

Minnesota Department of Health releases 8th annual Adverse Events Report

(January 19, 2012) The Minnesota Department of Health released its eighth annual Adverse Health Events Report today. “Rice Memorial Hospital is pleased that they had no events listed in the report,” said Chief Nursing Officer Wendy Ulferts, RN. “Two of the reportable events are especially difficult to prevent—falls and pressure ulcers—yet Rice works very hard behind the scenes to make the patient experience as safe as possible.”

While the total number of adverse events reported by Minnesota hospitals in 2011 was slightly higher over 2010, this year hospitals had the lowest aggregate level of reported harm since reporting was expanded in 2007. Because the purpose of the reporting system is to uncover how we can continually improve, success is not just a lower number, it is also a higher bar. For example:

- Analysis of reported events uncovered a pattern of pressure ulcers related to device use. Now hospitals across the state have expanded their prevention efforts to uncover new ways to prevent these pressure ulcers from forming. To prevent skin (pressure) sores at Rice:
 - We look at skin on admission, ask about previous problems with sores, and note health conditions that may weaken the skin;
 - We alert staff by putting a special “wound” marker on patient armbands;
 - We place an iceberg magnet on the patient’s door frame to alert staff to think below areas below the skin surface when caring for the patient;
 - We work with the patient to change their position frequently—even “micro” shifts in position help;
 - We place pillows or cushions in special areas that help protect the skin;
 - We use special mattresses that are skin friendly;
 - We provide special moisturizing and protecting creams to be applied to the areas at risk.
- Analysis has also uncovered some adverse events happen because of misinformation that started way back in a clinic visit but gets carried forward to the hospital. This past year, hospitals and clinics have teamed up to investigate how to improve communication and accuracy throughout the process. At Rice we go to the source to verify and reinforce the information with the surgeon prior to the procedure. For example, the patient is asked several times prior to anesthesia, “What procedure are you scheduled for today?” or “Can you tell me which knee you are having surgery on today?”
- Rice has participated in five Minnesota Hospital Association (MHA) Call to Action Campaigns and achieved awards in all categories: Safe Account, Safe Count, Safe from Falls, Safe Skin, and Safe Site.

These are just some of the ways we are raising the bar on ourselves thanks to the dedication and hard work of our doctors, nurses, and all our employees. We are using what we learn from reporting to find new ways to make care better and safer, and it’s working.

For more information about the 2012 Adverse Events Report and MHA patient safety initiatives, visit www.mnhospitals.org/index/patient1.