

Community Highlights



In this Corner

As we move forward in 2012, it is important to focus attention on what we are doing well; and then continue to strive to do all things better.

Our most recent HCAHPS survey did show we are doing many things quite well, and continuing to show marked improvement in nearly every other measure of patient satisfaction.

Our nurses deserve acknowledgement for a score in the 94th percentile on the question of treating patients with courtesy and respect. Our doctors were ranked in the 92nd percentile on the same question. Doctors were also scored in the 92nd percentile for questions about explaining information in understandable terms and careful listening to patient concerns.

So much of what you do hinges on effective communication that I am very pleased with these scores. We were also recognized for cleanliness of the hospital and for pain management (92nd percentile again.)

So even as we deal with political uncertainty, good things are happening that are of critical importance to our patients. Thank you.

I can report that the situation in Olympia is far from resolved. There are meetings being held every day between legislative leaders and groups of legislators to gauge support for different approaches to addressing state budget shortfalls. The search process should continue for the next couple weeks.

We still do not know how the final outcome will effect rural healthcare. The Critical Access Hospital bill (HB 2130) is sitting in the House Ways and Means Committee. It has not been defeated, and will come up again as the session looks at budget options.

It is most likely that Critical Access Hospitals are looking at some combination of cuts for the next biennium. What we are endeavoring to do (through the Washington State Hospital Association) is look at



New Equipment in OR and ER

If you had a hand in the SCH Foundation Festival of Trees, you should take pride in knowing you helped to purchase new equipment for the Emergency Department and Surgical Services.

Above **Theresa Ross, Debbie Amos** and **Theresa Wichman** examine the Medi-Therm III. The Medi-Therm® Hyper/Hypothermia System delivers regulated heat or cold therapy with microprocessor accuracy and reliability. The Medi-Therm® assists attending medical staff in influencing and maintaining a patient's body temperature.

Additionally, proceeds from the Foundation Golf Tournament were used to purchase a software upgrade that allows more patients to be scheduled for ultrasound procedures at the hospital.

the best healthcare decisions, that also effect some cost savings for the state. Large and small hospitals will have to work together with the lawmakers to find an acceptable plan for the next few years.



Stroke Status Approved

The Washington State Department of Health has been working for the past four years to fully implement an emergency cardiac and stroke system, similar to the statewide

trauma designation system.

SCH has received level II Cardiac status and level III Stroke status within the system. These designations granted earlier this month allow SCH to meet the state requirements of appropriate care and also triaging from the field to appropriate facilities for cardiac and stroke treatment.

The goal is to stabilize stroke patients and get them into advanced cardiac care within 90 minutes of arrival at any hospital. About ten years ago the state first recognized a disparity of stroke care between rural and larger urban hospitals.

Through this process of gaining stroke system designation SCH had to develop policies and create codes that will be called when a stroke or cardiac patient arrives. Staff education on these policies has been underway for some time so the staff know just what to do. Nurses will be required to obtain additional neurological and cardiac based training per year to stay current with knowledge/technology.

The hospital also purchased the Medi-Therm system which can be initiated in the ER for both the Stroke and Cardiac patient that will slow the damage to the brain or heart. (see page 1.)

Community Education about stroke symptoms, and what to do, will also be done to inform people in the Lower Valley about the stroke protocols. Often, stroke or cardiac patients who come into SCH are transported to hospitals in Yakima for continuing care.

Lunch and Learn

Jessica Hamel from CNA will do a lunch and learn on EMR Documentation January 31st at 12:30 PM in the classroom.



Lift Safe: Protect Yourself & Your Patient

The Safe Patient Handling committee will feature a different piece of lift equipment in each newsletter as a reminder to use the equipment for all your patient transfer needs. These inflatable airmats allow two staff to easily move a patient from gurney to bed or treatment areas. **Miguel Martinez** and **Coleen Goulet** demonstrate.

Environmental Services Lead



Cindy Waterman has accepted the Lead position for Environmental Services .

Cindy has over 20 years of experience in Environmental Services and Maintenance, including 10 years as Facilities Team Leader for Central Washington Comprehensive Mental Health, with facilities in Sunnyside, Goldendale, White Salmon, and other areas. She brings great experience to this new role and is well-respected due to her knowledge, work ethic, and positive “can-do” attitude

Thank to **Tonya Kilian** for her excellent service in the Lead role on an interim basis during the past couple weeks.

Gas Men & Women Honored

Next week is the time set aside as CRNA week. Here at SCH we are pleased to recognize our team of Nurse Anesthetists who work alongside our surgeons, nurses and technicians.

