

# TYLER *Times*

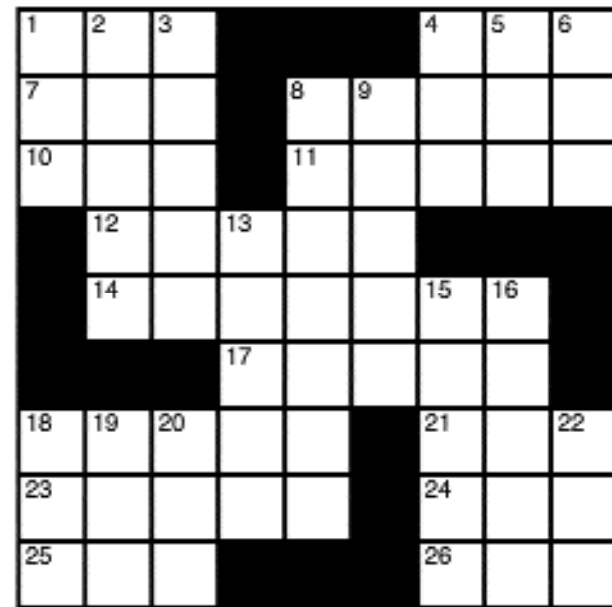
A publication for the employees of Tyler Memorial Hospital

August 2006

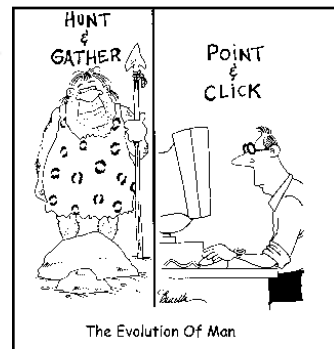
## Books on tape

- Across
- Honorable title: Turk.
  - Summer mo.
  - Chew one's \_\_
  - Strong lightweight wood
  - A Kennedy
  - Success
  - Carve
  - Spanish madams
  - 18th century Spanish card game
  - Feel extreme irritation or anger
  - Plastic \_\_ band
  - Punches
  - Extinct flightless bird
  - Congee
  - Noah's boat

- Down
- Part of a play
  - Conjecture
  - Mix up or confuse
  - In the Family
  - Dos Passos trilogy
  - Rod: sl.



- Mourning Electro
- Caustic
- Snooker term
- Kitchen seducer
- Mister, in Madrid
- Major TV network
- Go quickly
- AsLern
- Mighty tree



The headline is a clue to the answer in the diagonal.

## Gardening Under the August Sun



The latter days of August are often known as "dog days." They are hot days and the late days of summer. For everyone, the season is passing. Now it is easy to be complacent about attending to duties for the lawn and garden.

Remember to deadhead your flowers. If you allow a plant to go to seed, it will lose some of the energy needed to produce new blooms.

This is the time of year to stop pruning and fertilizing shrubs and trees. When you prune and/or fertilize, you encourage new growth on

your plants. But new growth needs time to harden before the first freeze.

August and September are good times to seed your lawn and give extra attention to your container plants. Many plants need to be cut back.

Several vegetables lend themselves to fall crops. It's time now to plant turnips, spinach, radishes, endive, and lettuce.

These are the days when you can dream and plan. Look at your garden and lawn. See what has proved successful and what has failed. Start a gardening journal so you can remember what areas will need attention and new plants when spring rolls around.

August is for fun in the sun and fun can be working in your garden. Remember growing zones are different in various regions, so check to be sure what is appropriate for growing in your part of the world.

## Annual Campaign Wrap-Up

The Tyler Health Foundation Annual campaign ended on June 30, 2006. At the July meeting of the Tyler Board of Directors the final tally of funds was announced:

General Appeal:  
\$48,249

Hospital Appeal:  
\$8,471

Kiwanis Campaign  
\$2,565

Mark Mitchell, Tyler board president, offered his sincere thanks to each employee who participated in this year's campaign.

## A Running Start

Raoul Walsh, Tyler's new president and CEO, describes Tyler as a perfect match for his experience and interests. "Being at Tyler parallels my own commitment to rural health care," he said during a recent interview. He explained that he understands the issues facing small, rural hospitals and believes that rurals are the building blocks of the nation's entire healthcare system.

