New WakeMed Physician Practice Established

WakeMed recently announced the launch of Wake Specialty Physicians, LLC, a new company under the WakeMed corporate umbrella. A “spin-off” of WakeMed Faculty Physicians (WFP), Wake Specialty Physicians includes our private, community-based physician practices, which have grown over the years to meet our community’s needs. Serving patients at WakeMed North Healthplex and in Wakefield, Cary and Brier Creek, the practices are currently welcoming new patients. They also present a great option for WakeMed employees who are looking for personal medical care from a familiar, trusted name. BlueCross BlueShield and other managed care plans are accepted. New patients welcome.

WakeMed’s growing physician practice network now includes WFP; Wake Specialty Physicians and Wake Orthopaedics. All are led by Susan Weaver, MD, who was named senior vice president of WakeMed Physician Practices. A brief overview of each practice is below.

WakeMed Faculty Physicians

Based on the Raleigh Campus, WFP clinics include more than a dozen specialties and will continue to:

• Offer specialty physicians to medically underserved or uninsured patients.
• Provide 24-hour call coverage in numerous specialty areas.
• Offer specialty physician services to support WakeMed’s broad range of inpatient services.
• Provide graduate education to medical students and residents from the University of North Carolina at Chapel Hill School of Medicine.

Wake Specialty Physicians

The new Wake Specialty Physicians practices include many of the same physicians who practice at WFP; however the new model gives physicians the opportunity to practice medicine in a variety of settings. It offers the same high quality medical care in a private practice setting and expands physicians’ scope of practice while providing services closer to home for patients. The new Wake Specialty Physicians currently includes private practices at locations shown at left. The website is coming soon! It will be available at www.wakespecialtyphysicians.com.

Wake Orthopaedics

Similar to the Wake Specialty Physicians model, Wake Orthopaedics, LLC, is a wholly-owned, not-for-profit subsidiary of WakeMed that was established in 2003. It is a private practice that provides orthopaedic services throughout the region and is comprised of nine physicians with subspecialties in spine surgery, joint replacement, hand and shoulder, sports medicine and trauma. They are managed by an outside agency. Physicians work for both the practice and WFP.

SIM Center team members

ll to Dr. Amar Patel, manager; Fran Powell, simulation education specialist; Susan Jackson, vice president & chief learning officer; and Christine O’Neill, RN

The Area’s First SIM Center to Open on the Raleigh Campus

This May, WakeMed will open Phase I of the region’s first Medical Simulation Center (SIM Center), a 3,800 square foot, state-of-the-art facility. Made possible in part by start-up funds from The Duke Endowment, the WakeMed SIM Center is designed to facilitate realistic clinical training and education for nurses, physicians and caregivers at WakeMed and throughout the region. It presents a controlled yet realistic environment that offers health care providers the opportunity to practice skills while gaining clinical competence and confidence.

The SIM Center’s patient simulators, ranging in age from newborn to adult, mimic the responses of human patients. They breathe, bleed, respond to medications and can even “die” if not cared for correctly. Real-time scenarios allow health care providers to practice various procedures, treatments and surgeries on the patient simulators. The scenarios are recorded so that participants can review, evaluate and learn from their performance.

During a visit to the CTSU, Harriet Stephens, RN, (Nursing Education) (third from left) uses an ultraviolet light to “test” the hand-washing techniques of Erin Sloan, RN, and Kimberly Roof, RN, (both of CTSU).

The JCAT

The Joint Commission Aptitude Test (JCAT) program continues to attract many participants. Since late January, staff have been going online to take weekly quizzes aimed at helping review the JC’s National Patient Safety Goals. Many employees have already earned a free prize. In late April, staff who participated in at least six of the 12 quizzes will be eligible to take the JCAT exam, an online, comprehensive review exam consisting of 30 questions. Those who earn a 100 percent on the exam will be entered into a drawing for eight hours of free PDO. The program will repeat until the JC visit occurs, and throughout the year, up to 12 employees can earn free PDO.

The JCAT and the JC Trivia Wheel

Thanks to the creativity of Sharon McDonald, RN, clinical educator/supervisor, (CTSU), and many other clinical educator/supervisors, the JCAT has been chugging to units on the Raleigh Campus and Cary Hospital on Tuesday and Thursday nights (8 pm to midnight). A cart decorated like a train is staffed by rotating educator/supervisors who ask staff JC preparation questions in exchange for candy. For those who answer correctly, the cart also offers a special ultraviolet light that can be held up to staff’s hands to “test” hand-washing techniques.

(continued on page 6)
WakeMed Raleigh Campus Named One of America’s Leading Hospitals

A Consumers’ Checkbook survey, to be reported in the May–June issue of AARP The Magazine, names WakeMed Raleigh Campus as one of the leading hospitals in America. This information is also included on an interactive map on AARP’s website launched earlier this week listing top-ranked hospitals in the U.S. by geographic area.

