



JCI Survey Countdown

8

WEEKS

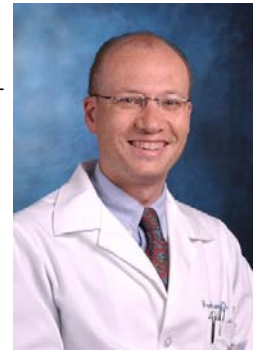
ACCREDITATION AND RISK MANAGEMENT OFFICE

Accreditation Newsletter

Quality Quote of the Month: Minds are like Parachutes; they work Best when open. - Lord Thomas Dewar

Message from Deputy Chief of Staff

Quality Care in Surgery



One of the most perplexing issues for surgeons has been the assessment of quality of care. The wide variation in outcomes by both hospitals and surgeons suggests ample opportunities for improvements and has placed surgeons at the forefront of the quality of care revolution. In keeping with the mission of the Joint Commission of continuously improving the safety and quality of care provided to patients, AUBMC aims to take a leadership role in surgical outcomes assessment and delivery of first class quality surgical care. We owe it to ourselves and our patients to master the issues that relate to negative outcomes and correct them.

The use of outcomes to evaluate the quality of surgical care however, implies the need for detailed clinical data for risk adjustment. The meticulous collection and meaningful portrayal of relevant quality data and information is therefore vital to the success of our mission. This data collection and analysis is best achieved though a validated, risk-adjusted, outcomes-based program to measure and improve the quality of surgical care such as the National Surgical Quality Improvement Program (NSQIP) administered by the American College of Surgeons.

The quality of surgical care cannot improve unless we harness the knowledge and creative energy of surgeons for the purpose of redesigning the intricate process that constitutes modern health care and affect surgical outcomes. AUBMC is committed to embarking on this quality improvement process as another manifestation of its ongoing commitment to the delivery of the best health care not only in Lebanon but also in the Middle East.

Faek Jamali, MD, FACS
Deputy Chief of Staff,
Department of Surgery

New and Revised AUBMC Policies & Procedures

The following new and revised policies will be distributed to your AUBMC Policies and Procedures Manuals. Please make sure you read them. Soft copies of these policies and procedures are available on: http://his.aub.edu.lb/accrm/policies/

- Drugs and Other Allergy Status Documentation [New] — AOP-MUL-001
Patient and Family Education [New] — PFE-MUL-001
Patients Enrollment in Clinical Research [New] — PFR-MUL-003
Staff Authorized to Make Entries in the Medical Record [New] — MOI-MUL-005
Performance Appraisal [New] — SQE-HRD-005
Noise Reduction [Revised 2nd Edition] — GLD-MUL-001
Competence Assessment [Revised 2nd Edition] — SQE-HRD-001
Orientation Plan [Revised 2nd Edition] — SQE-HRD-004
Patient Controlled Analgesia [Revised 2nd Edition] — COP-MUL-006

WINNERS OF THE 12TH ACCREDITATION & DI Staff Awareness Questionnaire
Each month five names are drawn from five different categories. One person from Category 5 will have the chance to WIN a \$150 gift (Globe Terrestre).
This month's winner of the \$150 gift is Najwa Zneit, PN, OR. The other four winners received various other gifts.
Category 1 (Nurses and Physicians) Roula Nicolas, RN, 10 North
Category 2 (Patient Support Departments) Ahmad Jundi, Senior Night Lab. Tech, PLM
Category 3 (Administrative Staff) Rana Saadeh, Floor Clerk, 4 South
Category 4 (Hospital Support Departments) Zaher Hamzeh, Dispatcher, Plant Engineering
Category 5 — Everyone that sends in a questionnaire has a chance to win \$150

Message from the Chief of Staff: On the Road to Accreditation

The AUBMC submitted an official application for the final survey by the Joint Commission International. The survey is scheduled to start on **October 16, 2007 and continue to include Saturday October 20, 2007.**

The decision to obtain the JCI accreditation is a strategic one that was made by the Medical Center leadership in line with the AUBMC mission statement. This decision was supported and approved by the AUBMC governance (AUB Board of Trustees). The benefits of obtaining Joint Commission recognition run beyond the accreditation certificate itself. The benefits impact many aspects of patients, nurses, physicians, other professional and support staff and, the community at large.

In preparing for this major event, the AUBMC staff are urged to be familiar with the AUBMC policies and procedures and adhere to their content. Department leaders are also responsible to review their services and ensure that they are provided in a safe manner. Heads of departments, services and, units are expected to have developed their service performance improvement indicators and are monitoring them on a monthly basis.

Working towards the accreditation requires a group effort in a multidisciplinary approach. Let us prove that we, at AUBMC, are capable and worthy of this achievement.

Good Luck

Saleem Kiblawi, MD, FCCP

Chief of Staff, Accreditation Survey Coordinator



MAGNET News

The Vice President for Medical Affairs, The Raja N. Khuri Dean of FM&MC issued a statement to the AUBMC community on August 7, 2007 announcing that the Medical Center is being considered by the American Nurses Credentialing Center (ANCC) for the prestigious designation of MAGNET. The Nursing Services Department at AUBMC has officially submitted the application for the American Nurses Credentialing Center (ANCC) – MAGNET Recognition Program in August 2007.

VP/Dean Cortas indicated that “At times of growing challenges in healthcare, MAGNET designation becomes the evident answer for building a positive work environment and achieving better patient outcomes”. He added: “Although MAGNET Recognition is awarded for excellence exclusively in nursing care, its benefits impact many levels: patients, nurses, physicians, as well as the entire medical center and community”.

VP/Dean Cortas concluded his statement by encouraging AUBMC staff to support the Nursing Services Department in this journey towards the pursuit of excellence.

The 2007 International Patient Safety Goals are Extended for 2008

We received information from the Joint Commission that the International Patient Safety Goals issued in 2007 will continue to apply during 2008.

What does this mean for us at the American University of Beirut Medical Center?

The six International Patient Safety Goals are absolute requirements for us to show compliance with. This is in addition with the rest of the JCI standards.

Now that we are preparing for the expected accreditation survey during the period of October 16 – 20, 2007, we should make sure that our staff are aware of the International Patient Safety Goals as presented in the “blue and yellow” poster that was distributed to all departments and services throughout AUBMC. Should you need more of these posters please contact the *Accreditation and Risk Management Office* at extensions 6685/6/7/8.

Along the same lines of preparation for the JCI survey, and after reviewing the consultants report, the Accreditation Office made sure that we have the related policies to help the staff comply with the requirements of these goals. Please refer to the following policies in the Policy and Procedure Manuals:

Goal # 1: COP-MUL-009

Goal # 2: AOP-MUL-002, COP-MUL-011, COP-MUL-018

Goal # 3: PHA 10-014

Goal # 4: COP-MUL-003

Goal # 5: Infection Control & Prevention Program Manual

Goal # 6: NSG-QPS-003

Accreditation & Risk Management Office