"Tyler is vital to this community," he stressed, and explained that both primary care physicians and specialists depend upon Tyler to help them serve their patients.

Frustrated that the government doesn't seem to recognize the special needs of rural hospitals, Mr. Walsh lamented that more special funding and medical scholarships aren't available to help rurals stay strong. "To stay competitive, we need a 5 to 6% annual increase just to keep pace with costs and new technology," he emphasized.

Since jumping enthusiastically into his new responsibilities on July 10, the 53-year-old University of Scranton graduate has met with over 100 individuals. For two and a half weeks, the seemingly tireless administrator wel-



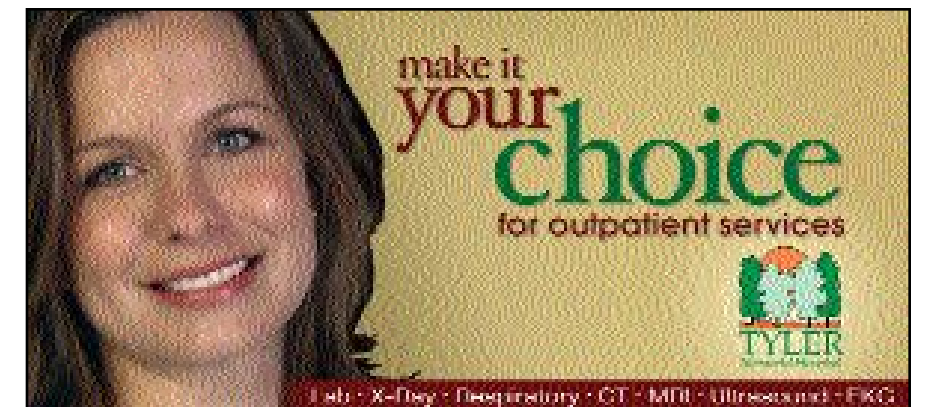
That warm smile and a handshake that says: "I'm happy to meet you," is becoming a familiar sight as Raoul Walsh, Tyler's new president and CEO settles into his new job.

comed physicians, members of the Board of Directors and department managers into his office for half hour chats about everything from what specialists Tyler needs to what football teams look good this season. In addition, he walks the hospital's corridors getting to know employees, volunteers, and patients.

"Tyler's greatest strength is her people," Mr. Walsh responded when asked (cont'd on page three)

## What's Inside

- Nurses Notes
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# Nurses' Notes

Denise Gieski, RN director of nursing

This month I would like to focus on a Patient Safety Initiative that we are involved in with many health care facilities throughout Northeastern Pennsylvania and beyond.

## The Color of Safety

Tyler, as well as all of the hospitals in Pennsylvania, is required to report any patient related adverse events or near misses to the Patient Safety Authority (PSA). The PSA received a report that clinicians nearly failed to resuscitate a patient who was incorrectly designated as DNR. A nurse incorrectly placed a yellow wristband on the patient. In that hospital, the color signified DNR. The nurse also worked at another hospital in which yellow signified restricted extremity.

The PSA surveyed patient safety officers at Pennsylvania hospitals and found that 78% used color-coded wristbands and that there was no standard meaning among healthcare facilities for different colors. As a result Allied Services started a Patient Safety Initiative: "The Color of Safety" and invited all the hospitals in the area to participate. The purpose of the group is to: "Clearly define

## PATIENT SAFETY INITIATIVE: Color Banding

and consistently implement a practice for identifying and communicating patient risk factors or special needs by standardizing the use of color-coded bands to support optimal safe care, based upon the patient's assessed needs and wishes."

The group of hospitals have agreed to standardize the meaning of specific colors of bands. An implementation schedule has been developed and we are currently in the phase of equipment selection and purchase - looking at the bands available and ordering what was selected by the group.

Next, we will be finalizing the color-banding policies and then we will be conducting staff education. Along with staff education, we will be conducting patient and community education. The goal is to complete the education in September and begin using the new bands by October 1.

"The Color of Safety" has been recognized by the PSA, and members of the group will be going to Harrisburg in August to attend a PSA Board meeting. The PSA will also be publishing all of the work that has been done by the group. We are proud to be a part of this grassroots effort to improve patient safety. Look for education on this topic soon!