Consumers’ Checkbook surveyed doctors from across the country and collected 140,000 ratings of hospitals in their own communities. The survey found that 66 percent of doctors would rate WakeMed Raleigh Campus as good or excellent, which is 31 percent higher than the national average. The survey also found that 75 percent of patients would recommend WakeMed Raleigh Campus, which is also significantly higher than the national average.

The survey was part of the research for a new book from Consumers’ Checkbook called Consumers’ Guide to Hospitals that uses volumes of government safety statistics and data on death and complication rates, along with survey results, to compare and rank hospitals in the country’s 53 largest metro areas.

Top left photo: Kyle Petty (far right) visits with a pediatric patient and visitor while at WakeMed to introduce Victory Junction Camp, a camp for kids with chronic medical conditions and serious illnesses.

Right photo: Dr. Bill Allkinson, president & CEO, (right) spends some time with Kyle Petty in front of the new Raleigh Campus Patient Tower, now under construction.

Wakemed Medical Library Goes Virtual!

This spring, WakeMed’s Medical Library will transition to a completely virtual environment. The physical library will close permanently on Thursday, April 30. However, physicians and staff will continue to have quick, convenient access to medical information and resources through the AHEC Digital Library (ADL). ADL can be found on the WakeMedWeb at “For the Employee,” then “AHEC Digital Library.”

Wake AHEC has decided to close the library’s physical space due to state funding cuts. As a result of the virtual transition, the Medical Library department will become known as Library Services, and staff will continue to offer physicians and employees all services that are currently available, including literature searches, personal consultations. Library Services will be reachable via phone (ext. 85250), e-mail (medlibrary@wakemed.org), website (www.wakeuab.org/library) or by appointment.

This February, WakeMed welcomed NASARU driver Kyle Petty, who came to visit with pediatric staff and patients and to discuss Victory Junction Camp, a year-round camp for kids ages 6 to 16 with a variety of chronic medical conditions and serious illnesses. Petty and his family created the camp for kids who cannot attend standard camps due to their medical needs. Each summer, Victory Junction offers week-long sessions specific to different diseases. During other seasons, families can spend weekends there.

Located in Randleman, N.C., the camp offers fun and adventure in a controlled health care environment. Kids are treated to a simulated race car garage, boating, a water park, a zip-line, and serious illnesses. At Victory Junction, kids can enjoy a full-size library (www.wakeuab.org/library) including literature searches, journal articles, interlibrary loan and personal consultations. Library Services will be reachable via phone (ext. 85250), e-mail (medlibrary@wakemed.org), website (www.wakeuab.org/library) or by appointment.

Welcome to the WakeMed family, all new brides, grooms and babies!

Doris Watkins was married to Josse Hargrove, Jr. on November 22.

Jennifer Cooper, RN, (IC Surgical) was married to Nick Nance on December 5.

Donica Langsive, RN, (Heart Center Observation Area) was married to Patrick O’Leary on January 24.

Jamie Beall (3B Cardiovascular Surgery) and husband John welcomed daughter Caroline Renee on February 8.

Becky Wilson, RN, (MICU) and husband Tim Wilson, RN, (GA Medicine) celebrated the birth of their son Jack on February 2.

Brenda Mason (Retail Services) married Mason Siers on February 11.

Nikki Whitfield, RN, (Case Management) and her family celebrated the birth of Sydney Edona on February 25.

Tiffany Rogala, RN, (ICU) celebrated the birth of Zoe Isabella on February 28.

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Safe Kids Wake County Named Coalition of the Year

Safe Kids Wake County, a children’s injury prevention program led by WakeMed Trauma Services, recently received the state’s Coalition of the Year award at the North Carolina Safe Kids Annual Meeting. Safe Kids Wake County is dedicated to preventing accidental childhood injuries through initiatives such as the Safe Kids Walk this Way event (pictured above), an event that teaches safe behavior to motorists and child pedestrians to create a more walker-friendly community.

SIM Center (continued from page 1)

Phase I of the opening includes Labor & Delivery treatment rooms, General Medicine treatment rooms, a Trauma/Intensive Care Unit, and a computer training room with six terminals. Phase II will bring an Operating Room, two patient care rooms, an exam room with two beds, two classrooms and a virtual reality classroom. WakeMed thanks The Duke Endowment and other organizations who gave corporate donations to make the new SIM Center a reality.

On Wednesday, May 27, WakeMed employees are invited to attend a SIM Center Open House, including tours of the new high-tech facility. Look for more information in the coming weeks!

Publicly Reported Data Update

Effective March 31, the Centers for Medicare and Medicaid Services (CMS) no longer track the administration of a beta-blocker within 24 hours of arrival for acute myocardial infarction (AMI) patients.

In 2005, trial results revealed that while beta-blockers reduced the risk of death from arrhythmia and reinfarction, they significantly increase the risk of cardiogenic shock within 24 hours of admission in some patients with a heart failure history. In 2007, the American College of Cardiology and the American Heart Association acknowledged in their updated guidelines for patients with ST-elevation AMI that some patients are not appropriate for early beta-blocker therapy. In addition, the guideline stated that the current evidence base for the administration of oral versus intravenous beta-blockers differs. The new guideline recommends that early intravenous beta-blockers be avoided in some patient populations, creating complex decision-making for performance measurement. Thus, the measurement has been retired. Mechanisms are now in place to suppress public reporting of measure AMI-6 and cease submission of data elements unique to it. Providers are encouraged to use the “Reason for No Beta-blocker on Arrival” exclusion to remove high-risk patients from the measure. As of March 31, data elements associated with AMI-6 are no longer required for submission by CMS or The Joint Commission.

