

TYLER MEMORIAL HOSPITAL

AUTUMN EDUCATION SCHEDULE 2006

October 11, 2006

Tyler Lay Chaplain Training (TLC)
Four Wednesdays
Tyler Memorial Hospital
4:00 - 7:00 PM (Free)

October 12, 2006

AHA Healthcare Provider CPR
Tyler Memorial Hospital
8:00 - 11:30 AM (\$25)

October 3, 2006

Blood Pressure Check
Tunkhannock Senior Center
10:00 AM (Free)

October 24, 2006

Blood Pressure Check
Tunkhannock Senior Center
10:00 AM (Free)

October 31, 2006

Understanding Domestic Violence
Mary Lou Kurlancheek
Victims Resource Center
Tunkhannock Library
7pm (Free)

November 2, 2006

AHA Healthcare Provider CPR
Tyler Memorial Hospital
12:30 - 3:00 PM (\$25)

November 8, 2006

Childbirth & Parenting Class
(6 weeks)
Tyler Memorial Hospital
\$40 (\$20 if delivering at Tyler)
7:00 - 9:00 PM

November 14, 2006

Blood Pressure Checks
Tunkhannock Senior Center
10:00 AM (Free)

November 20, 2006

Childbirth Refresher
Tyler Memorial Hospital
\$10 (\$5 if delivering at Tyler)
7:00 - 9:30 PM

November 25, 2006

Sibling Seminar
Tyler Memorial Hospital
\$5 (\$3 if delivering at Tyler)
1:00 - 2:00 PM

November 25, 2006

Breastfeeding Class
Tyler Memorial Hospital
10:00 AM - 12:30 PM
\$15 (\$5 if delivering at Tyler)

December 5, 2006

Blood Pressure Checks
Tunkhannock Senior Citizens Center
10:00 AM (Free)

SUPPORT GROUPS

Cancer Support Group
Tunkhannock Library
3rd Monday of each month
6:00 PM

Lupus Support Group
Tunkhannock Library
1st Tuesday of each month
7:00 PM

Alzheimer's Association Support Group
Community Counseling Building
Last Monday of each month
6:30 PM

STAFF EDUCATION

LUNCHTIME LEARNING
OCTOBER 4, 2006
11:30AM & 12:30PM -
FLU VACCINE
"NEED IT - GET IT"
BLUE ROOM

OCTOBER 28, 29, 30, 31,
2006 "SAFETY MEET"
OPEN 24 HOURS A DAY
BLUE ROOM

OCTOBER 24, 2006
LORETTA LAROCHE - PART 3
"LIFE IS SHORT:
WEAR YOUR PARTY PANTS
9AM, 10AM, 1PM, & 2PM
NO RESERVATION NEEDED
COME AS YOU ARE..

TYLER *Times*

A publication for the employees of Tyler Memorial Hospital

October 2006

Antique Show Needs:

Baked Goods
Pumpkins
Indian Corn
Squash

This is the biggest fundraiser of the year and the committee needs the support of Tyler's employees, physicians, volunteers and retirees to be successful.

Thanks to everyone who is working so hard. Bring your family and enjoy the festivities on October 7 & 8. Tunkhannock Middle School. See page # 7 for details.

To help, call
Brenna Evans at 250

HOSPICE IS HERE



Tyler recently signed a contract with SouthernCare, Dickson City, to provide in-patient hospice care at Tyler. The group made a presentation to the Tyler Medical Staff last month explaining their services. Pictured with Dr. Patrick Murray, Tyler are SouthernCare staffers: (L-R) Karen Freedman, RN, clinical director; (Dr. Murray); Mike Pavuk, community relations; Lil Schorr, RN, case manager and Jane Steele, RN, admissions coordinator.

Flu is coming: *Time to get your shot.*

Health officials have worked to predict which strains of flu virus are most likely to cause widespread illness in 2006. These strains are contained in the vaccine for this year, the strains you will build immunity to after getting the shot.

