surveying care of surgical, medical, behavioral health, and emergency department patients, and visiting the OR several times.

Medical Staff: What to Expect

“At least 50% of this year’s survey focuses on direct communication among physicians, nurses, and other caregivers,” Grimes explains. “By following the National Patient Safety Goals, these staff can reduce medical errors through integration of activities impacting patient safety.” The physician focus here is medication reconciliation (comparison of the patient’s medication lists on admission, as physical status changes, and during transfer and/or discharge), the time-out process (documented reviews of patient identity and clinical information before any procedure is performed), and the “hand off” strategy to maintain continuum of care when staff coverage changes.

Other key areas:

- Meticulous compliance with credentialing policies and procedures.

“Hospital administrators are reporting the 2006 surveys are tough – but fair.”

Deborah Grimes, UAB Director of JCAHO and Regulatory Compliance

Health System NEWS

MARCH OF DIMES 2006

WALKAMERICA CAMPAIGN

With a $100,000 fundraising goal, UAB Health System’s (UABHS) annual March of Dimes WalkAmerica campaign is in full swing, culminating April 29 in a 10K walk starting at 9 AM. Registration begins at 8 AM, UAB Mini Park, University Boulevard and 14th Street South.

The March of Dimes is dedicated to preventing prematurity, low birth weight, and birth defects. Nearly 500,000 babies are born prematurely in the United States each year, with an average of 180 preterm births and 114 low birth weight babies per week in Alabama — an increase of nearly 2% since 1993.

UABHS teams or departments may sponsor a baby in University Hospital’s Regional Neonatal Intensive Care Unit (RNICU) or Continuing Care Nursery (CCN). “We will provide photos and reports of your baby ambassador’s progress,” says Madonna Nichols, RN, MSN, administrative director of hospital Women’s and Infants Services, and one of six hospital team captains. “We also can add your ambassador baby to the March of Dimes website so you may track online donations and information.” Nichols says some families are willing to visit a unit or department to talk about being the parent of a sick newborn. “By personalizing the
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• Even if physician privileges are well documented, extensive questioning regarding how clinical staff on the floor would know physicians were credentialed to do procedures they were performing. (“A real challenge,” notes the administrator.)

• Random checks of other physicians, as well as a certified registered nurse anesthetist — just to see if credentials and privileges were in order.

• Organization of files, including checklists for charts, with clearly marked sections. (“They did not like having to search through files,” the administrator reports.)

• Documentation of peer review, not just medical staff administrative review, for competencies.

• Documentation regarding how problems within the medical staff are adjudicated and handled.

“Good patient care reduces errors, improves safety, and ultimately saves patients, health care systems, and hospitals money,” Grimes concludes. “Physician education is paramount. So are dissemination of education policies and proper documentation that policies are complied with.”

In addition to the focus on patient safety — a relatively new JCAHO field, Grimes notes — physicians need to know the UAB Health System’s process improvement infrastructure, including whom to contact regarding practice problems or questions.

ACCOLADES

UASOM ART SHOW WINNERS

The School of Medicine at UAB in conjunction with the Alabama Alpha Chapter of Alpha Omega Alpha (AΩA), the national medical honor society, recently announced the winners of the 2006 School of Medicine Art Competition. Along with medical students’ entries, faculty were encouraged for the first time to present their artwork. All 39 entries, including written work, are on display through May 5 in the Alabama Museum of the Health Sciences of UAB Historical Collections, Lister Hill Library of the Health Sciences.

The sixth annual event aims to increase medical students’ exposure to the arts and humanities, actively involve them in the historical collections, and showcase School of Medicine talent.

An awards ceremony and reception was held on February 10 at the Alabama Museum of the Health Sciences. Jurors for the competition were Brett Levine, director, UAB Visual Arts Gallery; Steve Smith, PhD, director, medical student services; Eric Wallace, 4th year medical student; Stefanie Rookis, curator and assistant professor, Alabama Museum of the Health Sciences; and Stacy Tintocalis, assistant professor, UAB Department of English.

Founded in 1902, the national AΩA promotes medical school scholarship, encourages high standards of character and conduct, and recognizes outstanding achievement in medical science, practice, and related fields.

Second Place — “Untitled,” photograph in window frame, Emily Cannon, MS-II

Third Place — “Longing,” graphite on paper, Eric Yarbrough, MS-IV

Faculty

First Place —

“Wolff’s Law in 3-D,” photomicrography, Michael Klein, MD, professor, pathology

Second Place — “A Threnody of Pain,” collage and poem, Maurice Albin, MD, professor, anesthesiology, and Kamara Savage, office associate

Third Place — “The Castle 2004,” pencil on paper, Brendan McGuire, MD, associate professor, gastroenterology

Written Work

First Place —

“An Odd Hour,” short story, by James Hagood, MD, associate professor, pediatrics

Second Place — “Without Bad Things,” poetry and photography, Alex Szalai, PhD, associate professor, immunology/rheumatology

UAB Historical Collection Juror’s Choice

The Digital Revolution in Malawi,” photography, Melanie Venable, MS-I

AΩA Juror’s Choice — “Untitled,” pastel and colored pencil on paper, Emily Cannon, MS-II

Visual Arts Gallery Juror’s Choice — “Untitled,” paint on cardboard, Nicole Loo, MS-I
Doctors COMMENT

CA-MRSA — INCREASING IN FREQUENCY

Until the 1990s, methicillin-resistant Staphylococcus aureus (MRSA) infection rarely occurred outside health care settings. In the past few years, however, such infections are appearing increasingly in the community among individuals who lack traditional MRSA risk factors, including recent hospitalization or surgery, residence in a long-term care facility, dialysis, and indwelling catheters or other percutaneous devices.

