



A Message from the Medical Center Director

It is an honor and a privilege to assume the position of Director of the American University of Beirut Medical Center (AUBMC) as it dedicates its efforts and resources towards achieving full accreditation by the



Accreditation, in my belief, is a statement of the commitment of the AUBMC to nurture an institutional culture of providing quality care, to bolster the confidence of our patient population in the institution as the destination of choice, and to strive towards becoming the premier provider in Lebanon and the region.

Joint Commission International Accreditation (JCIA) and to express my sincere belief in the accreditation process and my deep commitment towards achieving this common goal.

The coming months will demand that we, collectively and at all levels, go well beyond the possible to position AUBMC most advantageously as we prepare for the initial visit of the JCIA and eventually for the official survey.

However, accreditation is much more than the motion of preparing for the survey, showing evidence of complying with the standards and eventually prominently displaying the certification.

I am confident we can do it.

Munthir Kuzayli, Medical Center Director
American University of Beirut Medical Center

Are YOU wearing your ID Badge?

Have you been asked—"Where is your ID Badge" lately? The Identification Badges Policy is in the AUBMC Policy and Procedures Manual. Please refer to this manual for further details.

The following policies are pertinent to **ALL** healthcare providers and employees of the Medical Center:

- ▶ Hand Hygiene PCI-MUL-002
- ▶ Identification Badges GLD-ADM-001
- ▶ Complaints and Compliments Guidelines GLD-MUL-003
- ▶ Noise Reduction GLD-ADM-003

Questionnaire #2 Winners:

Mr. Khalid Hanoun, Messenger, Department of Surgery
Ahmad Takkoush, RN, CCU, Nursing Services
Ramez Wazzeah, Radiographer, Diagnostic Radiology
Rana Kaissi, Clerk, OPD-Medicine
Mohamed Hajj Hussein, Clerk, Pathology & Laboratory Medicine

Announcement

The Medical Staff Bylaws have been approved by the Board of Trustees and will be printed and distributed in due time.

Letters to the Editor E-mail: accrisk@aub.edu.lb

We encourage all staff to contribute to this newsletter by questions, viewpoints and special interests in issues related to Performance Improvement, Accreditation, and Risk Management.

Please send your comments to the Accreditation and Risk Management Office, Phase I, 8th floor

Update on New AUBMC Policy and Procedure Manuals

The following policies have recently been added to your AUBMC Policy and Procedure Manuals. Please make sure you have read and signed acknowledgment of the pertinent new policies.

- ▶ Patient Discharge Instruction—ACC-MUL-004
- ▶ Pain Assessment & Reassessment—COP-MUL-005
- ▶ Pain Management—COP-MUL-007
- ▶ Patient Related Risk Management—QPS-MUL-001
- ▶ Complaints and Compliments Guidelines—GLD-ADM-003
- ▶ Continuing Medical Education
- ▶ Multidisciplinary Assessment and Reassessment of Patients—AOP-CLN-001

Good Luck Wish!

To the Staff of the Department of Pathology & Laboratory Medicine
for their upcoming CAP Re-accreditation—March 2006

ANSWERS to the First Questionnaire:

1. Which of the following is NOT true about the patient consent policy at AUBMC? *C is correct*.—Signing the informed consent is optional for the special (high risk) procedures such as surgical operations and blood transfusion.
2. In case of fire? *A is correct*—Evacuate via the staircase. (only after the evacuation ordered is given)
3. Which of the following is NOT true about AUBMC policies and procedures manual? *A is correct*—The AUBMC policies and procedures manual should be kept under lock.
4. Incident reports are? *A is correct*—Completed by the employee who witnessed an incident and signed by the supervisor.
5. RACE stands for? *A is correct*—Rescue, Alarm, Contain, Evacuate.
6. 'Time Out' is? *E is correct*—a. Performed immediately prior to commencement of surgery/procedure b. Used to verify the correct patient, correct surgery/procedure, and correct site/side.
7. The Noise Reduction policy states that? *C is correct*— Loud noise, beyond the normal speaking level, shall be avoided at all times.
8. Identification badges? *C is correct* Must be worn by employees while on or accessing the AUBMC facilities.
9. The Joint Commission 2006 Patient Safety Goals include? *D is correct*— All of the above
10. Central lines? *B is correct*—Sterile technique shall be used while inserting central lines.

2006 National Patient Safety Goal #1: Improve the Accuracy of Patient Identification

“The intent of this goal and requirement is two-fold:

- (1) To reliably identify the individual as the person for whom the care, treatment, or service is intended and;
- (2) To match the care, treatment, or service to that individual. Therefore, the two patient-specific identifiers must be directly associated with the individual, and the same two identifiers must be directly associated with the medication, blood products, or specimen tube.” *Adapted from JCAHO*

Here at the AUBMC, all staff are encouraged to understand and practice the above steps when providing care to patients. Along these guidelines, a patient identification policy is under preparation. According to this policy, ant two patient identifiers, other than bed or room number, will be used. Staff are expected to perform active (rather than passive) identification before performing:

1. Administration of Medications
2. Administration of Blood or Blood Products

3. Drawing blood samples or taking other specimens for clinical testing
4. Performing a special “high-risk” procedure or surgery

It is well documented that an effective patient identification system could reduce medical errors.

Also at AUBMC, verification of patient identification is conducted prior to surgery or “high-risk” procedures. **“TIME OUT”** is conducted immediately prior to the start of any surgery or invasive procedure to confirm the correct patient, procedure, site, and availability of informed consent. For this purpose, the Pre-operative, Pre-procedure Verification Form is completed and filed in the patient’s medical record.

At this point, I would like to present a real challenge to AUBMC staff members:

AVOID THE USE OF ROOM OR BED NUMBER in your daily communication while identifying a patient.

Accreditation Administrator & Risk Manager