The immunization usually works to prevent the flu, but its effectiveness, in part, depends on your general health. Illness and age can influence its effectiveness. People over 50 may have less of an immune response to the vaccine.

Even so, if you do get the flu, the vaccine will provide important protection and prevent a severe case. The shot will prevent prolonged illness,

hospitalizations, pneumonia, and death.

It's impossible for the flu shot to give you influenza, but some people do experience a mild fever, and fatigue soon after receiving the vaccine. These symptoms are caused by the body's immune system producing antibodies.

Kathy Ritter, ICM, is arranging a **FLU CLINIC** for all Tyler employees this year. With the increased Emergency Department volumes, Kathy is developing a plan to relieve the ED of the added workload of providing flu shots. Watch for details. We all need to be healthy to care for our patients.

What's Inside

- 2 Nurses Notes
- 3 Raoul's Ruminations
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- 7 Packs for Peds
- 8 Education Update

NURSES' NOTES

Denise Gieski, RN director of nursing

Verbal orders are those that are spoken aloud in person or by telephone. These type of orders offer more room for error than orders that are written or sent electronically. This can be due in part to communication difficulties, including accents, pronunciations, background noise, and unfamiliar drug names and terminology. Verbal orders introduce more opportunities for error, because they add steps to the prescribing and transcribing processes.

The JCAHO has established a NATIONAL PATIENT SAFETY GOAL to address the error-prone procedure of verbal orders. The goal states that the receiver of the verbal or telephone order should write down the complete order or enter it into a computer, then read it back, and receive confirmation from the individual who gave the order.

RISKY BUSINESS

Kathy Ritter, ICM and Risk Manager

LAWYERS "ZEROING" IN ON INFECTIONS OR RISKY BUSINESS 101

It is rare that I have the opportunity to combine my two "favorite" jobs in one article. Although I don't like the topic, (sort of like a mine field waiting to explode) it is something that has become much more important in the eyes of the media recently, even though health care providers have been aware of it for twenty years. Hospitals are clearly facing an emerging legal issue, hospital acquired infections. It could even be argued that such infections could become the next asbestos in terms of legal liability.

When an infection occurs during a patient's hospitalization, a plaintiff's attorney might cite the legal phrase *res ipsa loquitur*. For those of you who aren't into Latin, that means "it speaks for itself." More simply stated, there is a presumption or inference that because this injury (an infection) occurred there was negligence. It is then up to the defendant (hospital) to show that there are other causes for infection aside from negligent behavior.

While poor hand hygiene compliance in hospitals is well documented, the argument still exists that hospital

Verbal Orders

What can nurses do to prevent errors?

- Discuss the indication for medication orders.
- Discuss allergies, lab values, diagnoses.
- Express drug doses by unit of weight.
- Record verbal orders directly onto an order sheet.
- Use only approved abbreviations.
- Do not take verbal orders for chemotherapy.

We are currently in the process of updating our VERBAL ORDER policy. Sharon Templin, (OB Nurse) has agreed to head up a group to look at our current policies, and the DOH regulations related to verbal orders, and come up with a new policy.

If you are interested in working with Sharon on this project, please contact me at ext. 169.

acquired infections are often a trade off for keeping very sick patients alive with in-dwelling medical devices. Recent initiatives in several states seem to contradict that mind set, demonstrating that improvements in quality can dramatically decrease infection rates.

Many hospital liability cases often leave me wondering where a patient's responsibility fits into the equation. Many feel that educating patients about risks will only lead to an increased number of liability cases for hospitals. However, several advocacy groups feel that the age of the empowered patient is at hand. Patients and their families should feel free to ask or remind their doctors, nurses, etc. about hand washing /hygiene. Increased awareness is always a good thing. The more the consumer knows, the better partner they can be in their own health care, and the better outcomes they will have.

Ultimately, we all have the same goal. Whether the process involves increased hand hygiene, better isolation techniques or patients who are comfortable questioning their health care providers, we all desire to see fewer infections. So... let's be careful out there.