## Create your own miracles

Eight steps to bringing wonderful experiences into your life

We've all heard of miracles in the form of physical healings that can't be explained. There are also miracles when the perfect solution presents itself at just the right time. Miracles happen in normal and natural circumstances. You can consciously work at creating a miracle in your life. Here are eight simple steps to achieving one.

1. Be clear about what you desire. Focus on what you want, not the means by which it comes about.
2. Expect the best. We tend to attract that which we love, fear, or expect. Expect the best even when negative circumstances appear. Consistently expect that everything is working to your highest good.
3. Let go of fear. When you think fearfully, your mind sets off related realms of negativity. This blocks your miracle. All you need is 51 percent faith, and your life will begin to turn in the right direction. You will begin to feel empowered.
4. Open your mind to all possibilities. Although miracles unfold in a very natural manner, they may come through unexpected channels. If you insist on a

miracle "your way," you risk delaying good, diminishing it, or blocking it.

5. See yourself as you want to be. If you desire health, see yourself healthy and filled with energy and enthusiasm. While you understand the fact of your situation, you focus on what you want instead of what you don't want.

6. Keep the power. Keep your miracle a secret. Sharing it can dissipate some of the power of your idea, and a negative or envious person could impart negative energy. The relationship between you and Spirit regarding your miracle must not be violated.

7. Do what needs to be done. Through the Law of Attraction, good things move into our lives. But there are things you need to do and choices you need to make. When you are clear about what you want or need, your mind becomes calm and focused, providing a clear channel for guidance in choices you need to make.

8. Pray often. It helps whether we pray for ourselves or for others. You don't have to be religious for your prayers to be effective. Pray at a time when you won't be disturbed. Allow yourself to feel empathy, love, and compassion for yourself or whoever you are praying for. Expect that your prayer is being answered.

After you pray, "let go and let God."

## Service With A Smile

Did you know you can hear a smile through the phone? Well, you can. Acting pleasant, even when we don't feel particularly great can go a long way to enhancing Tyler's customer satisfaction. A few reminders for us all:

Try to answer the phone as quickly and pleasantly as possible.

Try to eliminate putting callers on hold. If you absolutely must, make it as brief as possible. If you know it may be more than one minute, offer to call the person back - and then make sure you do.

Always identify yourself and your department when answering the phone.

If a caller reaches you by mistake, find out who can help them. Before you transfer the call, give the caller the number you are transferring her to, in case you become disconnected.

Whenever possible, call patients by their last name, until they invite you to be more familiar. This shows respect for our patients.

When having a private conversation, be aware of your surroundings and always meet the need of the patient or visitor before socializing with a co-worker.

Try to keep the noise level down, especially in patient areas. It's a no brainer that our patients are ill and need their rest. Get the squeaky cart oiled. Don't yell to a co-worker down the hallway and please wear shoes that don't make a lot of clickity click, if you spend a lot of time in patient areas.

When interacting with other departments, try to be as courteous as you would be with a patient. If someone snaps at you, try to resist the urge to give it right back. A little kindness can often go a very long way. If bad behavior persists, enlist the help of your department manager.

Tyler Memorial Hospital  
presents...  
Wine Tour 2006  
Friday, September 15th  
\$45 per person  
includes:

- ✓ Motorcoach transportation by Jo-Jo's Travelers
- ✓ Wine Tastings at the following Seneca Lake, NY wineries:
  - Hazlitt 1852 Vineyards
  - Penguin Bay Winery & Champagne House
  - Bloomer Creek Vineyard
  - Standing Stone Vineyards
  - Lakewood Vineyards
  - Ashley Lynn Winery
- ✓ Lunch at the "Stonecat Cafe"

PAID RESERVATIONS DUE BY AUGUST 25TH.  
CONTACT PAMELA SHIELDS, 996-1152

## WYOMING COUNTY FAIR

The Volunteer Sign-Up Sheet to work the Tyler booth at the Fair will be posted soon in the cafeteria. Nurses and non-clinical employees are needed for each shift. If you want a special time, act now and thanks for your help.

# Tyler Yacht Club Sets Sail



Last fall a rag-tag bunch of adventurous sailors gathered kayaks, canoes, boats, rafts and whatever they could find to float down the Susquehanna River. The group, comprised of Tyler hospital employees, family and friends, set sail in Laceyville and landed at Myo Beach. There were stops along the way for admiring the scenery, swimming and fishing. A stop was also made on a sunny island to grill hot dogs and hamburgers on an open pit.