WakMed In The News

Health Data Management, February 22 – Mary Schilder and Jim McGrath (both of Information Services) highlighted Cary Hospital’s pilot project with RadarPoint, a local information technology company that helps hospitals electronically track medical equipment.

The News & Observer, February 22 – Maura Silverman and Elaine Rohlik (WakeMed Rehab) were featured in a story about the Triangle Aphasix Project at WakeMed Rehab, which included numerous patient stories and photos.

NCB-17, March 19 – Jerry Bernstein, MD, (Raleigh Pediatric Associates) was interviewed about the need for the new children’s hospital currently under construction on the Raleigh Campus.

He also promoted the WakeMed Foundation’s Just For Kids Campaign.

NCB-17, March 19 – Osi Udekwu, MD, (WakeMed Faculty Physicians) was quoted in a story about the signs and symptoms of head trauma.

WPVD-TV and NCB-17, March 25 – Dr. Bill Atkinson (Administration) was interviewed for a story about health insurance options for North Carolinians and the importance of ensuring all state citizens have access to quality health care.

Fifteen 501 Magazine, April 2009 – Marie Bagin (Healthworks) was quoted and pictured in a story about seniors and fitness.

WakMed Named 2009 Business Champion

WakMed was honored with a 2009 Business Champion Award by Wake Technical Community College and Business Leader magazine for the third year in a row. In all, 28 local businesses and organizations were selected for this prestigious award and more than 190 were nominated.

The 2009 Business Champion Awards represent a collaborative effort between Wake Tech and Business Leader, recognizing local organizations for their commitment to workforce development through education, innovation, job creation and employee training programs.

“This award represents WakMed’s dedication to our employees, their careers, and the continued advancement of their skills and knowledge,” commented Susan Jackson, vice president and chief learning officer. “I am very proud of the work our team has done to ensure our workforce is not only well-trained but also presented with ample opportunities for growth and development in their field.”

WakMed’s many staff development and training offerings include the WakeMed Leadership Academy, a five-year leadership training program designed to help employees broaden their knowledge of the health care system and grow into leadership positions; an on-site master’s degree program offered by Pfeiffer University; a wide range of classes focused on helping employees hone their professional, clinical or technical skills; and one of the state’s largest new graduate nurse mentoring programs. Additionally, in May 2009, WakMed will open the region’s first medical simulation center that will give health care workers training in realistic medical scenarios to learn and practice skills, while also developing competencies in business management and effective communication.

A 2009 awards luncheon and reception was held in March at the North Raleigh Hilton. Awards were presented at the event by Dr. Stephen Scott, president of Wake Tech, recognized organizations in Business Technologies, Computers & Engineering, Applied Technologies and Health Sciences.

Employee Task Force Helps Department Reach Goal

In past years, Pathology Laboratories staff at Cary Hospital struggled to meet their Emergency Department (ED) troponin turn-around time (TAT) goal – to issue 90 percent of ED troponin results within 40 minutes of receipt. The lab analysis of troponin levels in a patient’s blood is critical to determining if the patient has suffered a heart attack.

As a result, the department implemented a major performance improvement initiative by creating an internal Troponin Task Force in early 2008. Due to the work of this employee task force, the department met and exceeded their TAT goal by December 2008, returning 91 percent of ED troponin results within 40 minutes. They have now maintained this rate for three consecutive months.

Pathology Labs – Cary Hospital recognizes the members of the Troponin Task Force (pictured above) for their successful efforts in helping the department reach its TAT goal. Task force members include (l to r) Michelle Montanez-Rodriguez, senior medical technologist; Andrea Naaktgeboren, supervisor; Catherine Jones, medical technologist, (front and center); Debbie Puliatico, supervisor; and Brian Burt, quality management technologist. Not pictured: Shari Labian, clinical services technician.
Ten Ways to Save Money and Resources

During these tough economic times, it is the responsibility of all employees to be as fiscally responsible as possible, no matter how small or large the effort. Listed below are some ways all employees can help WakeMed preserve money and resources throughout the system.

1. Wash hands and use isolation items (gloves, gowns, masks). Reducing infections improves patient outcomes while also reducing costs.
2. Don’t take WakeMed scrubs home. Please return them so they can be cleaned and used again.
3. Staff should never throw linens away. Keep extra linens out of patient rooms.
4. Staff, contract workers and vendors should never save WakeMed linens, such as towels, for personal use.
5. Departments should not overstock medical or office supplies.
6. To save money on paper and printer ink, please do not print documents, especially large documents, unless it is absolutely necessary to do so.
7. If staff from different facilities are scheduled to meet, please try to use the conference call system so that intrahospital travel can be minimized.
8. Do not order meals for staff attending work-related events or meetings. Encourage attendees to provide their own food.
9. Use the WakeSharing option on the WakeMedClassifieds page on the WakeMedWeb to post available office supplies and furniture.
10. Turn off lights in rooms not in use.

