Commit to Sit to Enhance Patient-Centered Care

UTMB will relaunch the Commit to Sit initiative this summer to help enhance patient centeredness and clinician engagement with patients and families.

Studies show that sitting down and speaking with patients and families at eye-level helps communicate that we are present for them and really listening to their questions and concerns. And, even when the provider has spent the same amount of time conversing with patients and families while sitting versus standing, sitting at eye level helps create a sense that the provider has spent a greater length of time speaking with the patient and family.

Commit to Sit was first launched in 2013 in John Sealy Hospital as a Physician Leadership Academy project to improve patient satisfaction with physician communication. When adult medical-surgical patient units moved to Jennie Sealy Hospital in 2016, the folding chairs intended for use by clinicians were hung behind the patient room door; however, with the chairs out of sight and not as easily accessible, they were less often utilized.

To help make sitting comfortably and talking with patients and families at eye-level easier for clinicians, Dr. Michael Nguyen and Nurse Manager K. Nicole Young piloted some strategies on an internal medicine unit in Jennie Sealy Hospital. They found that by placing the folding chairs...
visibly in each patient room and unfolded so they are ready to be used, it made it easier for providers and clinicians to remember to sit. However, they also realized it was important to ensure that the patient and any family members in the room were aware that the provider may politely ask to use the chair in order to discuss the patient’s care. To help communicate this in advance to the patient and family, the Commit to Sit signs were revised and will be placed directly above the chairs in each room to help share their purpose: “Your physician may ask to use the chair below to sit with you and discuss your care.”

The Commit to Sit initiative is an exciting opportunity to advance Best Care and patient centeredness at UTMB. The relaunch will begin in Jennie Sealy Hospital and will eventually roll out to all UTMB Health hospitals.

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ADVANCE DIRECTIVES AND ESTATE PLANNING

The Advance Directives and Estate Planning Lunch & Learn is part of a new monthly educational series open to the public.

Sponsored by the UTMB Health League City Campus Health Resource Center, the session, will be held July 30, 2019 from Noon to 1:00 p.m. Presenter Sandra Ard, Attorney at Law of the Ard Law Firm is an expert in estate planning, elder law and asset protection.

Advance directives are legal documents that allow you to spell out your decisions about end-of-life care ahead of time. They offer you a way to communicate your wishes to family, friends and health care professionals.

Estate planning is the preparation of tasks that serve to manage an individual’s estate in the event of their incapacitation or death. The planning includes, but is not limited to, the bequest of assets to heirs and the settlement of estate taxes.

The session will take place in Conference Room 2.205 on the UTMB Health League City Campus, on the clinic side of the main facility. For more information, please contact Customer Service Representative Kenneth Macpherson at 832-505-7560 or ksmacphe@utmb.edu.

The UTMB Health League City Campus is located at 2240 Gulf Freeway South, League City, Texas 77573. Don’t forget to bring your lunch!

July 30, 2019 | Noon to 1:00 p.m. | Conference Room 2.205 | UTMB Health League City Campus
Did you know that UTMB Health offers free “Stop the Bleed” training that teaches anyone interested in how to save oneself and others in the event of a life-threatening hemorrhage?

The leading cause of potentially preventable death among trauma patients is bleeding. Massive bleeding can occur from many causes, but in instances where an emergency response may be delayed, such as an active shooter event or explosion, victims can quickly die from uncontrolled bleeding, within five to 10 minutes. However, anyone at the scene can act as immediate responder and save lives if they know what to do.

Stop the Bleed courses are similar to how the general public learns to perform CPR and First Aid. During the session, attendees are taught basic training in bleeding control principles so that they are able to provide first aid while awaiting EMS arrival to takeover the care of the injured person. There are a number of methods that can be used to stop bleeding and they all have one thing in common—compressing a bleeding blood vessel in order to stop the bleed. Techniques include the use of hands, cloth dressings and tourniquets.

Dianna Grimm-Mapp, program director for Trauma Services at UTMB, regularly offers Stop the Bleed courses in the region. Among many examples, she has facilitated courses for the independent school districts of Galveston, Texas City, Santa Fe, Dickinson and Friendswood. She also recently presented the course at a Caregiver Timeout Session, hosted by the David L. Callender, MD & Tonya R. Callender, DNP Health Resource Center in Jennie Sealy Hospital.

