



QUALITY NEWSLETTER

Hello everyone! Welcome to the 5th issue of our monthly newsletter. Our aim is to continuously keep you updated on quality assurance, patient safety, risk management policies and standards. We encourage the staff contributions on the related topics.

This month's newsletter is JCI exclusive! Re-live the glorious and unforgettable moments through snapshots!



Quality healthcare and patient safety is always a high priority for The New Mowasat Hospital (NMH). The staff has been working on improving every aspect of our hospital, the announcement of dates of the survey got us focused. A composite taskforce comprising of both clinical and non-clinical staff was formed. Targets were set out, regularly monitored and with immaculate teamwork and high morale, every member worked tirelessly even beyond working hours to ensure that our NMH was prepared well in advance for its third survey.

On 6th February 2017 we welcomed our team of surveyors, a team of three. Spanning over four days, going through with a fine comb, NHM underwent the survey based on JCI Standards set for International Hospitals.

The JCI team interviewed the NMH staff and patients to collect details on patient safety aspects, their rights, medication management and various other important aspects of healthcare. The JCI looked into 1,200 different fundamentals under 14 chapters to measure the quality of healthcare provided.

The eagerly expected Exit Findings were declared on the last day in a packed auditorium. All three surveyors shared

their results and inputs and collectively they were pleased to inform that NMH belongs to that group of minority who went through the accreditation for the third time and that in this survey it scored the highest ever 98.5%! And out of fourteen, NMH scored 100% compliance in five chapters which include, Quality Improvement and Patient Safety, Staff Qualification and Education, Patient and Family Education, Patient and Family Rights and Care of Patients.

It was a great moment of jubilation for all of us. Everyone cheered and the auditorium burst into loud applause. Every face was smiling and tears of joy rolled down many cheeks. All the hard work had finally paid off. A copy of the Draft Exit Report was presented to the hospital CEO, Mr. Abdullah Al-Wazzan. The staff clicked happy photos with the surveyors to capture these moments forever in their memory.

Congratulations and Well Done Team NMH. You Do Us Proud!





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Congratulations everyone for achieving an excellent report from JCI Surveyors!

With this proud achievement New Mowasat hospital (NMH) has continue to hold the title of first and the only hospital in Kuwait to maintain the two accreditations with an outstanding results from the two prestigious accreditation bodies. This will go a long way in further improving the healthcare services provided to patients and formulate guidelines for developing quality standards to gain satisfaction, consent and trust of the community.

NMH leadership, medical, nursing, support services and administrative staff demonstrated an excellent teamwork and spirit in overcoming obstacles to achieve this milestone. With this continuous journey towards improvement evidenced by accreditation, NMH has carved their presence for recognition among the leading healthcare providers in the world.

Well done team NMH!!

Shaheena Sheikh- Quality Systems Manager

New Mowasat Hospital has done it again, as a team. Congratulations to all NMH staff on a job well done. Preparing for JCI was challenging but an exciting one and I am fortunate and honored to be a part of this exciting journey.

Asmina Pethani (Quality Coordinator)

Strength, determination, challenges & confidence counts your success and yet again we have proven quality of care at NMH by maintaining the Gold Seal of JCI accreditation. Congratulations Team NMH!!

Muhammad Younus Ijaz (Quality Officer)

Kudos to team NMH and our leaders for the splendid performance in JCI. Cheers to the collective hard work and exemplary leadership.

Sakina Shikari (Quality Officer)

Alone we can do so little, together we can do so much. Congratulations to all. Let us continue the same team work to achieve more and more.

Swapna Thottunkal (Nursing Supervisor)

Always remember that good teams become great ones when the members trust each other enough to surrender the "Me" for the "We."

Suzanne Dela Paz Cerezo (Nursing Supervisor)

Success doesn't come to those who want it; it comes to those who work hard! Congratulations team NMH for your good team work and for your success!

Erum Sadrudin (Infection Control Coordinator)

Quality of care in our hospital is the degree to which health care services for individuals and populations increase the probability of desired health outcomes and are consistent with current professional knowledge of best practice.