We want to hear from you!

All employees are invited to share their money-saving ideas on a new internal blog, CSI: WakeMed. CSI stands for “Cash Saving Ideas.” CSI: WakeMed is available through the homepage of the WakeMedWeb.

Log on and let us know what you think! All comments will be carefully reviewed by the leadership team, and those that are most helpful to all staff will be published.

What an Employee!

Megan Andrews and Tricia Kepper (both of Rehab Case Management) each recently passed the Licensed Clinical Social Worker (LCSW) exam.

Jennifer Jones (Human Resources) received her Professional in Human Resources (PHR) certification.


Patient Financial Services acknowledges the following promotions - Sharon Jackson to manager, Bertha Huerta to supervisor and Nhi Pham to supervisor.

Wanda Bowman (HC Pediatrics/PICU) completed her Nurse Executive Board certification.

Jettie Castenedo-Anderson (Interpretation & Translation Services) was one of four Mount Olive College students chosen to participate in a week-long internship in Mexico with former Mexican president Vicente Fox.

Scull, the voluntary hospitality dog, celebrates his one-year anniversary “viving” at WakeMed.

Beth Sato (Rehab Case Management) earned her Licensed Clinical Social Worker certification.

Julie Rosika (CV Testing) passed her American Registry for Diagnostic Medical Sonography (ARDMS) boards.

Peggy Haggerty, RHIA, (Medical Records) earned her Certified Coding Specialist (CCS) certification.

Anne Bailey, RN, (Women’s Pavilion & Birthplace – Raleigh) was promoted to supervisor/educator.

Kristen Micklach, RN, (Mobile Critical Care Services) passed her CCRN exam.

Eric Christensen, EMF-P, (Mobile Critical Care Services) earned his bachelor's degree in Business Administration.

Lynne Hamner, PT, (Home Health) was recently promoted to Rehab team leader, and Lois Jarrett, RN, (Home Health) was also promoted to team leader.

Todie Johnson (Administration - Cary Hospital) received The Herb Young Award from the Town of Cary for showing extraordinary service, leadership and staff/team program as a volunteer for the Cary Parks, Recreation & Cultural Resources department.

Jinwayne Paun, RN, (MICU) received her CRN certification.

Bob McVeigh, RN, Greg Anderson, RN, Clinton Dean, RN, Drove Bolling, FNP, Sarah Tiffany, FNP, Nicole Perry, FNP, and Jessica Mohran, RN, (all of MICU) were honored by their department for achieving perfect attendance last calendar year.

WakeMed’s IV Infusion Pumps Get Smart

This spring, Clinical Engineering, in partnership with Quality & Patient Safety, the Pharmacy, Administration, Strategic Sourcing, chief medical officer – nursing staff, piloted a new “smart” IV infusion pump in several units at the Raleigh Campus and Cary Hospital. Equipped with the latest technology, the pumps hold sophisticated, wireless software that allow them to integrate into a hospital’s information networks and other clinical systems.

Above: Eddie Jones (left) and David Heiniske (both of Clinical Engineering) evaluate the three different brands of smart IV pumps that are being considered to replace WakeMed’s current IV pumps.

The software in the pumps is programmed with a comprehensive drug library that reduces the likelihood for medication dosage errors by alerting a caregiver if a dose exceeds a pre-set limit. The system presents the options for “soft limits” that can be overridden with the push of a button, and “hard limits” that prevent the pump from administering a dosage if it falls far outside normal limits. Previous generations of infusion pumps at WakeMed have administered IV medications without the ability to recognize when a dosage may create a risk for the patient.

“We are confident that the smart IV infusion pumps can have profoundly positive effects on patient safety,” commented Meera Kelley, MD, vice president, Quality & Patient Safety. “Not only can the pumps alert caregivers when a dosage is incorrect, but due to their reporting capabilities, the pumps will also give us great insight into dosage errors.”

The system software can be used to pull reports that track and analyze when preset doses are exceeded and why alerts are activated. These data give Patient Safety teams the knowledge to enhance education and quality programs while alerting the Pharmacy if preset doses need to be reconsidered. The system also allows staff from Quality & Patient Safety and the Pharmacy to readjust drug limits if necessary and to add new drugs.

Along with the help of nursing staff, Clinical Engineering plans to test three brands of smart pumps before selecting a final vendor. The decision will be based upon cost, ease of use, security and reporting capabilities. Throughout the system there are approximately 1,500 IV infusion pumps, and the team hopes to begin the process to replace them all with smart pumps within the next year.