You can save a life with proper Stop the Bleed training! If you or someone you know would like to bring Stop the Bleed training to your department, a place of employment, church, community event, school, Boy/Girl Scout meeting or you are interested in seeking training for yourself, please send an email to STPTHBLD@utmb.edu. A UTMB representative will contact you with additional information.

For more information on Stop the Bleed, visit www.bleedingcontrol.org. BleedingControl.org is an initiative of the American College of Surgeons and the Hartford Consensus. It contains diagrams, news, videos and other resources contributed by a variety of private and nonprofit partners to help prepare you in the event you are witness to a serious bleeding event.
**Chief Medical and Clinical Innovation Officer Dr. Gulshan Sharma** invites frontline clinicians and staff who work in or support an inpatient environment to join him for informational sessions to learn about the results of the 2019 Agency for Healthcare Research and Quality (AHRQ) Patient Safety Culture Survey throughout the month of July.

During the sessions, Dr. Sharma will host an interactive discussion with attendees about ways they can promote improvements in patient care processes and to explore a vision for the future of a culture of patient safety at UTMB.

In the past, some examples of interventions to improve a culture of patient safety at UTMB have included programs such as the Clinical Safety and Effectiveness Program, the Crew Resource Management Program and Lean Management training; a quarterly “Because You Reported” newsletter; a “Great Catch!” recognition for staff who reported adverse events or near misses; and the implementation of the Rapid Response Team, a bar code medication administration system and a modified early warning system (MEWS) in the Epic electronic medical record that monitors patients’ heart rate, blood pressure, respiratory rate, temperature and level of consciousness.

The AHRQ Patient Safety Culture Survey is the health care industry’s best tool for understanding, promoting and maintaining a culture of patient safety. The survey assessment tool is used to gain a sense of the current status of perceptions about patient safety culture within an organization. It helps hospitals identify strengths and areas for improvement, as well as provides an opportunity to make internal and external comparisons of patient safety culture.

Our most recent survey identified key areas of focus for improvement: teamwork within and across units, handoffs and care transitions, a non-punitive response to error and staffing.

Thirty-four percent of eligible employees participated in the survey. Of those, 31 percent of all eligible nurses responded, 22 percent of all eligible technicians responded and 8 percent of all eligible physicians, including trainees, responded.

### AHRQ PATIENT SAFETY CULTURE SURVEY INFORMATIONAL SESSIONS SCHEDULE

**Galveston Campus**

- **Wednesday, July 3, 2019** from 3:00 to 4:00 p.m. in Jennie Sealy Hospital, Conference Room (Lobby) 2.506B
- **Wednesday, July 24, 2019** from 3:00 to 4:00 p.m. in Jennie Sealy Hospital, Conference Room (Lobby) 2.506B
- **Friday, July 26, 2019** from 7:30 to 8:30 a.m. in Jennie Sealy Hospital, Conference Room 4.200A

**Angleton Danbury Campus**

- **Tuesday, July 9, 2019** from 7:30 to 8:30 a.m. in the ADC Boardroom

**League City Campus**

- **Wednesday, July 24, 2019** from 7:30 to 8:30 a.m. in LCC Resident Room 3.416

*The survey did not include the Clear Lake Campus, which opened after the survey on March 30, 2019.*

Hospital Galveston staff members are invited to any session.

Additional sessions may be planned.
League City and Clear Lake Campuses slated to receive survey visit by The Joint Commission

UTMB will be in the window for a three-day Joint Commission extension survey for the Clear Lake Campus (hospital and clinics) and the League City Campus (intensive care units and dialysis) beginning July 17, 2019. The survey window will last approximately six months. Please keep in mind that although the surveyors will focus on these two campuses, they may visit any unit, clinic or clinical area of UTMB that they wish, so continual preparedness is important!

The Joint Commission’s unannounced survey is a validation of our organization’s continuous improvement efforts. The Joint Commission conducts a full accreditation survey every 18-36 months. The accreditation process seeks to assist organizations in the identification and correction of problems and improve the quality and safety of care and services provided. The Joint Commission and CMS (Center for Medicare and Medicaid Services) always expect hospitals to comply with all quality and safety standards.