Pat Corbett, Fe Demiar and **Eric Nelson** are honored and respected members of our surgical services team.

Stomal Complications

by **Dawn Beals, NP-C**
Lincoln Ave. Family Medicine

There are many complications that may occur in the newly formed stoma. Retraction of the stoma, mucocutaneous separation, necrosis and stenosis can potentially lead to life threatening complications. As a health care provider assessing the stoma, it is necessary to observe the stoma without the pouching system in place.

Retraction of the stoma:

A stomal retraction is identified when a stoma is drawn or pulled back below the skin level. The retraction may involve the entire stoma or it may be limited to the mucocutaneous junction. Factors that can contribute to the stomal retraction include:

- An abdominal wall opening larger than the bowel
- Infection
- Mucocutaneous separation
- Necrotic stoma
- Premature removal of supporting device for loops stoma
- Stoma located in a skin fold
- Tension on the stoma due to:
 - Excessive scar/adhesion formation
 - Excessive weight gain
 - Poor fixation of the bowel to the fascial layer
 - Short mesentery
 - Thickened abdominal wall

When assessing a stoma for retraction, make sure the assessment also occurs in the sitting, standing and lying positions. The depth of the retraction may increase with sitting and the stoma opening will appear as a concave defect on the abdomen. Assess for fecal/urine leakage and skin irritation around the pouching system. After removing the pouching system, observe the stoma and abdominal contours when the patient changes position.

Complications of a stomal retraction are leakage of the pouching system, mucocutaneous separation, peristomal skin irritation and stomal stenosis. A complete mucocutaneous separation accompanied with stoma retraction below the fascia is considered a surgical emergency.



Mucocutaneous Separation:

A mucocutaneous separation occurs when a stoma completely or partially separates from the skin.

The resulting open wound may be deep or shallow.

Conditions that contribute to developing a mucocutaneous separation are:

- Abdominal radiation
- Corticosteroid administration
- Diabetes
- Infection
- Malnutrition
- Abdominal wall opening larger than the bowel
- Excessive tension of the suture line
- Stomal necrosis

Potential complications of the mucocutaneous separation are:

- Infection
- Peritonitis
- Stomal stenosis

When assessing the stoma with a mucocutaneous separation, the extent of the separation needs to be determined. Gently measure the depth of the separation with a cotton-tipped applicator. Identify if slough is present. Document the separation by describing the stoma as the face of a clock (mucocutaneous separation from 1-3 o'clock) and document the depth in centimeters.

Management of the mucocutaneous separation depends on the extent of the breakdown. Keeping the separation clean is paramount and that means applying a pouching system that exposes only the stoma. Filling the separation to absorb drainage and provide a moist wound healing environment is also important.

Please note that any separation that extends deeper than the fascia is a surgical emergency.

Next time: Necrosis and stenosis of the stoma.

IT Corner

by **Danny Patterson**
Systems Support Specialist

There are many keyboard shortcuts you can run to save yourself time and increase your productivity on the job. Here are a few you can try out:

*** To perform the keyboard shortcuts, press and hold the Ctrl button and press the letter key once. Do not capitalize the letters ***

Ctrl + 'A' - SELECT ALL items on your page or window.

Ctrl + 'Z' – UNDO any changes on your page.

Ctrl + 'X' – CUT sections of your (selected) work to use in other places (this is usually always accompanied with the paste function)

Ctrl + 'C' – COPY sections of your (selected) work (this is simply duplicating)

Ctrl + 'V' – PASTE your cut or copied sections of work

These shortcuts may be used in most programs and throughout your computer when working with files or folders.

Mask Fit Testing 2012

by **Kathleen Anderson**

The Mask Fit Testing for 2012 will be conducted in April and October. We will also be doing Max-Air Hood Classes in July and August.

The staff who are required to do mask fit testing for patient care (including physicians) who did not do their mask fit testing in 2011, are now delinquent and will not be done until the 2012 mask fit testing months. We will not be doing fitting at any other time. I will make sure we are available to do each shift rotation as well as night shift in the months listed above.

Clinics are not mandatory. If they desire to have the testing done, our instructor will visit the clinic once and if not everyone is available at that time, they will have to come over to the hospital during the scheduled class times.

The best way to get your news in the Community Highlights is to send it in! You can write the entire story, or just send in the basic information and we will get it into the newsletter. Deadline is normally the Monday prior to payday. We want to hear from you too NIGHT SHIFT! WEEKEND STAFF! Email to Tom Lathen, or call 837-1624.



HIPAA Pointer

THE AUDITS ARE COMING! THE AUDITS ARE COMING! (Well, maybe...)

