

12/7/07

JOINT COMMISSION READINESS FOR AMBULATORY PROVIDERS

*****WASH HANDS/ AVAGARD HANDS/ WASH HANDS/ AVAGARD HANDS
BEFORE AND AFTER EVERY PATIENT CONTACT***

Joint Commission accreditation is vital and should be taken seriously

Medication Reconciliation

- Review of all current medications and updates should occur at every visit. Separate Medication list should be initiated by 3rd visit and kept current
- Complete list of medications should be sent with patient when being sent to another provider or service if provider/service name unknown or date of appt unknown
- Complete list of medications should be sent directly to referring physician/service if known date and contact information
- Complete list of medications should be provided to the patient and updated each visit with changes

Problem List

- A summary list of significant diagnoses/conditions, allergies/drug reactions, significant operative procedures must be initiated by 3rd visit and kept current

Medical Record Entries

- All outpatient clinic notes need to have at least two patient identifiers (patient's name and birth date) stamped, typed, or written on each page
- All outpatient clinic notes need to have date, time, and signature
- No unapproved abbreviations are to be used in any handwritten /typed note, prescription or patient record . DO NOT USE "QD" rather write "daily"
- Address pain if relevant to visit. If patient in pain and not relevant to visit, document referral or response in note

Hand-offs

- Any transfer of care (consultation) should include the 4 P's: Patient identification. Problem, Plan, Pertinent PMH
- Ambulatory Transfer form will be used when a patient is being admitted to the Hospital

Critical Test Reporting

- Will be notified by lab of critical result (please respond to page from lab promptly)
- Include pager number when ordering lab tests
- Read back value to lab personnel

Pre-sedation Assessment

- Complete prior to any procedure requiring conscious sedation
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Universal Protocol/National Patient Safety Goals

- ****Handwashing**—with soap and water if hands soiled/hand sanitizer after patient contact
- Time out documented for all invasive procedures (including those done at the bedside) prior to the procedure
- Site marking
- Label medications that are being used during procedures

Verbal Orders

- Verbal orders are not routinely taken in Ambulatory Clinics.
- Should there be an emergent need to phone or taken a verbal order, the staff must write it down and read back to the prescriber

Hospital Policies

- Posted on intranet after approval by MEC- should know where to find them
- Provider information sheet for new policies distributed at MEC and distributed via email to Medical Staff Directory