This past June, the group, now seasoned sailors, set off to the Lehigh River to go white-water rafting. Several members overcame tremendous fear with the support of friends - not Xanax. Yes, we did lose several in the drink, but all were safely rescued. The few minor injuries supplied business for our Emergency Department. *(No sacrifice is too great to support our employer.)*

By the time you read this, we will have undertaken our third adventure. We plan to float down a much higher, muddier Susquehanna at the end of July. We already know who will be the first to end up in the water, who will smell like a chimney from smoking too much and who will jump in to save their friends from drowning.

*Submitted by Patty Race, RN, evening supervisor*

## Your home PC will run faster if you clean it up

Online projects such as downloading music, installing programs, and opening strange emails can crimp the efficiency of even the fastest computer. If your machine is not as fast as it once was, you can bring it up to speed with these steps.

Eliminate spyware. Programs that send information about your Web activities to third parties can make a computer act sluggish. Kick them out with programs like AdAware SE Personal Edition (free at lavasoftusa.com), or buy Spy Sweeper 3.5 (webroot.com) for \$30 for a one-year subscription. Then set

your computer to block pop-up ads.

Get rid of clutter. Move digital photos and audio and video files to an external hard drive, such as one from the Iomega Silver Series. They are about the size of a paperback book (50 MB is big enough). Or burn them on CDs or DVDs.

Defragment. In the Windows Start menu, go to Programs, Accessories, then System Tools, and select Defragment. Do that once or twice a month. Then run Disk Cleanup, which is also under System Tools.

Remove unused icons. They appear

## What teachers expect

### Attendance:

Students should be on time every day. Parents should make sure they are in school and on time.

### Preparation.

Students should have homework done and be prepared to learn and participate. Parents should know what's going on at school and attend parent-teacher conferences.

### Support:

Parents should explain the importance of education to their children and support teachers' efforts in the classroom.

### Respect:

Teachers deserve respect from both students and parents. Parents should teach kids to respect authority.

### Appreciation:

The teacher's job is not easy. A smile or a short note would be appreciated by a busy teacher.

### High standards:

Parents should instill a desire to do their best in their children, not just settle for getting by.

### Academics first:

Parents should remind kids that academics come first. Sports, extracurricular activities, clubs, and jobs are secondary.

in the systems tray in the lower right corner of the screen. Some of the programs launch automatically every time you boot up. Too much running at once drags down everything. Disable what you don't need by right clicking and resetting preferences.

Rebuild the system. Reformatting your hard drive could solve everything, but it could take several hours. First, back up everything on the computer. Then reinstall everything including your operating system.

Before taking this drastic step, be sure to consult your computer manual.

## Walsh cont'd

"The nurses, docs, the folks in PT and the emergency department - everyone I have talked with...they are all very supportive of Tyler- and, believe me, this level of support is rare," he stressed. "I don't hear a lot of Me, Me Me around here," he said. "As we move forward, we may occasionally disagree on individual issues, but we all agree on the big issues facing the hospital. From the conversations I've had, this hard-working group of people are prepared to do almost anything to make sure that this institution survives and is passed along to serve their own families in the years ahead," he said.

The father of three young adults, Mr. Walsh said he is grateful that Tyler did not face the prospect of having to become a Critical Access hospital, as did many other rurals, such as the Endless Mountains Health System in Montrose. He pointed out that Critical Access status, which restricts lengths of stay and the number of beds a hospital can have, narrows a hospital's focus and its value to the community.

When asked about what challenges he thought Tyler was facing, the avid sports fan rattled off a list of issues. He explained that size is always a factor in a small hospital's finances: "The cost of maintaining our infrastructure (heat, power, salaries, supplies) remains the same pretty much, no matter what our census is," he said. "So when our census is down, that revenue is lost to us forever; we can't recover it." In addition, the region's population is not growing and Tyler's payer mix is heavy

on Medicare and Medicaid, along with other low reimbursement managed care insurers.

What the Avoca native really wishes he had, was a crystal ball to see the future of healthcare. "Who knows where medicine will be in ten or twenty years?" he said. "Is someone going to develop a magic pill that patients pop and are just sent home? Will technology advance to the point where most diseases can be diagnosed and treated so

*"I feel very encouraged because of the motivation of the people all around me here ... they stimulate me."*

*Raoul Walsh*

early that hospitalization becomes rare?" he questioned. "Nobody knows; so we do the best we can with the information and the resources we have. But I feel confident about our future," he added.