If you have any questions or concerns about The Joint Commission visit, please contact Janet DuBois, Associate Director of Accreditation. You may access preparedness resources on Department of Quality, Safety and Performance Improvement website at http://intranet.utmb.edu/qhs.

Suicide risk screening and assessment now mandatory for all patients aged 12 years or older

Suicide is the 10th leading cause of death in the United States. A new study in The Joint Commission Journal on Quality and Patient Safety reported that approximately 49 to 65 hospital inpatient suicides occur each year in the U.S. Hanging accounted for more than 70 percent of suicides. Approximately half of suicides occurred in the bathroom of acute care hospitals.

To assist health care organizations in improving and saving patients’ lives, The Joint Commission has revised National Patient Safety Goal (NPSG) 15.01.01 on reducing the risk for suicide. Effective July 1, 2019, all clinical staff and health care providers who do intake screenings on patients aged 12 years or older must document whether a patient is being evaluated or treated for a behavioral health condition as their primary reason for care.

To align with the new standard, UTMB has revised policy 09.13.38 Suicide Risk Screening and Suicide Precautions for Patients as follows:

Patients who are determined to have a behavioral health condition as their primary reason for care will be screened for suicidal ideation by utilizing a validated screening tool. An evidenced-based assessment process and plan to mitigate the risk for suicide must be completed and documented in the patient’s record. (If someone is screened and it is found that they do not have suicidal ideation, the assessment does not need to be done.)

Providers, nurses and clinical staff should familiarize themselves with the new policy. A training and competency assessment of staff who care for patients at risk for suicide is required. For more information and to complete the training, please visit https://intranet.utmb.edu/QHS/SuicideRisk.asp.

THE JOINT COMMISSION: UPDATES

LEADING BREAKTHROUGH CHANGE

The Messiness and Reward of Breakthrough Change

JULY 22

Noon to 1:00 p.m.
Levin Hall Main Auditorium
Every day at UTMB Health, employees go above and beyond for our patients. This month, Donna Sollenberger, executive vice president and CEO, UTMB Health System, recognized staff members who were highlighted by patients and their colleagues for delivering Best Care.

**The Nurses of Unit 9D, Jennie Sealy Hospital**

The Nurses of Unit 9D in Jennie Sealy Hospital were recognized this month by the father of a UTMB patient who submitted the following note, which he also submitted to Galveston County Daily News:

“In the first week of October 2018, my son was diagnosed with Stage 4 Burkitt’s Lymphoma. A rare form of cancer, his body was impacted in three areas from his chest to his stomach. We are blessed with a son who has met this challenge head-on and without trepidation!

The experiences of these past few months, and the journey which will continue for some time, has opened for me a new and profound appreciation for the nursing profession and those that have chosen this calling. In the first few days after the diagnosis was confirmed and treatment was initiated for this illness, we were presented with a few significant challenges that tested our faith and our optimism for the future. During these times, it was the professional, experienced and compassionate nurses that became our first line of defense in dealing with the unknown. Time after time, they became our lifeline, settling the waters, talking through the events and maintaining an amazing demeanor for getting things done.

From the Administration to the Emergency Room to the doctors, specialists, nurses, custodial staff and others, UTMB has proven to us that they in fact deserve the title of world-class health care providers. In fact, there are too many individuals to call out for all that they have done, but there is one sector that I feel merits recognition as Unsung Heroes for the Galveston County Daily News.

I am proud to recommend the Nursing Unit of 9D [in Jennie Sealy Hospital] at the University of Texas Medical Branch at Galveston. Yes, they are paid to do the work that they perform. However, if in fact that is all that they did, I can attest with certainty that our experiences, outlook and confidence would not be in the place that it resides today.

In making this recommendation, it is surreal to understand that our son is but one of hundreds, if not thousands, whom receive this level of care and compassion on a routine basis.”

The father followed up recently with UTMB to let us know his son is now cancer free!

