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[**Weekly Relays User Guide**](https://ispace.utmb.edu/xythoswfs/webview/_xy-12470404_1)

**TOPICS LEGEND**

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| C:\Users\krhensle\Desktop\SMALL LOGO (2).jpg | | WEEKLY RELAYS | | **April 8, 2021** |
| **YOUR DEPARTMENT NEWS** | | | **UTMB NEWS** | |
| Congratulations to Dr. Holly West  for her recent appointment as  Adjunct Associate Professor in the Physician Assistant Studies Program!  West, Holly_sm | | | **From the COVID-19 Clinical Task Force: Current guidelines regarding travel, in-person meetings and more**: As vaccination rates continue to climb and our most recent surge in COVID-19 cases subsides, the COVID-19 Clinical Task Force recently shared updates and reminders with the UTMB community that related to travel guidelines and other safety measures, including visitation policies and rules for holding in-person meetings. For more information or to read the full note, visit <https://utmb.us/4ty>.  **Skype for Business to be retired June 4:** Information Services has announced that the Skype for Business environment at UTMB will be retired on the evening of Friday, June 4. To help with the transition to Microsoft Teams, trainings conducted by a certified Microsoft trainer will continue to be available through May. The classes below are available for registration now via the UTMB Training Gateway at [https://innovation.utmb.edu/TrainingGateway/#](https://innovation.utmb.edu/TrainingGateway/).  You can filter the calendar by selecting Microsoft Teams under the ‘By Application’ tab from the top menu. Microsoft Teams 100: Getting Started with Teams (Beginner)Microsoft Teams 200: Getting More with Teams (Intermediate)Microsoft Teams 300: Teams and Mobile Solutions (Intermediate)For the latest Skype to Teams transition information, including a growing FAQ and Quick Start Guide, visit <https://utmb.us/4u4>. **IN CASE YOU MISSED IT Latest Health and Wellness with UTMB Health segment covers Pediatric Gastroenterology:** Dr. Annie Goodwin, assistant professor and provider within the Division of Pediatric Gastroenterology in the Department of Pediatrics, joined Meagan Clanahan, co-owner of the Houston Moms Blog, to discuss everything from irritable bowel syndrome (IBS) in children to reflux in newborns. Goodwin also advises on how to know when it’s time to get your child to a specialist. To watch the full interview, visit <https://utmb.us/4u3>.  **REMINDER**  **Register today for the UT System 2021 Spring Wellness Challenge:** Embark on a journey to a healthier you with the UT System 2021 Spring Wellness Challenge. The challenge begins April 12 and is open to all UT SELECT medical plan members and dependents age 18 and above. Those who participate will learn the benefits of making physical activity a part of your daily routine while going on a virtual tour of the country’s most exciting destinations. Sign up today at [www.utlivingwell.com](http://www.utlivingwell.com) or see [iUTMB](http://intranet.utmb.edu/iutmb/) for more details. The last day to register for the challenge is April 16. | |
| OPICS  LEGEND | PATIENT CARE EDUCATION & RESEARCH INSTITUTIONAL SUPPORT CMC | | | |
| **AROUND UTMB** (Use the legend above to quickly find items of interest to your team) | | | | |
| **GALVESTON CAMPUS**  **Second phase of drainage project will close Harborside Drive starting April 12:** Galveston’s Harborside Drive will be closed at 18th Street beginning April 12 for a major drainage project. The street, which abuts UTMB’s Galveston Campus, is scheduled to be closed all day and night until the project’s expected completion date of April 30. Traffic will be rerouted from 19th Street to the Strand to 16th Street and back to Harborside and vice versa in the opposite direction. Please be prepared for traffic delays and plan your commute accordingly during the closures.  **Pedestrian traffic to John Sealy impacted April 12 through 19:** Pedestrian traffic to John Sealy Hospital will be impacted April 12 through 19. As a reminder, John Sealy houses our Labor & Delivery, Mother & Baby and Pediatric services. To complete the façade work on the AB Wing, the east-west walkway will be closed during this timeframe, requiring incoming patients and visitors to John Sealy Hospital to enter either via Jennie Sealy Hospital or, via the exterior route, to take the sidewalk along Market Street and then take the north-south walkway at John Sealy to the entrance. Staff entering John Sealy Hospital may badge into the east entrance as needed.  Additionally, as a reminder, the John Sealy Hospital front entrance renovation work will begin on the front entrance vestibule of John Sealy Hospital. The entrance will remain open. This work is anticipated to last approximately one month. Barricades and signage will be in place and adjusted as needed. Please inform patients and staff of the renovation as needed.  **Patient Safety and Experience Reporting now accessible in Epic:** To streamline the ability of Health System employees to share feedback about patient safety and patient experience, UTMB’s reporting system, RLDatix, will be interfaced with Epic, effective April 13. This new interface will allow clinicians and anyone using the Epic EMR to access the reporting system directly within Epic through a single sign-on feature—this means it will not be necessary to conduct a separate login into RLDatix in order to report. The RL DATIX form will also “auto-populate” patient demographics when initiated from within Epic. Staff may still access the RLDatix via the iUTMB homepage, as well. Information on patient safety concerns and events, as well as patient experience, is important to providing Best Care! A workflow bulletin on how to use the new interface can be accessed ​pdf icon[here](https://liveutmb.sharepoint.com/:b:/s/collaboration/rldatix/EfkodTrhhT5BqibMSyO4lssBADWdoxDdrLZHhVAhm5mJbA?e=UpIu3u).  **Patient Centeredness Tip—Communication with Patients is Essential:** An [article](https://hbr.org/2021/04/understanding-unhappy-patients-makes-hospitals-better-for-everyone) recently published in the Harvard Busines Review reminds us: “When a patient is given contradictory information from different caregivers…that is not something to be shrugged off. An error has occurred; it may be no particular individual’s fault, but it is a system failure — and one that understandably shakes patients’ confidence in their care.” To help ensure our messages to the patient and their family are coordinated, please work with the primary care team as much as possible to communicate with patients. Discussions involving patient consent for procedures should always be conducted by the provider performing the procedure. Patients are more likely to follow advice if they have a good relationship with their care team. Building a good relationship with the patient is essential to patient care!  **Weekly Wellness Recap:** Shared by the UTMB RISE (Resilience in Stressful Events) Task Force, these tips are just one way we can all work to stay emotionally healthy during the COVID-19 pandemic. Here are this week’s tips:   * Try unplugging yourself from technology for part of the day—focus on your breath and what’s around you. * Notice your habits when anxious and think of activities to improve these. * Actively appreciate the good things in your work relationships today. * Reflect on the positive adaptations you’ve made during the past year, as a team and for yourself. * Make your workplace more helpful and supportive—start with yourself and role-model the way. * Make a list of three good things that happened today. * Take a walk today and focus on awe, beauty and wonder. * Do what you can to help others today. * To be healthier and happier, find a way to connect with your community today. | | | **The Joint Commission Preparedness Questions of the Week:** **Q: How are units informed that a patient requires isolation precautions?**  A: Infection Control and Healthcare Epidemiology will contact units as needed by phone. Isolation orders are entered into Epic by the physician and/or an infection preventionist; an isolation flag is entered by Infection Control.  **Q: How does Infection Control know that a patient requires isolation?**  A: Infection Control reviews laboratory results daily to identify multi-drug resistant organisms (MDROs) using an automated reporting system interfaced with the lab to identify patients requiring isolation.  **Q: How should you communicate with others in the unit and throughout the hospital that a patient on the unit requires isolation precautions?**  **A:** Precaution signs, communication during hand-offs and patient~~s~~ charts all indicate which precautions are required, as well as the specific organism(s) affecting the patient.    Of note: Extended Contact Precautions should be implemented for patients with diarrhea of an unknown cause until the patient is tested for *C. difficile*. When the test is ordered, an automatic isolation order is generated in Epic. Patients who test positive for *C. difficile* will remain on precautions until all of the following conditions are met:   1. Patient is receiving adequate treatment for *C. difficile* 2. Symptoms are resolved for 48 hours 3. Patient is discharged or transferred from the room so that all surfaces in the room may be cleaned thoroughly (Note: patient must be bathed, placed in a clean gown and placed in a clean bed when transferred to a new private room) 4. Approval is received from Infection Control 5. In TDCJ Hospital Galveston, the following applies: Because most rooms are semiprivate, Infection Control will review requests to discontinue isolation on a case-by-case basis     More information on Infection Control and Healthcare Epidemiology can be found at <https://www.utmb.edu/hce>. All UTMB Q&As from Weekly Relay Notes and all TJC Preparedness information can be accessed at <http://intranet.utmb.edu/qhs/the-joint-commission>. | |
| **DID YOU KNOW?** UTMB is excited to raise awareness of our clinical teams, services, and relevant health and science topics. With that goal, we have recently launched a new Health Blog that is available online at <https://www.utmbhealth.com/health-blog>. Content for this page is curated by Marketing and Communications and represents a collaboration with the Academic Enterprise, Health System and Institutional Support areas. The effort captures and assembles content to be shared with consumers across various digital channels. Check the page regularly for new posts and information, and submit content suggestions and inquiries to [social@utmb.edu](mailto:social@utmb.edu). | |