WakeMed Foundation Names Jack Radford Executive Director

WakeMed is pleased to announce that Jack Radford was named executive director of the WakeMed Foundation. With more than 25 years of local non-profit expertise, Radford became the Foundation’s interim director in early 2008, after having served with WakeMed since 1998 when he became a consultant for managing grant applications. In 2004, Radford was hired to support WakeMed’s Capital program and establish the WakeMed Grant Research & Development Office. Under his leadership, the office has secured nearly $13 million for WakeMed projects.

“Jack has had the energy, enthusiasm, creativity and capability to lead the Foundation in its fundraising efforts — especially during uncertain economic times,” commented Judy O’Neal, senior vice president, Government Affairs.

“The board was looking for a leader like Jack who has the energy, enthusiasm, creativity and capability to lead the Foundation in its fundraising efforts — especially during uncertain economic times,” commented Judy O’Neal, senior vice president, Government Affairs.

“Jack knows this community well and is a strong advocate for WakeMed and our patients’ needs. These qualities make him an ideal choice to lead the Foundation,” said Radford at the WakeMed Foundation Board of Directors meeting on March 6.

Radford’s first major fundraising project is the $30 million Just For Kids Campaign to support the creation of the first children’s hospital in Wake County on the fourth floor of the new Patient Tower currently under construction on the Raleigh Campus.

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Support the WakeMed Foundation with the iCard®

School4heart, Inc. is selling valuable discount cards to support the WakeMed Foundation Just For Kids (JFKK) Campaign. The $25 iCard entitles owners to Emergency Roadside Assistance Service, including towing, jumpstarts, tire changes and lockout assistance. A National Prescription Discount Card, it offers up to 70 percent discounts on prescriptions, and other local and national discounts (restaurants, movie theaters, car care, hotels, theme parks and more). For details or to purchase, visit http://justforkids.school4heart.com/justforkids/email.html. Search for local discounts by zip code. Fifty percent of the proceeds from each card ($12.50) will benefit the JFKK.

Did you do it on purpose?

"Did you do it on purpose?" the hospital staff member inquired.

"No, of course not," the staff member inevitably replies.

"Then it is my fault," the executive responds. "I am responsible for the system, and our system allowed this to happen."

This was the approach taken by Jeanette Iverson, RN, senior vice president for Patient Care and chief nursing officer at Massachusetts General Hospital, following an error resulting in patient harm. Along with Dr. Bill Atkinson, president & CEO, and other members of WakeMed’s leadership team, I learned about this approach from the “father” of patient safety, Lucian Leape, a 75-year-old retired pediatric surgeon from Harvard. He spoke at the N.C. Quality & Patient Safety Conference this March.

The approach seemed absurd. Why would this executive take responsibility away from the person who committed the error? Then, I considered the times I have met with physicians and staff following a significant patient safety event. In many cases, the physicians and staff were knowledgeable, experienced and dedicated. In all cases, they felt responsibility, guilt and remorse. Any caregiver could experience an error resulting in patient harm.

As I go through my day, how often do I think of things at once? How often do I forget, or rush to do more than I should? These things happen to everyone. At times, patient’s lives are truly in the hands of the health care workers and physicians who care for them. Surely they shouldn’t make mistakes. The truth is, care providers are human. We all get distracted, make mistakes and, at times, rush to get things done. We do what we can to slow down and take care, especially during critical activities such as giving medications and starting procedures. But, if we think we can be flawless in our work, we are not only mistaken, we are also not doing our best for our patients.

We must acknowledge that we do and will continue to make mistakes, and, therefore, set up systems to reduce the chance of harmful errors. Some examples are: setting up extra checkpoints involving several people; no matter how redundant; creating functions that don’t allow us to do the wrong thing; acknowledging our own frailty; and, openly sharing when we make an error or a “good catch.”

When on safety rounds, we will ask you to share errors or examples of “good catches.” You should also communicate through the online incident reporting system. For patient safety comments or concerns:

• Call the new WakeMed Patient Safety Line at 1-844-726-7983.
• Contact me at patientsafety@wakemed.org.
• Use our Patient Safety Blog.
• Call the new WakeMed Patient Safety Line at 1-844-726-7983.
• Enter a comment anonymously on the WakeMedWeb.

Click “Quality,” then “Patient Safety Endos & Concerns.”

No one makes a mistake “on purpose,” so we must work together to provide the best, safest patient care.

In Memoriam

Dante Duterte

(Heart Center - CV Testing)

passed away in January 2009. He will be greatly missed by family, friends and co-workers.
WakeMed Commends Our 2009 TBJ Health Care Heroes

The Triangle Business Journal (TBJ) honored several members of the WakeMed family with 2009 Health Care Hero Awards. Individuals and organizations selected for this prestigious award use innovation and compassion to improve the human condition. They are top performers who have achieved extraordinary things within the Triangle’s health care industry.

Community Outreach Category
James Hartye, MD, vice president, WakeMed Behavioral Health and Clinical Resource Management, is devoted to serving the disadvantaged and mentally ill. He has treated Wake County’s homeless for more than 18 years at Horizon Health Center, formerly Wake Health Services, Inc. Dr. Hartye advocated for the development of the Capital Area Crisis Cooperative (CAC), a collaborative that brings crisis care to persons with mental health needs. He also coordinated the development of our Behavioral Health Team. Dr. Hartye volunteers for many community-based medical programs and serves on numerous advisory boards.

