

UPDATES FROM MELISSA:

RESPITE RETREAT INFORMATION

DAY and TIME: Tuesday, 9/11, 0730-1600

LOCATION: The Center for Urban Horticulture, NHS building, see attached for map and parking instructions.

SCHEDULE:

730	Breakfast and Temperament Sorter QUIZ	
800	TEMPERAMENT SORTER (team building activity)	Hilary and Dan
915	TAMING THE DRAGON: DEVELOPING RESILIENCE THROUGH ADVERSITY (TIC)	Rebekah Demeril
1045	Break	
1100	SAFE INJECTION: TIPS, TRICKS, AND FLOW	Heather
1200	Lunch (hangout outside, arts and craft tables, yummy food)	Zee – art guru!
1300	TRANSLITERATE HEALTHCARE: COMPETENT CARE FOR TRANS AND NON-BINARY PEOPLE	Dylan Wilder Quinn
1430	Break	
1445	CREATING A TIC FOCUSED RESPITE: DISCUSSION/BRAINSTORMING	Everyone
1530/1545	CLOSING CIRCLE	Leslie and all
1600	GOODBYE!	

KRONOS upgrades: On October 1st there will be an upgrade to KRONOS functionality. Please see the internet for full details. Upgrades include employee ability to correct a missed or erroneous punch within the badge reader!

Drop in training sessions available to all staff:

September 25 (Tuesday) in NJB 707: 8 a.m., 9:30 a.m., 11 a.m.

September 26 (Wednesday) in PSB 2097: 8 a.m.

September 27 (Thursday) in R&T Auditorium: 7 p.m.

October 2 (Tuesday) in in R&T Auditorium: 6 p.m., 8 p.m.

Performance Evaluations: It seems like just yesterday that we were just completing performance evaluations. Well.... They're BAAAACK! This year's evaluation will cover 10/1/17 – 9/30/18. We will all receive tasks in our in-boxes on 10/1/18. It is super important that you respond to these tasks right away so we can complete the evaluations in a timely matter. Be thinking about your goals for this next year!

Patients are First Dashboard: I want to make sure that everyone is aware of and has reviewed Harborview/UW Medicine's 'Patients are First' Dashboard. The link can be found on the lower right hand side of the main intranet page under 'Access to Excellence'. Here's a direct link: <https://apps.uwmedicine.org/uwhs/cover.aspx?id=34&r=f3&width=600> There's a TON of clickable information here so please take a bit of time to explore.

UPDATES FROM HILARY:

Expected Admits: MHS staff- Please write names of all expected admits on the clipboard at security desk. This help security to know who to expect and create a more welcoming environment for new patient.

Hopelink Rides: Reminder to MHPs to document in Cores when HL rides have been scheduled for patient appointments for ease of coordination with nursing team.

UPDATES FROM DAN:

HMC Wound Guide: Scroll down to Key Links on this page to find a ton of resources that might be helpful to us! <https://hmc.uwmedicine.org/BU/ClinEd/SWAT/Pages/default.aspx>

Say good bye to ginger ale (We'll never forget you!): The current supply of ginger ale will be our last. For our patients struggling with nausea, we plan to have peppermint and chamomile tea available soon. Our supply of ginger ale does not actually contain ginger and is unlikely to provide relief from stomach upset. We will still continue to carry orange and apple juice for our colonoscopy patients and to treat hypoglycemia.

Faxed Orders – New Process: When we receive faxed paper orders, please place a copy of the orders in the patient chart and in Leslie's consult folder for review. The original should go to medical records to be scanned into the patient record.

UPDATES FROM LESLIE:

- It has been so easy to find the PPD results when I see respite pts at PSQ—thank you!
- We have decided to change the possible length of stay for patients undergoing cancer treatment and palliative care patients to 6 months. This should be a great change for our patients and a relief for staff. This should also allow sufficient time to obtain housing for most of these patients.
- It is not correct that patients who are administratively discharged need to be out of respite for a week prior to returning (this is a myth that seems to keep resurfacing). We previously had a policy that patients who used drugs on-site needed to be out 1 week prior to returning, however, this did not apply to other administrative discharges. We no longer automatically discharge patients for drug use on-site, so this prior practice is no longer in effect. The duration a patient must be out after an administrative discharge would be determined by a patient's unique clinical circumstances and input from the MH team.
- Please take note of the attached PHD Health Advisory about a new HIV Cluster occurring in heterosexuals using injection drugs who are experiencing homelessness in King County. We should continue to be vigilant about screening for HIV. Consideration of HIV pre-exposure prophylaxis will be reviewed by respite providers in our next ARNP meeting.

PSN REVIEW:

Xxxxx

After writing out all the PSN's I'm even more impressed with how well we manage our very difficult patient population. THANK YOU!!

HUGE thank you to everyone who worked on Friday and did such a terrific job managing the situation with our patient Leandra H. You are all rock stars!