Fatmeh Mohammad Ali Sannouri (Director of Nursing)



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Have another day - by being safe today!

Jonathan Basker (Maintenance Engineer)

Do not give up on your dreams. Voice out for what is right. No matter what comes in your way, just believe in yourself and fly with the blessings of God.

Sara Jamal Ali Zaher (Clinical Pharmacist)

Combined team effort & action creates consistent results. Let's continue to face the challenges in achieving high quality health care standard & be proud of what NMH had achieved."

Florievee (HN-OPD)

If you can dream it, you can do it! Proud to be a member of NMH team!

Sa'id Alkhateeb (Manager - Plant & Facilities)

It's an amazing experience to be a part of the task force team. We are thankful to the people who supported and mentored our department. Working together in unity towards our vision would give power to achieve more than what we expected.

Angelita Q. Nogoy (Medical Records)

I am very proud to be part of NMH team. JCI accreditation has motivated and assisted our organization to deliver an excellent and safety service for our clients. I believe the spirit of the hospital management has led us to achieve such results. We must ensure that the spirit of the team work must continue with the same level of commitment.

Yasser Tarabay (Asst. Manager front desk)

Always remember that good teams become great ones when the members trust each other enough to surrender the "Me" for the "We."

Suzanne Dela Paz Cerezo (Nursing Supervisor)

I am thoroughly enjoying my time working as Obs/gyne doctor in NMH for so many years but being a member of JCI taskforce was a huge advantage to me and it always been an absolute joy to work with the whole team.

Dr Fatma Lulu (OBS/GYNE Registrar)

As member of JCI task force, I want to congratulate everyone in New Mowasat Hospital for the great achievement. I also want to thank everyone in the HR team for their great efforts and contributions to complete all the requirements which couldn't be done without their commitment and hard work.

Heba Wafik (Head of workforce planning & Talent Acquisition unit; Human Resources)

Don't take rest after your first victory because if you fail in second, more lips are waiting to say that your first victory was just luck.

Zamir A.G.Kauchali (Supervisor, Fire & Safety)

New Mowasat Hospital scaling new heights.

Raja Rajan Raja Kannu (Housekeeping Supervisor)

I thought bees are the best creatures who explain very well what team work is!!

But now I have changed my mind. New Mowasat Hospital team is the best explanation of team work. Congrats to all of us we did it and we will keep on doing it.

Ali Kathem Mohammed Bader (Patient Relation Officer)

The starting of any accomplishment is desire. We desired this success & here we have it. Kudos to all who proved that sky is the limit when NMHites work together.

Ebey George (Officer-Talent Development Unit, Human Resources)

Congratulations!

Elsayed M. Darwish (Security Supervisor)



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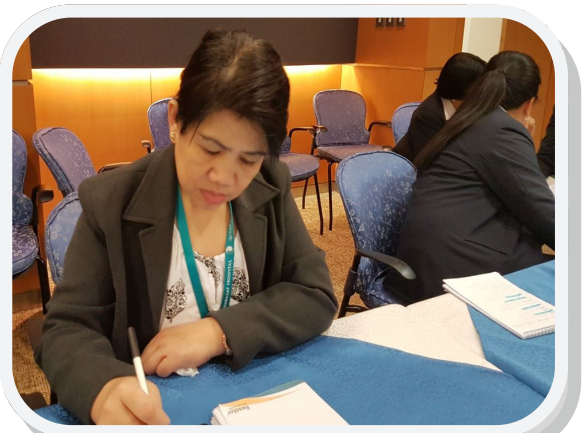
JCI Task Force Team





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JCI- A Pictorial Journey





Ask Me 3

Clear communication is the foundation for patients to be able to understand and act on health information. The NMH is promoting Ask Me 3 questions. Ask Me 3 is a quick, effective tool designed to improve health communication between patients and providers. Developed by leading health literacy experts, Ask Me 3 promotes three simple but essential questions that patients should ask their providers in every health care interaction. Providers should always encourage their patients to understand the answers to:

What is my main problem?