*Continued on page 7*
Russell Rodecap, Donnie Tisdale and Ronald Lloyd

Russell Rodecap, Donnie Tisdale and Ronald Lloyd are recognized for Best Care in Action this month for their leadership and approach to teamwork in the best interest of the collective UTMB by expediting television repairs in patient care areas.

The initiative initially began as the Health System sought ways to reduce the cost of repairs. Although the volume of calls for repairs was low, the importance of responding in a timely manner to make those repairs for our patients was high.

Russell, Donnie and Ronald assisted by piloting a program to service the repair requests personally, on behalf of UTMB’s Facilities Team. Not only was the team able to successfully assume the task of making the repairs, they provided a stellar response time for our patients and created a cost savings opportunity for UTMB!

SHOUT OUTS!

Eighteen UTMB nurses recognized by Good Samaritan Foundation for Excellence in Nursing

Each year, the Good Samaritan Foundation honors excellence in nursing in six categories, awarding nursing’s “best and brightest.” The award recognizes nurses who are leaders at the bedside and offer extraordinary and compassionate care and service. Nurses are nominated by their peers for their passion, leadership, mentorship and service to our Texas communities. Kudos to UTMB Nurse Michelle Karsten, who cares for patients in the Recovery Room in Jennie Sealy Hospital, for her recognition as a Silver Awardee in the Large Hospital category. Seventeen additional UTMB nurses were recognized with the Bronze Award: Shana Cobos, Kendall Glasgow, Paula McPhee, Melody Reiss, James Bozeman, Marre Dang, Kelli Gonzales, Melissa Gonzalez, Mary Hill, Yolanda Leyva, Katheryn Mazoch-Henson, Sara Niebuhr, Kelly Oliver, Charmaine Shannon, Jacquelyn Svoboda, April Vaughan and Andrea Wirt. Our nurses will be formally honored by the Good Samaritan Foundation at a luncheon in September 5, 2019.

Dr. Gulshan Sharma recognized as “CMO to know” by Becker’s Healthcare

Chief Medical and Clinical Innovation Officer Dr. Gulshan Sharma is one of “100 hospital and health system CMOs to know” according to Becker’s Healthcare. The list features physician leaders dedicated to strengthening their organizations through leadership development, patient safety initiatives, health information technology and quality improvement. Many have served as department heads and continue to practice medicine, while others focus on process improvement and patient advocacy. As proven leaders in their field, the physicians highlighted on this list have extensive experience building clinical and administrative teams, as well as building a positive culture for their organization. Becker’s editorial team accepted nominations for this list and selected CMOs and other equivalent titles through an editorial review process.
Josette Armendariz-Batiste recognized with the 2019 Anna Pearl Raines Award

Josette Armendariz-Batiste is this year’s Anna Pearl Raines Award Recipient. The Anna Pearl Raines Award is given in memory of Anna Pearl, who served the UTMB community for 49 years as a nurse, administrator, teacher to students, mentor and friend to practicing nurse faculty and trailblazing leader of brilliant intellect. Throughout her life, she remained dedicated to the notion of nursing as a commitment to lifelong learning and demonstrated it throughout her career.

Josette was chosen for her leadership during Hurricane Harvey and all of her efforts and support in the opening our new Clear Lake Campus. She has demonstrated lifelong learning by pursuing her Doctor of Nursing Practice degree, and she actively participates in community outreach, including service at the Luke Society where she volunteers to help provide care to the poor and homeless. Josette works hard to improve the patient experience and was behind new admission and discharge patient videos now on the patient televisions.

More Shout Outs...

A patient recently submitted the following note (patient names removed) to thank the staff of the Mother and Baby team for the care they provided her in 2012:

In 2012, I was pregnant with a baby boy. After months of complications, my son was born at 36 weeks at UTMB in Galveston. Although premature, he was pretty healthy, but had to be admitted to the children’s hospital.

He is turning 7 this year. When I think of a picture of a miracle, he is the first thing that comes to mind. I do not recall the names of those who helped with my many hospital days or even my labor—it was pretty intense. However, I would love to share the story of how the director [at the time] was for my son. She was there almost every time I was hospitalized with my pregnancy and stood by my side during the delivery. She was compassionate and prayed with me when we were risking a C-Section.