Health Care Management Category
Carolyn Knaup, RN, president, Ambulatory Services, has driven the development of all WakeMed’s ambulatory ventures thus far, including North Healthplex, Brier Creek Medical Park and Apex Healthplex. Her thorough understanding of Wake County’s growth has been instrumental in shaping WakeMed’s ambulatory strategy – a strategy that will fund our mission to care for all patients regardless of their ability to pay while meeting the health care needs of this growing region. Knaup also lends her time as an active community volunteer and is a member of several industry associations.

Health Care Volunteer Category
Lou Ann McBarnett, BSN, RN, manager, MICU took on the problem of ventilator-associated pneumonia (VAP) four years ago, and led her team in developing a VAP-prevention protocol based on national guidelines. Their dedication, along with McBarnett’s tireless hours of research and investigation, resulted in the total elimination of VAPs in the MICU patient population for more than 1,068 days and counting. McBarnett and her team are now working with all WakeMed ICUs to adopt the protocol, and they serve as a resource on the topic for hospitals throughout the country.

Rising Star Category
Ravish Sachar, MD, is an interventional cardiologist at Wake Heart & Vascular Associates, director of the Wake Heart Cerebrovascular and Peripheral Research program, and chair of the Invasive Cardiology Committee at WakeMed. Dr. Sachar is known for focusing on clinical advances in care to optimize patient outcomes. Since joining the WakeMed family in 2004, he helped establish the carotid stent program that now benefits nearly 200 patients a year with excellent outcomes. Along with Matt Hook, MD, and Kimberly Livingston, MD, he started the acute stroke interventional program at WakeMed as well. A true inspiration, Dr. Sachar authored a textbook used in medical schools nationwide, teaches courses in his field, and founded a medical device design firm in Raleigh that has so far developed three devices for the safer treatment of heart blockages.

Allied Health Professional Category
Shawn Van Steen, audiologist, (Hearing Screening, Newborns) runs WakeMed’s newborn hearing screening program and is responsible for the hearing screening of all babies born at WakeMed. In fiscal year 2008, approximately 7,778 babies were screened. Over the past nine years, he has fine-tuned the program to make it successful today. Using only the most sensitive testing methods, Van Steen is diligent about following up with families of newborns diagnosed with hearing loss to ensure they receive consistent care. Because of his program’s success, Van Steen is a resource for other hospitals, and he is an active member and former chairman of the Early Hearing Detection and Intervention Advisory Board for N.C.

Physician Practice Category
Raleigh Pediatric Associates is passionate about pediatric care and bringing cutting-edge, innovative services to Wake County. With 15 physicians and 85 employees, the practice was co-founded by Jerry Bernstein, MD, (pictured) a leader in children’s health care. Raleigh Pediatric Associates has volunteered thousands of hours at local hospitals to guide and support children’s services and staff. Its many accomplishments include: helping create the first freestanding Children’s Emergency Department and the county’s only Pediatric Intensive Care Unit, inpatient children’s unit and Level IV Intensive Care Nursery, all at WakeMed, helping design WakeMed’s first children’s hospital, scheduled to open in April 2010; and construction on that portion of Need (CON) approval has been obtained for the fourth floor children’s hospital, and construction on that portion of the tower is soon to begin. The children’s hospital is now scheduled to open in April 2011.

Toot-Toot!

All Aboard the JC Train!

In March, the JC Trivia Wheel was introduced in Café 3000 (Raleigh Campus). In April, it appeared every Wednesday between 7 and 9 am and 11 am and 1 pm. In April, the wheel traveled to Points West Café at Cary Hospital. Custom-built by Hubert Adams, Butch Earp and Rusty Taylor (all of Clinical Engineering), the wheel is open to all staff who wish to give it a spin, answer a question and win a prize. Questions focus on JC standards, best practices in patient care and patient safety. The wheel will continue to visit the cafeterias on both campuses until the JC survey occurs.

Peer Tracers

All nursing units continue to conduct mock peer tracers to ensure they will be ready to face a real JC tracer. JC tracers will follow a patient’s care from beginning to end to examine processes and standards and to ensure we are giving our patients the highest level of care. Peer tracing is a great way to closely review these checkpoints in advance of the JC visit.

Thank you for continuing to do all you can to prepare for our 2009 JC visit. For more information on JC readiness, contact Lauren Delahunt, RN, director, (Organizational Improvement) at ext. 07367.
New Equipment Tracking System

This February at Cary Hospital, Information Services (IS) helped implement RadarFind, a Web-based equipment tracking system that allows staff to quickly find medical equipment within any department. Currently, the hospital’s IV pumps and blood pressure/vital sign machines are being tracked, however there is potential to add more equipment, such as Workstations-on-Wheels (WOWs), patients beds and more.

Left: Kathy Staton, RN, (Women’s Pavilion & Birthplace) - Caryl flips the switch on a RadarFind tracking device attached to an IV pump on her unit.