What do I need to do?

Why is it important for me to do this?

Using these techniques can improve patient participation in the treatment plan and their understanding to healthcare need.

What Can Providers do? Health literacy is essential for good patient care and positive health outcomes.

- ⇒ Give patients the answers to their 3 questions
- ⇒ Along with encouraging your patients to use the Ask Me 3 approach, simple techniques can increase your patients' comfort level with asking questions.
- ⇒ Create a safe environment where patients feel comfortable talking openly with you
- ⇒ Use plain language instead of technical language or medical jargon
- ⇒ Sit down to achieve eye level with your patient
- ⇒ Use visual models to explain a procedure or condition
- ⇒ Ask patients to "repeat back" the instructions given
- ⇒ Provide patients Ask me 3 instructions/brochure

Staff Corner

Answers to last month's Quiz are:

Q1: What is the Vision and Mission of New Mowasat Hospital?

Answer: Vision: Caring for Generations and Mission: Quality with Compassion and Excellence.

Q2: What does C.A.R.E stand for in our Core Values?

Answer: C: Care and Compassion A: Accountability R: Respect E: Excel-lence and Ethics

Read the newsletter and answer the following True or False :

3) When is Time out performed?

Answer: b. Immediately before the incision in the OR.

4) The marking process should involve the patient.

Answer: True

5) The completed and signed 'Time out checklist' should be placed in the patient's medical record.

Answer: True

The WINNERS are:



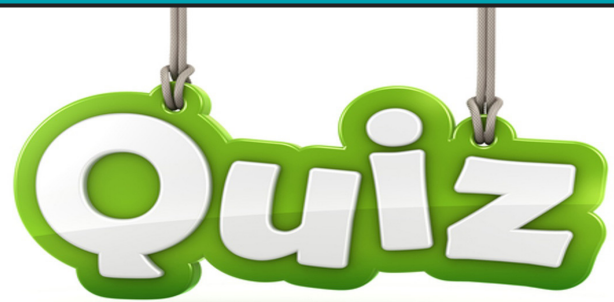
Laijo Joseph
RN (OPD)



Jeena Abraham
RN (OB3)



Bissy M. Alias
RN (NICU)



Q1) What is ASK ME 3 ?

Q2) What you can do when patient ask questions ? Write any three points for consideration?

Q3) Use of Medical Terminology with patients is good for their understanding of medical care. A) True B) False

Q4) What is Material Safety Data Sheet (MSDS) ?

Q5) All hazardous material must have a label which indicate chemical's expiry date . A) True B) False

Please write your answers on a sheet of paper with your full name, employee number and department, and send it to QSM office. Alternatively email your answers at

ssheikh@newmowasat.com Or sminhaj@newmowasat.com.

Submission deadline is 15th April 2107.



Speak Up for Patient Safety

See it



Say it



Fix it



Empower Your Voice: Speak up, Be Heard, Get Action.

REMEMBER IGNAZ SEMMELWEIS?

Over a hundred years ago Dr. Semmelweis demonstrated that routine hand-washing can prevent the spread of disease.

“Dr. Semmelweis worked in a hospital in Vienna whose maternity patients were dying at such an alarming rate that they begged to be sent home,” said Julie Gerberding, M.D., director of CDC’s Hospital Infection Program. “Most of those dying had been treated by student physicians who worked on cadavers during an anatomy class before beginning their rounds in the maternity ward.” The result was a death rate five times higher for mothers who delivered in the hospital than for mothers who delivered at home” said Dr. Gerberding.

In an experiment considered quaint at best by his colleagues, Dr. Semmelweis insisted that his students wash their hands before treating the mothers and deaths on the maternity ward fell fivefold.

“This was the beginning of infection control,” Dr. Gerberding said. “It was really a landmark achievement, not just in healthcare settings, but in public health in general because today the value of hand washing in preventing disease is recognized in the community, in schools, in child care settings, and in eating establishments.”