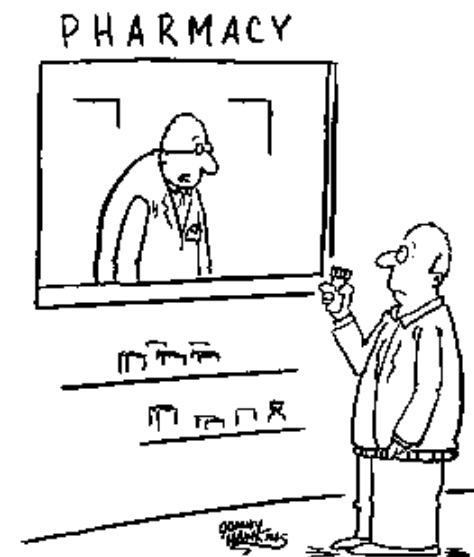
Congratulations to the following employees who were **CAUGHT IN THE ACT:**

September:

Barb Pompey
Vicki Race *

* Denotes winner

Each Day Comes Bearing Its Own Gifts: *The trick is to remember to untie the ribbons.*






"Side effects? Destitution, poverty, indigence ..."

Habla usted español?

The Customer Service Council is happy to report that the hospital is the recipient of a small grant to pay for translation of some of our patient information forms and documents into Spanish.

This grant was awarded from the Blue Cross of Northeastern PA Blue Ribbon Foundation. The grant is designed to address some of the health issues related to the uninsured and underinsured in Pennsylvania.

If you have documents or a brochure that should be translated, please forward to Gladys Bernet, customer service chairperson, by November 1, 2006.

 TYLER MEMORIAL HOSPITAL
44TH ANNUAL
ANTIQU
SHOW
SATURDAY AND SUNDAY
OCTOBER 7 & 8, 2006

TUNKHANNOCK MIDDLE SCHOOL
200 FRANKLIN AVENUE, TUNKHANNOCK
SATURDAY, OCTOBER 7
BREAKFAST PREVIEW, 9-11 AM DOORS OPEN TO PUBLIC: 11-6 PM
SUNDAY, OCTOBER 8
DOORS OPEN 10-4 PM
SINGLE -DAY ADMISSION: \$5 - SATURDAY BREAKFAST PREVIEW: \$10
BREAKFAST PREVIEW INCLUDES SATURDAY, SINGLE-DAY ADMISSION
CORPORATE SPONSOR
O'MALLEY, HARRIS, DURKIN & PERRY
For information, contact: Brenna Evans: 996.1250


NOT ANOTHER MEETING

Wondering how to improve the efficiency of your department or your committee? Ask for suggestions before the meeting so the time is used more efficiently.

How about a brainstorming session? It is a popular method, but is it better than having workers develop ideas on their own?

Psychologists researched the number and quality of ideas produced by brainstorming sessions. They looked at whether people brainstorming in a group came up with better ideas than four people did when they brainstormed alone. The group of brainstormers came up with just half as many ideas as the four people who brainstormed alone. They also discovered that people brainstorming alone came up with good ideas after the group brainstorming sessions.

One professor at the Harvard Graduate School of Education says the best way to get good ideas is to get people to write them down and bring them in. If you really want group diversity, don't include more than five to seven people. While brainstorming is plainly inefficient, you might do it because you want everyone to think they have a voice.

It seems the best answer is a little of both methods. get the group input, then ask everyone to mull over the ideas and come up with new ideas and solutions on their own.

CHANGE BEGINS WITH ME

We all try to deliver the best customer service to our patients, but recently I had a little "A ha" moment that reminded me that our co-workers are also our customers. My reminder came in the form of my time sheet.

Years ago, I had a habit of forgetting to turn in my time sheet. As a one-person department, it frequently slipped my mind and on Tuesday I would rush in to Accounting all apologies - sheet in hand.