By **LaDon Linde**, HIPAA Privacy Officer

When the Stimulus Package was passed by Congress and signed into law by President Obama in early 2009, it provided for HIPAA auditors to begin on-site inspections of healthcare entities across the nation.

Their job would be to verify that covered entities were protecting patient privacy rights. After designing a program and hiring a contractor, the day for these inspections to begin has arrived.

The part of the announcement by HHS' Office of Civil Rights (OCR) regarding the start of the audits that really caught my eye was the part that stated that these audit teams would spend between three and ten business days on-site!

With our size, I'm sure it would be closer to a three-day audit, but that gives a team a lot of time to dig deep. Besides looking at policies and procedures, they may look at training protocol, review our compliance initiatives, check audit results, etc. They will also interview management and inspect the premises.

The good news in all this is that they will inspect 150 facilities nationwide this year, so chances are low that they will come here this year. However, they stated that they are inspecting facilities of all sizes, so being small is not a protection.

Now, as always, the best policy remains to both understand and show respect for the HIPAA/state privacy regulations and the privacy of our patients.

Compliance Hotline

If you have questions or concerns related to billing, confidentiality, conflict of interest, unfair employment practices or other regulatory issues.

1-800-596-7580

<https://sunnysidehospital.alertline.com>

Childbirth Education Classes

If you are getting ready for a new baby, childbirth education classes are scheduled monthly at the hospital.

The class is now offered in two evening sessions that last for two hours each. February 21 and 23 and March 13 and 15, are the next two scheduled classes.

There is no charge for mothers scheduled to deliver in the SCH Family Birth Center.

To reserve a spot (for any month) contact the Family Birth Center at ext. 1535.



NRP Class Feb. 17

by **Tom Anderson**

The next Neonatal Resuscitation Program (NRP) is scheduled for Friday, February 17 at 8 AM in room 139 (OB).

Don't wait to check out a study book and take your

test on line. See Elaina Wagner 1516 for information. You should know the basic material when you show up for testing. If you want help with anything, see **Tom Anderson**, ext. 1576 or **Dr. Anne Nealen** before the class.

The equipment will be set up in room 139 one week prior to the class so you can practice. You need to bring a copy of the certificate showing you took and passed the test. No certificate – No class!

Here is how it will work. #1-You will verbally walk through setting up for a resuscitation and begin. #2-You will be in a team and decide specific jobs and resuscitate a baby, more like real scenario.

The beginning of the class will be spent going over each station so you can practice, ask questions and improve some skills you don't use very often. Intubation – umbilical line placement – One and two person CPR on an infant – Infant drugs.

We will stay as long as needed for every student. We want you knowledgeable and comfortable with the proper NRP resuscitation program. Other classes this year? May 10, September 21 and December 13.



Demand Will Outpace Supply for Nurses in Washington State

The latest report from the WWAMI Center for Health Workforce Studies estimates supply for practicing RNs in Washington State will keep pace with demand in the short term; however, the state will face shortages in the next decade.

Demand is projected to grow from 55,070 in 2011 to 89,186 by 2031, while supply will lag behind. Even with a 10 percent increase in RN graduation rates by 2016 and increase of 20 percent by 2021, the study projects a gap of more than 10,000 practicing RNs.

The report's goal is to provide a planning tool to help guide decision making about the education and employment of RNs in Washington State. The complete report is available for download. The Washington Center for Nursing has also developed a policy brief that summarizes the report.

Fundraiser for Local Kidney Patient

Friends and family of **Roy Palomarez** will hold a fundraiser dance Saturday to help him pay for medications required for a kidney transplant.

The dance will be from 7-11 p.m. at the Forum, 1818 Morgan Road (near the Mall). Cost is \$25 per ticket. Donations will be accepted at the door as well as to the Roy Palomarez Kidney Fund at any Banner Bank.

For more information, call Becky Sambrano at 839-6699.

Yakima Youth Awards

The Yakima Youth Awards is looking for nominations of youth who do awesome things in our community. If you know of anyone or any group, please nominate them.

Nominations are due by February 17th. For more information, or to pick up a nomination form contact **Tom Lathen** in Community Relations.

The 19th Annual Yakima Youth Awards will be presented March 5th at Perry Tech in Yakima. Any youth in Yakima County is eligible for nomination.



Catch Us on Youtube, Facebook & Internet

We have launched a new on-line marketing program called "Community Highlights On Line."

The programs are posted on the hospital website and Facebook pages. They can also be found directly on Youtube.com.

The first program features Coleen Goulet, Radiology Manager, right, talking about the importance of getting a mammogram.