Community-associated (CA)-MRSA is characterized by skin and soft tissue infections. Clusters of infection have been reported in individuals who live, work, or play in close contact with each other, such as children who attend daycare, prisoners, military recruits, and individuals participating in team sports.

A recent Wall Street Journal article (“Virulent Staph Infection Sparks Health Uproar,” March 13, 2006) reported on MRSA infections in children attending daycare centers, highlighting the need for improved infection control measures in such settings.

For details, see www.ccc.uab.edu.

2006 Protective Life Clinical Initiative Awards

March 23

Any School of Medicine clinical faculty who obtains sponsorship and approval of the department chair and submits a letter of intent to the Dean’s Office by 4 PM on March 23 may apply.

For details, see www.uab.edu/uasom.

Physician Photo Sessions

March 15 and 16, 10 AM to 2 PM, West Pavilion Conference Center Lobby

All UAB physicians need recent photos for the new online UAB physician directory. Please review your profile at www.health.uab.edu/hospital/show.asp?durki=63303 by searching last name or via specialty at www.health.uab.edu/hospital/show.asp?durki=62767.

For photo appointments, contact Carol Pierce at cpierce@uabmc.edu or 934-7804.

National Poison Prevention Week

March 15, 12 PM to 1 PM

Richard C. Dart, MD, PhD, and director of the Rocky Mountain Poison & Drug Center, will speak on “Pitfalls in the Use of Emergency Antidotes.” The lecture is sponsored by the Division of CME, UAB Department of Emergency Medicine.

Margaret Cameron Spain Auditorium. Lunch will be served.

What Do You Say When CNN Calls?

March 15, 8:30 AM to 10 AM

Don’t panic. Learn the basics of handling such calls during a “How to Work Successfully with the News Media” workshop hosted by the UAB Office of Media Relations. The 90-minute session includes a panel of reporters from local print and broadcast news media.

Hill University Center, Room 411. For reservations, contact Deborah Lucas at 934.3884 or dgl@uab.edu. Seating is limited.

UAB Minority Health & Research Center Conference

March 22-23

Keynote speaker is David Satcher, MD, PhD, Interim President, Morehouse SOM. The former US Surgeon General and CDC director will present in conjunction with the UAB Department of Medicine Grand Rounds’ annual Albert Oberman Preventive Medicine Lecture at 12 noon on March 22, Margaret Cameron Spain Auditorium. “Eliminating Health Disparities: Obesity & Diabetes from Discovery to Delivery” will continue in West Pavilion Conference Room E.

For conference details and to register, call 934-9903 or visit www.uabmhrc.com.

INFOBAHN

FDA Approvals Online

To review the Food and Drug Administration’s most recent approvals of drugs, medical devices, therapeutic biologicals, and food additives, visit:

www.fda.gov/opacom/7approvl.html

To access a Synopsis article from the last 2 years, visit our Web site at www.uabhealth.org/synopsis. You can search by date or subject in the left sidebar.

UAB physicians: visit MSI, the password-protected Medical Staff intranet site, at https://horizon.hs.uab.edu.
Fears," January 20, 2006) highlighted MRSA’s spread into communities and noted growing concern among public health officials. The Centers for Disease Control and Prevention offer online resources with emerging CA-MRSA information. Go to http://www.cdc.gov/ncidod/dhqp/ar_mrsa_ca.html for CDC’s overview of CA-MRSA.

The Infectious Diseases Society of America also has issued updated guidelines on management of the skin and soft tissue infection often associated with CA-MRSA. Go to http://www.idsociety.org/ and click on “Practice Guidelines” to choose from their list of topics.

UAB Health System Infection Control Committee Chair Alan M. Stamm, MD, comments on ongoing measures to monitor and prevent spread of both hospital-associated (HA) and CA-MRSA infections:

“We have been monitoring HA-MRSA infections acquired in University Hospital for the past 20 years. Such infections are not uniformly distributed. Some nursing units have few or no infections over the course of an entire year. Some populations — trauma and burn patients, for example — have long been known to be more susceptible. Other groups, such as high-risk newborns, have only become a target in the past 2 years,” Dr. Stamm says.

“We screen the most at-risk patients on admission and weekly throughout their stay; at present, this includes those admitted to the TBICU, NICU, RNICU, and CCN. The primary purpose of screening is to implement contact precautions early to prevent patient-to-patient transmission. It is unclear whether intervention in a patient colonized, but not ill with MRSA, is helpful — the majority do not become sick because of infection. Topical intranasal mupirocin is sometimes used to eradicate colonization. However, it does not always work and may induce drug resistance. In 2005, we began typing MRSA isolates causing nosocomial infections to determine whether they are CA or HA strains; our goal is to better understand the threat posed by the two varieties.”

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WALKAMERICA CAMPAIGN
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experience, we hope people will be more vested in raising funds and participating in this effort,” she says.

“This is one of those rare opportunities when we can make a significant difference in children’s health and future even before they are born,” says University Hospital COO Michael Waldrum, MD, campaign chair and executive champion.

For more information about how you can make a donation or participate in the campaign, please contact Campaign Co-chair and UABHS Administrative Director Jordan DeMoss at 996-5272, jdemoss@uab.edu.