RadarFind monitors equipment by tagging it with a special device that gives off a signal to one of about 50 frequency readers plugged in throughout the hospital. A switch on the device must be flipped by staff to indicate the equipment’s status (ready for use, in use with patient or needs cleaning). Using an online application, nurses and caregivers can instantly find the equipment they are looking for, something not easily done before.

RadarFind also sends alerts to MPDC when the equipment needs sterile processing, and Clinical Engineering can use the system to track equipment needing preventive maintenance.

Administrative reports can also be generated to track how often equipment is being used and if inventories need adjustment. Cary Hospital’s supervisior/educators have helped staff learn to use the system and tracking devices after being trained prior to implementation. Additionally, a staff Learning Link module will soon be available.

“We believe RadarFind will contribute to improved patient care by saving staff valuable time and resources while also creating a better method for equipment utilization,” said Mary Schilder, director, Information Services. “The system will also help us meet Joint Commission standards by creating an easy way to track items needing preventive maintenance so they can be removed from the units.”

After analyzing the Cary Hospital pilot to determine a return on investment, IS hopes to expand RadarFind to the Raleigh Campus and other WakeMed facilities. By 2010, RadarFind will also offer an application to electronically monitor and log refrigeration temperatures on a regular basis as well as a device to electronically track patients as they move throughout a facility. Both could be extremely beneficial to the continued improvement of patient care and patient safety at WakeMed.

Updates to the WakeMed Elevator Usage Policy

The WakeMed Elevator Usage Policy has been updated to include clarification on Raleigh Campus elevator designations. The policy now states that the A, B, C and D elevators are visitor elevators. Staff elevators (shown in yellow) are designed for staff transporting patients, supplies, equipment or food. On all elevators, patient transportation is given priority. Staff not involved with patient transport should exit the elevator and yield to patients at all times. It is the responsibility of each department and manager to ensure that his or her staff is familiar with the elevator designations and that they comply with this policy.

To view the complete WakeMed Elevator Usage Policy, please visit the WakeMedWeb and click to “Policies/Procedures/MD Orders,” then “Administrative Policies,” then “General Policies,” then “Elevator Usage Policy.”

Saving Valuable Time and Resources

As a Float Pool employee, Les Kota, RN, was having a hard time finding the supplies he needed on the different units he worked. He realized a lack of consistency in supply storage and saw opportunities for improved organization in every supply room. When hired as a supervisor for Observation Units 1 & 2, Kota implemented a new process to make it easier for staff to locate needed supplies.

Working with Teresa Harvey, RN, manager, (Observation Unit 2); Lisa Pace, RN, manager, (Observation Unit 3); Tracy Frisbee, RN, clinical educator/supervisor, (Observation Unit 1) and Bci Ye, RN, (Observation Unit 1), Kota met with MPDC, Intensive Care Unit, Pediatrics and Respiratory Care Services staff to discuss a system that would be beneficial for everyone. They also drew upon strategies used at Beth Israel Deaconess Medical Center in Boston, already proven to save time, costs and resources.

Kota and his team have now reorganized Observation Unit 1’s supply room and created a new system for storage. Right-size bins help ensure items will never be over- or under-stocked and are positioned at appropriate levels along the walls. Color-coding, the grouping of like items and large, readable labels create easy access to supplies. Because the unit uses Optiflex, a computer inventory program that scans and tracks supplies, barcodes are also color-coded.

“When staff began using the newly organized storage room, we noticed vast improvements in the way the unit was running as well as improvements in patient safety, patient satisfaction, physician satisfaction, inventory tracking and Joint Commission (JC) compliance,” said Kota. “Staff now have more time and energy to devote to improved patient care and meeting JC standards.”

Time is saved because staff are able to easily locate supplies, leading to decreased frustration and more time spent with patients. There is a decreased likelihood of errors in supply selection, especially regarding IV fluids, which are now organized, separated and labeled. With time saved, staff are more likely to remember to scan items into Optiflex, leading to a reduced chance of items expiring or not being restocked. MPDC staff are now able to re-stock the storage room more quickly and efficiently.

When word about the new system spread, David Coultier, senior vice president and administrator, Raleigh Campus, suggested that other departments using Optiflex adopt the system and that eventually all WakeMed facilities do the same. As a result, Harvey, Pace, Frisbee and Ye took on the project for credit toward their participation in the Pfieffer University master’s program. They created a starter kit, made available to units in March. Each kit is created with the help of Volunteer Services and the Print Shop, and it includes color-coded barcode labels, signs and bin labels. Thanks to Mark Harris, manager, (MPDC), the team also can provide each unit with a complete list of their supplies, each with an assigned color. When a unit is ready to reorganize, a member of the team will consult with staff to analyze the storage space and make recommendations. Using the kit, each unit should spend approximately six to eight hours to reorganize. If your unit is ready to reorganize and needs a consultation to get started, please contact Teresa Harvey at ext. 07256.