<http://www.cdc.gov/od/oc/media/pressrel/r2k0306c.htm>



MEDICATION SAFETY FOCUS: Inpatient Orders “Do Not Use these Abbreviations”

Consider clarity for the benefit of safety

Do Not use (Intended meaning)	Potential Problem	Use Instead
U, u (unit)	Mistaken for “0” (zero), the number “4” (four), causing a 10 fold overdose or greater (4U seen as “40” or 4u seen as “44”) or “cc”	Unit
IU (International Unit)	Mistaken for IV (intravenous) or the number 10	International Unit
Q.D., QD, q.d., qd (daily), Q.O.D., q.o.d, qod (every other day)	Mistaken as q.i.d., especially if the period after the “q” or the tail of the “q” is misunderstood as an “i”	Daily Every other day
Lack of leading zero before decimal dose e.g .5 mg (0.5 mg)	Mistaken as 5 mg if the decimal point is not seen	0.5 mg Use zero before a decimal point when the dose is less than a whole unit
qhs, qn (Nightly at bed time)	Mistaken as “qhr” or every hour	Use “nightly”
MS, MSO4 and MgSO4	Confused for one another. Can mean Morphine Sulphate or Magnesium Sulphate	Use complete drug name Morphine Sulphate and Magnesium Sulphate
µg (Microgram)	Mistaken as “mg”	Use “mcg”
S.C. or S.Q., sub q (for subcutaneous)	SC mistaken as SL (sublingual); SQ mistaken as “5 every;” the “q” in “sub q” has been mistaken as “every” (e.g., a heparin dose ordered “sub q 2 hours before surgery” misunderstood as every 2 hours before surgery)	“Sub-Q”, “subQ”, or “subcutaneously”
D/C (for discharge, discontinue)	Premature discontinuation of medications when D/C (intended to mean “discharge”) has been misinterpreted as “discontinued” when followed by list of drug	“Discharge” “Discontinue”
cc	Mistaken for U (units) when poorly written	mL or millilitres
Trailing zero after decimal point e.g 1.0 mg	Mistaken as 10 mg if the decimal point is not seen	1 mg Do not use trailing zeros for doses expressed in whole numbers



COMMUNICATION: PATIENT SAFETY REQUIRED ORGANIZATION PRACTICE CHALLENGES AND OPPORTUNITIES DURING HANDOFFS

“The primary objective for endorsing (also called ‘handing off’, ‘sign-out’ or ‘end of shift report’) a patient from one provider to another is to provide accurate information about patient’s care, treatment services, current condition and any recent or anticipated changes”. The number and types of endorsements for any given hospitalized patient can vary and may involve physicians, nurses, pharmacists, transport, and even food service.

CHALLENGE:

Endorsements are not simply a mechanical means for transmitting and receiving information. In medical care, an endorsement requires:

THE SENDER TO:

Consider a patient’s present condition. Consider the patient’s likely future over the next 8-12 hours.

THE RECEIVER TO:

Comprehend what is being transmitted is confident about the clarity and reliability of the message.

There can be various social, linguistic and technological factors that might contribute to a near miss or adverse event during an endorsement. Factors may include:



Patient handover process

- **Handover is ‘the transfer of professional responsibility and accountability for some or all aspects of care for a patient, or group of patients, to another person or professional group on a temporary or permanent basis.’**



- Interruptions
- Lack of time to listen all the reports
- Inaccurate descriptions or lack of information provided, omitted information
- Second order handoff (Charge nurse summarizes information)
- Various behaviors that might negatively affect the ability to listen and absorb the information (e.g. not writing down information, eating, having parallel conversation)

OPPORTUNITY:

New Mowasat Hospital recognizes that the opportunity for improvement lies in the adoption of ‘best practices’ used by high reliability industries (airlines and manufacturing). Such best practices are often based on the structured communications technique such as ‘transfer checklist’ which reduced the reliance on memory.