What Mr. Walsh does know, is that customer service is moving to the front burner at Tyler. A model of friendly and gracious customer service himself, he promises new incentives and pledged his full support in making excellence in customer service a priority for everyone.

As he mused about how he is going

to lead Tyler from where we are today to the vision he has for the hospital, he noted that: "To be successful, you have to be committed and you commit because of the people around you; and the people here are committed to the longevity of Tyler, regardless of the configuration the hospital may take," he said. "I feel very encouraged because of the motivation of the people all around me here," he emphasized. "They stimulate me."

Comfortably settled into a house that he and his wife Joan, pronounced Jowan, have rented in town, he spends his free time rooting for a whole host of sports teams and lifting weights most evenings. A very early riser, Mr. Walsh jogs or walks five miles around town each morning and arrives at work about 6:30 AM. Absent most days from the cafeteria, he refers to himself as a "grazer," preferring to grab a quick yogurt for lunch and snacking throughout the day.

Mrs. Walsh plans to remain in Western Pennsylvania until late autumn when sons, Colin, 22 and Cory, 21 wrap up their senior football season at college. Daughter Ali, 18 will be a college freshman this fall. Until then, Mrs. Walsh will be making the six-hour trip across the state to house hunt in Tunkhannock and Mr. Walsh will be traveling the opposite direction to attend his sons' games. Sounds like a busy schedule, but one this energetic new administrator can easily handle.

Mr. Walsh will be writing a monthly column for the Tyler Times starting in November.

## JOINT COMMISSION CORNER

*Brenna Evans, RN, director of quality*

### Making The List

The Joint Commission recently released a list of the most non-compliant standards for 2005, specific to hospitals. The number one non-compliant standard was IM.3.10, which is related to do not use abbreviations. Unfortunately, as a result of our last survey, we were among the forty-one percent of hospitals found to be not compliant. Both our nursing and medical staff continue to work very hard to improve and maintain our compliance to a level acceptable by the Joint Commission.

Coming in second, at a non-compliance rate of thirty-seven percent, was a standard in the medication management chapter. Standard MM.2.20 states: "...medications are properly and safely stored." Most of what lead hospitals to non-compliance was unlocked medication carts, including anesthesia carts. So, as a reminder, for medications to be properly and safely stored, they must be secure. If med carts, anesthesia carts, med rooms, medication cabinets are left unattended, they must be locked. Let's not make the lack of performing such a simple task the reason for 'making the list' during our next survey.

# Education News

Gayle Gipson, RN, education director

## LUNCHTIME LEARNING

### Sleep Polysomnography

August 3, 2006

11:30 & 12:30

Presented by Jim Olecki  
Respiratory Manager

### Vision in Children

August 25, 2006

11:30 & 12:30

Presented by Colleen Gawles  
Prevention of Blindness Assoc

### Life is Short; Wear Your Party Pants

August 9, 2006

Various times Look for flyer.  
Loretta LaRoche is back.

## Safety MEET

Available August 19, 20, 21, 22

in Blue Room, Open 24 hours.

Mandatory

## COMMUNITY PROGRAM

### Insomnia

August 29, 2006 7 PM

Tunkhannock Library

Presented by Dr Mark Schrier

NEPA Sleep Lab

*Don't Forget:* Mandatory

Customer Service Program:

**It's a Dogs World**

Call Gayle to reserve the tape.

*For more information on any program, contact Gayle at 281.*

## Junior Volunteer Program:

Six Junior Volunteers are sharing their enthusiasm and talents with Tyler this summer. The small, but enthusiastic, group is volunteering on Tyler Wing and in HIM. The junior program ends on August 11 with volunteer hours expected to total over 300 for the summer.



Juniors, Miranda Hamilton, (standing) Rovena Grant, seated and Suzanne Crockett demonstrate the correct safety procedures for using a wheelchair.

## Tyler Antique Show:

Volunteers are needed for the Tyler Memorial Hospital 44th Annual Antique Show scheduled for October 7 and 8.