There was also a female nurse in the children’s hospital that taught my premie how to suck on a bottle so that he did not have to have a feeding tube. After a couple of days, she was a lifesaver, literally! She helped my son drink his first few ounces in a row.

Today, my son play football and baseball, is ending first grade and [is so handsome]. He is tall for his age, at 4 foot. He loves science, math and hearing the story of his birth at UTMB.

A UTMB employee submitted the following compliment:

Exactly a week ago this morning, I was coming out of surgery (gallbladder removal) at the Day Surgery Unit in Jennie Sealy Hospital. This morning, I’m back at my desk, and sharing with you because my care (and everything leading up to it and that has occurred since) has been absolutely exceptional. I believe in UTMB and never seriously considered going outside our organization, even though my role exposes me to times when we’re not at our absolute best. I went in expecting a good outcome, nervous about my first procedure that wasn’t a routine screening, and with positive but modest expectations for the experience overall.

Best Care? I can’t imagine any way it could have been done any better. Each person I encountered—from my surgeon and anesthesiologist to the intake person, pre- and post-op nurses and transporta-tion—was fantastic: friendly, professional, engaging, confident, obviously happy to be here and eager to provide good care to me. Everything was explained, my questions were answered, nothing ever felt rushed, and my impression was that my comfort and well-being were always a prime consideration. I’d give every person I encountered a 10, and what I find remarkable is that the experience was so uni-formly outstanding.

If we’re delivering this level of care throughout our organization, our future is bright. I’ve boasted about UTMB and the care I received to everyone who’s asked. My only regret is that in the anesthesia-induced haze and the week that’s passed, the names of most of the individuals I encountered have faded. I hope there’s a way to identify them and share my thanks.

Physicians, technicians, nurses and hospital personnel made me feel very special. One can tell their professionalism, dedication, and passion for what they do, and by this, I also felt their love and compassion for a complete stranger. Kudos to all the UTMB Health personnel in Galveston, Texas! This old combat Veteran is very grateful to all of you!

Since moving to US, this (patient is referring to the former Bay Area Regional Medical Center, now UTMB’s Clear Lake Hospital) was the only hospital I had been too, once before January 2017. So sad it closed. I came this year a few days after you re-opened. I am scared of hospitals, but I felt at home here. I went to the Cath Lab; everyone was wonderful. Ronald Mohler came to get me—he took care of me in 2017. I was so happy to see him. I was so scared in 2017 – he was wonderful – and everyone was so nice this time, as well.
July 3 – No session this week

July 10 – VA Aid and Attendance Benefits for Veterans and their Spouses
Presented by: Lori Spradlin, President, Silver Linings Home Care
VA Aid and Attendance is a benefit paid by Veterans Affairs (VA) to veterans and their spouses or surviving spouses that need assistance with daily care. It is paid in addition to a veteran’s basic pension. Join us to learn more about the program, qualifications for this lifetime benefit, monthly award amounts and the application and eligibility process.

July 17 – Diabetes BINGO
Presented by: Kelly Ferguson, RN BSN CEN
Learn more about diabetes while having fun!

July 24 – Community Care Services for Older Texans and People with Disabilities
Presented by: Neika Clark, Community Care Services Intake Supervisor- Region 6
Learn more about in-home services for older adults and people with disabilities who are functionally impaired and on a limited income. Examples of services include the following: Community Attendant Services and Family Care, Consumer Managed Personal Assistance Services, Day Activity Services, Home Delivered Meals, Emergency Response Services, Residential Care and Adult Foster Care. Ms. Clark will also provide information on the application and eligibility process for these programs.

July 31 – Patient and Caregiver Zen Hour with Pet Therapy
Caregivers take on many responsibilities, and often their emotional and self-care needs go unmet. Caregivers, family members and patients are invited to participate in the “Caregiver Zen Hour” which offers relaxing and comforting activities to decrease stress and provide a little quiet time. Other activities include: aromatherapy, adult coloring, conversations with Pastoral Care, inspirational reading and a massage chair.

For more information, contact Savannah Parks:
409-266-7542  |  sjparks@utmb.edu  | www.utmb.edu/health-resource-center