Other programs are in production. If you have an idea of something you would like to see on the program contact

Community Relations.

Please check us out on line. There is a direct link from the main page of the website right now We plan to put more and more interviews and video features on the website/facebook/youtube. So, if you have access on line check it out. Pass the word along to patients, family and friends to get lots of good information about the hospital and clinics from Community Highlights On-line.

Right now our youtube viewers are about 10-1 English over Spanish. This is based on the total number of viewers of our Spanish TV commercials, versus our English language commercials. These are also posted on our youtube/website pages. The long term plan is to get more Spanish programming available on line too.

Right now the most watched video we have is from the Farm Implement Parade. The next most viewed is a commercial featuring Dr. Biggs and Dr. Weaver. We hope to bring hundreds of views a week to our commercials and videos on line. So, please spread the word!



Radiology Manager **Coleen Goulet** demonstrates how the mammography machine works, during videotaping of a new hospital feature "Community Highlights On Line". The programs can be seen on the hospital website, YouTube and Facebook pages.

Production is currently underway for a series of short programs with Diabetes Educator **Cathy Fierro**.

6th Annual Benefits Fair

Tuesday - Feb. 28
5:00-8:30 PM

Wed. - Feb. 29
8:30 AM - 4:30 PM

IN THE CLASSROOM



Door prizes every hour, and open enrollment packets that need to be completed by all!

Snow Finally Crosses the Valley on Wednesday



Winter arrived, a bit late, on Wednesday. The snow started about 2:00 AM and continued to fall throughout the day on Wednesday.

The Maintenance Department was on the scene early to clear parking lots and entrances for staff and patients.

Remember the days when your first concern on a snowy morning was would school be open? Well, hospitals don't have that luxury do we? Hospitals are always open. So, thank you to everyone who worked through the weather this week.



Recipe File

Chicken Fingers w Curried Ketchup
from foodnetwork.com



Ingredients:

- Cooking spray
- 2 large eggs
- 1 tablespoon dijon mustard
- 2 teaspoons curry powder
- 1 teaspoon ground cumin
- Kosher salt
- 2 cups panko (Japanese breadcrumbs)
- 3 skinless, boneless chicken breasts (1 1/2 to 1 3/4 pounds), cut into 1-inch-wide strips
- 1 bunch broccoli, cut into florets
- 3/4 cup ketchup
- Juice of 1 lime

Directions:

Preheat the oven to 400 degrees F. Set a rack on a baking sheet and mist with cooking spray. Whisk the eggs, mustard, 1 teaspoon curry powder, the cumin and 1 teaspoon salt in a shallow bowl. Mix the panko with 1/2 teaspoon curry powder in another bowl.

Dip the chicken strips in the egg mixture, letting the excess drip off, then coat with the panko. Place the chicken on the rack and mist all over with cooking spray. Bake until golden brown and cooked through, about 20 minutes.

Meanwhile, bring about 1 inch of water to a boil in a large pot with a steamer rack or basket in place. Add the broccoli, cover and steam until crisp-tender, 8 to 10 minutes. Mix the ketchup, lime juice and the remaining 1/2 teaspoon curry powder in a small bowl. Serve the chicken strips with the curried ketchup and broccoli.

Per serving: Calories 330; Fat 5 g (Saturated 1 g); Cholesterol 155 mg; Sodium 1,190 mg; Carbohydrate 34 g; Fiber 3 g; Protein 37 g

Chile Cheddar Deviled Eggs
from foodnetwork.com

Mash 6 hard boiled egg yolks, 2 tsp. chopped chives, 2 tsp. chopped chipotles in adobo sauce, 2 tbs. mayonnaise, 2 tbs. sour cream, 1/4 cup shredded cheddar, 1/4 tsp paprika. Season with salt. Spoon into the egg whites, top with more chives.

Two Big Events Coming

The second annual Lower Valley Hospice Ground Hog Day Dinner is coming up February 4th. (You may have seen the commercial on channel 23?)

The Ground Hog Day Dinner is a major funding source for hospice programs that don't receive complete funding from Medicare and Medicaid.

Secondly, nominations will be out soon for the annual community awards at the Chamber of Commerce banquet March 17th.

The Sunnyside Chamber honors Healthcare Person of the Year, Senior of the Year, Youth of the Year, and Businessperson of the Year.

If you want to nominate someone for one of the awards you can get an application from the Sunnyside Chamber of Commerce website. They will also be printed in the Daily Sun News beginning next week.

Last year **Sandra Linde** was recognized as the Healthcare Person of the Year. **Tom Lathen** was named the Business Person of the Year.

off the mark.com

by Mark Parisi



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