Hostesses, kitchen workers and entrance personnel are needed, as well as bakers for the

Country Cupboard. If any staff or members wish to volunteer their time, please contact Susan Reese at 276 or Denise Gieski at 169 (for Country Cupboard)

Congratulations to the following employees who were **CAUGHT IN THE ACT:**

### June:

Carlinda Campbell

Carol Hatton

Debbie White

Robin Rezykowski

Linda Greene \*

Abby Butts

Chris Mills

Marcy Freethy

### July:

Doreen Banos

Kristen Dudley

Trish Logan

Ron Baker

Ed Gowen

Abby Butts

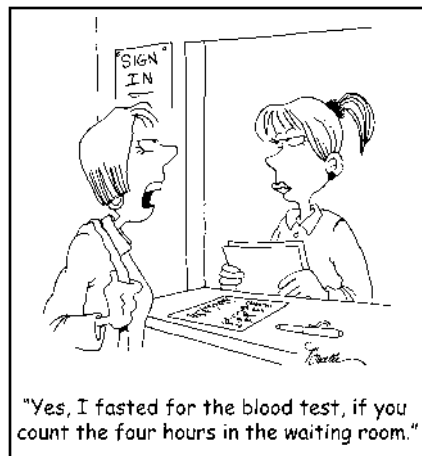
Lisa Townsend \*

Marsa Harvison

Sharon Cavallo

Mark Garverick

\* Denotes winner



"Yes, I fasted for the blood test, if you count the four hours in the waiting room."

# Why a new Emergency Department?

Carol Berry, RN, MHA, emergency department nurse manager

There has been a lot of talk recently about the need for a new Emergency Department here at Tyler. In order to keep the hospi-



Radiology Technician, Marsha Tompkins and her two daughters, Avery, three and Adia, 15 months, help demonstrate the cramped conditions and lack of privacy that is prompting the need for a new and expanded emergency department. Carol Berry, ED nurse manager and Rachael Glahn, RN, left, work with these challenges daily. Carol is working with the Tyler Board of Directors and Administration to explore the feasibility of making this dream come true.

tal family informed of the rationale behind this decision, I have decided to write this article. I hope that you will find it informative and that it will answer any questions that you may have about the ED.

The ED patient volume for the past year was 10,698 visits. Based on information obtained at a conference in Boston, presented by Freeman White Inc., a department seeing 10,000 visits a year should have a floor space of 7,200 to 9,900 square feet and eight to 11 beds. Our present ED has 2,800 square feet and six beds. I do not need to go any further to explain the need for additional space.

It has been said that the ED is the front door to a hospital and first impres-

sions are important factors in deciding whether or not a customer will return for services. The location of the present ED is in the back of the hospital, has limited parking available, the waiting

At one time patients who presented to the ED with complaints of chest pain and were diagnosed as having a heart attack were quickly stabilized and admitted to the ICU Unit for care. The standard of care for these patients has changed. Today such patients are quickly diagnosed, receive their critical care in the ED, stabilized in the ED and transported to a cath lab for additional treatment.

This means that the length of care for these critical patients is longer in the ED and they require one on one nursing care. Whenever the length of stay is long it interferes with patient flow because the bed is occupied for hours and cannot be used for other patients. There are times in the present ED when patients are waiting one or two hours to be brought back to the clinical area.

The ED very frequently uses the services of Imaging, CT and the Lab. The ED is located on one side of the building and Imaging is on the opposite side. This means that patients have to be transported

through the entire first floor hallway to receive the necessary testing.

As I have pointed out, the existing Emergency Department at Tyler is in need of replacement. The space is too small, too outdated, and it is extremely difficult to provide quality care in a confidential manner to our population. The six beds available are not enough for the demand and this will continue to be a problem as the national trend of overcrowding EDs increases.

The ED is a critical component of the health care system in Wyoming County and it is time that we replace it with a state-of-the-art facility that will provide better access and improved outcomes.

room is small, dark and unattractive and lacks patient confidentiality. There is nothing attractive or appealing in appearance and the department needs a total overhaul.

The existing ED makes it extremely difficult to comply with the new HIPPA regulations that deal with patient confidentiality. Treatment areas #1 and #2 are separated by a curtain and discussions in one area can be overheard in the second area. This situation needs immediate correction.

The nurses' station is another area that creates problems when conversations are overheard by patients, but there is not enough space to enclose the area in order to reduce the risk of breaking confidentiality.