The last few years I made a real effort to remember before Nancy

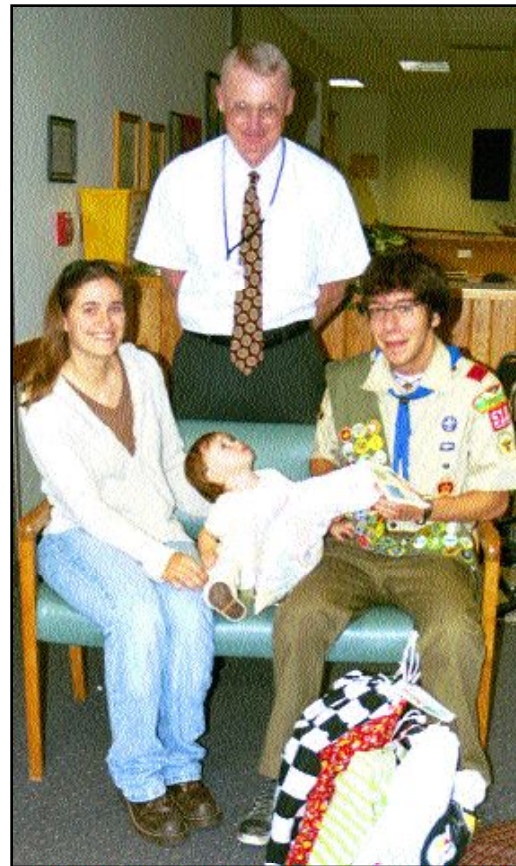
6 (Baldwin) had to call and, very pleas-

EAGLE SCOUT PROJECT BENEFITS

Baby Riley Davis, daughter of Danielle Davis, HIM, wears an expression that says: "Who's this guy?" as Tyler President, Raoul Walsh, Danielle and Baby Riley get the first look at the Eagle Scout project recently completed by Mike Davis (no relation to Danielle).

Mike's project was to create activity bags for children hospitalized at Tyler. The bags were crafted by Mike's mom and grandmother. Mike solicited donations to fill the bags from area merchants. The bags are sorted by ages ranging from infants to twelve-year-olds. In total, 50 bags were donated to the hospital.

The bags will be distributed as needed by Tyler's lay chaplains to pediatric patients as the chaplains make their rounds. Mr. Walsh thanked Mike on behalf of the hospital and congratulated him on earning the honor of Eagle Scout.



antly, remind me. Well, last week, my evil twin reappeared and I forgot the time sheet. Oh, I had a dozen excuses: It was a busy week; I had family emergencies. Blah, blah, blah. But the bottom line was - I screwed up.

On Wednesday, (that was a first) I sheepishly delivered the time sheet and realized how much harder I was making Nancy's job by my thoughtless behavior. This time I was the one causing the problem, but we all have been on the receiving end of our co-workers inconsiderate actions.

Now, I know none of us intend to make each other's day more challenging than it already is, but in spite of our good intentions, we all do it from time-to-time...and we shouldn't.

We sometimes snap in response to a legitimate request from another department. We drop the ball when someone else is counting on us, or we just don't respect that "the other guy" is just trying to do his or her job too.

So think about some of the things you might be doing- very innocently, that make the job of your friend or co-worker harder.

Our goals should include doing all we can to make sure that those with whom we work are also successful. Working together, as a team, we can all succeed and at the same time, we create a more pleasant work environment for everyone. I'm going to try harder; how about you?

Gladys Bernet

CAMPAIGN UPDATE ...

There's still time to give.

The United Way "What Matters" Annual Campaign for 2007 is well underway at Tyler.

As of this writing, Susan Reese, volunteer director, who is coordinating the campaign for the hospital, reports she has received pledges equaling 60% of the \$3,000 goal. The amount raised was pledged by only 14 individuals.

Employees can make a one-time donation or through payroll deduction, which spreads pledges over a full year. Don't forget the five, \$50 gas cards that will be awarded at the end of the campaign.

The United Way touches everyone in our community, - children, scouts, the needy and the elderly, so please give what you can. Your help does make a difference!

Completed pledge forms must be turned in by October 15. Payroll deduction will begin in January 2007.

For more information, contact Susan Reese, volunteer director at 276.