New Supply Storage System on Raleigh Campus

APRIL/MAY 2009

Open Forums for Nursing Coming in May

Nursing Update, Economic Realities and Nursing’s Response

Nurses, please join Nursing leadership for one of these open forums:

Raleigh Campus - Conference Dining
Monday, May 11 – 7:30 to 8:30 am • 10 to 11 am
Tuesday, May 12 – 10 to 11 am

Cary Hospital - Conference Center
Tuesday, May 12 – 1:30 to 2:30 pm • 3:45 to 4:45 pm

For more information, please contact Jill Whade, RN, at ext. 05181.
WakeMed Health & Hospitals
3000 New Bern Avenue
Raleigh, North Carolina 27610

ADDRESS SERVICE REQUESTED

Leadership Book Club: 300 Degrees Leader - Wednesday, April 21 from 11:30 am to 1 pm in the MOB, Ground Floor Classrooms #1 & #2
Kronos Time & Attendance for Management - Wednesday, April 21 from 8:30 am to 12:30 pm or Thursday, May 14 from 8:30 am to 12:30 pm - Both sessions in the MOB, Ground Floor Classroom #4
Performance Management at WakeMed - Wednesday, April 15 & 22 from 9 am to 3 pm in the MOB, Ground Floor Classroom #3
Substance Use & Fitness for Duty - Wednesday, May 6 from 9 to 11 am in the Cary Hospital Conference Center
Leadership Book Club: What Got You Here Won’t Get You There - How Successful People Become Even More Successful - Wednesday, May 6 from 11:30 am to 1 pm in the MOB, Ground Floor Classroom #3
Employee Selection and Orientation - Wednesday, May 13 & 20, from 8:30 am to 12:30 pm in the MOB, Ground Floor Classroom #3
Leadership Book Club: Developing Leaders Around You - Wednesday, May 13 from 11:30 am to 1 pm in the MOB, Ground Floor Classroom #3
Building High Performance Teams - Thursday, May 21 from 9 am to 4 pm in the MOB, Ground Floor Classroom #3
Managing a Multi-Generational Workforce - Thursday, May 28 from 8:30 am to 12:30 pm in the MOB, Ground Floor Classroom #3
Employee Development Classes
Communicating Across Generations - Thursday, May 28 from 8:30 am to 12:30 pm in the MOB, Ground Floor Classroom #1
Nonviolent Crisis Intervention Refresher - Friday, May 29 from 8:30 am to noon in the Andrews Center – Led by Campus Police & Public Safety
Nonviolent Crisis Intervention - Wednesday, May 27 from 8:30 am to 4 pm in the Andrews Center – Led by Campus Police & Public Safety

Computer Training Classes
SharePoint Super-User Training - Wednesday, April 18 from 8:30 am to 12:30 pm in the MOB, Ground Floor Classroom #4
Excel Advanced - Thursday, April 16 & 23 from 8:30 am to 12:30 pm in the MOB, Ground Floor Classroom #4
Learning Link for the Student - Monday, April 20 from 8:30 to 9:30 am at Cary Hospital - Tuesday, May 12 from 8:30 am to 12:30 pm in the MOB, Ground Floor Classroom #4

Windows XP Introduction - Tuesday, April 21 from 8:30 am to 12:30 pm in the MOB, Ground Floor Classroom #4
Access Intermediate - Tuesday, April 28 & May 5 from 8:30 am to 12:30 pm in the MOB, Ground Floor Classroom #4
Word Intermediate - Wednesday, May 6 & 13 from 8:30 am to 12:30 pm in the MOB, Ground Floor Classroom #4

NURSING EDUCATION
Contact Nursing Education at ext. 08024 for more information about these classes.

WakeMed Pediatric Conference: Stepping into the Future – Thursday & Friday, April 16 & 17 from 8 am to 4:15 pm in the Andrews Center – Topics include high-frequency ventilation, the family perspective, the Perinatal Quality Collaborative for N.C., hypothermia in children, stress management for caregivers, and care of specific illnesses and injuries. See Learning Link (NE014-9018 & NE014-9019).
Advanced IABP Technical Program - Tuesday, April 21 from 10 to 11:30 am and 1 to 2:30 pm. Target audience: CCU, CTSCI, HCOA, Invasive Cardiology and Mobile Critical Care Services. See Learning Link (NE0147).

CPR Blitz - Thursday, May 18 – “Check-off only” is any time between 8 am and 8 pm. Classes held from 9:30 am to 12:30 pm; 1:30 to 4:30 pm; and 7:30 to 10:30 pm. See Learning Link (NEAH20 & NEAH24).

WAKE AHEC CONTINUING EDUCATION
Educational credit available for all programs. For details/fees call ext. 08047 or visit www.wakemed.org and click on “Program Listings.”
New Pharmacologic Agents Spring 2009 - Thursday, April 16 at 8 pm at Cary Hospital
5th Annual Diabetes & Endocrinology. To register, visit www.sportoften.com or ext. 02283. Try unlimited access to our group exercise program for 30 days for $15. Call ext. 08602.

Nonviolent Crisis Intervention Program for 30 days for $15. Call ext. 08602.