Raoul's Ruminations

Customer Service Part 11

As mentioned in my last "Customer Service" article on patients, this second article is on customer service for physicians.



Physicians must be viewed as a strategic resource and each relationship must be developed on customer service, demonstrated with effective communication - verbal and written. Physicians are sensitive to quality and service issues. If either is substandard, they will redirect patient referrals to other health entity options. My impression is that the loyalty of physicians will become something that must be continually earned. Today, declining physician reimbursement results in loyalty bonds that are tied to patient treatment efficiency, excellent patient satisfaction/care, "business" partnerships with the hospital employees and being treated well.

As I mentioned in the last article on Patient Customer Service, we can never say "thank you" enough for the physician's commitment to the hospital. A sincere thank you to the physician's for their loyalty and support would go a long way with them. This informs the physicians that we appreciate their dedication and tireless efforts to the hospital.

Your efforts and energies are benefiting the hospital. Thanks to all of you for your continued commitment to Tyler.

Raoul Walsh
Tyler President and CEO

ELECTION DAY: NOVEMBER 7

CHECK YOUR VOTER REGISTRATION NOW.
FAMILIARIZE YOURSELF WITH THE
CANDIDATES AND THE ISSUES.
CHECK YOUR POLLING PLACE LOCATION SO
YOU KNOW WHERE TO VOTE.

VOTE ON NOVEMBER 7!
DEMOCRACY NEEDS YOU.

WANTED: PATIENCE & COMPASSION

T Tyler Lay Chaplaincy Program is recruiting persons interested in serving as lay chaplains. A four week training program is scheduled to begin on October 11. Classes meet one evening per week. Lay chaplains provide spiritual and emotional support to



Jane Nurse, lay chaplain, brings a "Teddy Tyler" to newborn, Emily Burt and her mom, Lisa Ann House.

patients and families. They offer a friendly, unhurried, non judgmental ear to patients and families experiencing the challenges of illness and injury.

"We offer love first" explained Gladys G. Bernet, director of chaplaincy services. "When you are a patient, everyone coming into your room wants something - blood, information, a test etc. Our chaplains don't want anything; they just want to offer what-

ever support the patient and family needs," she said.

"Often patients want to discuss their illness. Other times they just want to show you pictures of their grandchildren or talk about the weather. Whatever the subject, we are ready to listen. Sometimes few words are spoken and a chaplain just sits quietly and holds a patient's hand," she added.

The chaplaincy program does not promote any specific religion. "Our goal is to help people reconnect with their own spiritual roots, whatever that may be, contact their clergy for them, but mostly what we do is listen," she explained.

Candidates for lay chaplaincy should be able to devote at least three hours of service, twice a month, have the support of their own clergy, be a good listener, have a sincere interest in helping others and be able to put their own concerns aside for a few hours and concentrate on the needs of others.

Training covers; the importance of confidentiality in a healthcare environment; infection control; active listening; coping with chronic and acute illness; medical terminology; stages of dying; bereavement education and support; praying with others and much more.

The Tyler Lay Chaplaincy Program is a joint program of the Tyler Chaplaincy Committee, a group of clergy and lay persons and Tyler Memorial Hospital. For an application, please contact Gladys at 301.

WINDING THROUGH WINE COUNTRY



On Friday, September 15, a sophisticated group of 44 Tyler employees, friends and family took part in a wine tour of Seneca Lake, NY. In addition to quenching their palates at Hazlitt, Bloomer Creek, Penguin Bay, Ashley Lynn, Glenora, Standing Stone & Lakewood Wineries, a tasty lunch was enjoyed at the Stonecat Cafe. This trip was coordinated by Pam Shields, administration.

STASHING EMERGENCY CASH

If the power goes out because of a storm or hurricane, the ATMs probably won't work. How would you manage if you were short on cash? Better have a little extra stashed away, the experts tell us.

Stashing a few \$20s in an unused part of your wallet will help you buy gas for your car and some groceries. Some quarters in the trunk of our car will allow you to make a phone call or feed a parking meter.

