

3. **Infection Control** – Introduced a number of new policies and infection control strategies and surveillance. During your care, we use Standard precautions to limit the spread of any infection or contaminants. We have educated our staff on Transmission Based Precautions. We use contact precautions during our procedure and our cleaning processes to restrict the transmission of any contaminants. We are trying to educate patients about cough etiquette and preventing the spread of respiratory viruses (droplet precautions). We also want to educate patients about other communicable diseases and when you should not come in for your procedure (airborne precautions). Educating our staff about antibiotic use, cleaning, disinfection and sterilization. Our staff have been trained on our new policies. 90% of our nurses have completed our Aseptic Non-Touch Technique training and 83% of our doctors. We are aiming at 100% by the end of July. All of our permanent nurses have completed the NSQHC Infection Control training and Surgical Safety Checklist & Time Out.
4. **Medication Safety** – We have changed the way we document patient medication and ensure our medications are ordered, stored and prescribed in the most appropriate way.
5. **Patient Identification** – Patient id bands are now compliant with national standards. We use 3 patient identifiers to match patients with their intended procedure, any specimens and correspondence involved in their care.
6. **Clinical Handover** – At each stage of your care, we confirm your details, procedure and handover important clinical information.

We have changed the way we engage our patients and carers.

7. **Blood and Blood Products** – We do not administer blood or blood products.
8. **Preventing and Managing Pressure Injuries** – We educate our patients about pressure injuries via the Patient Booklet.
9. **Recognising and Responding to Clinical Deterioration** – Implemented the national colour-coded deteriorating patient recovery record. We have a transfer process to ensure patients are transferred safely and quickly to the nearest tertiary hospital. Maintain emergency equipment appropriate to our facility. We also monitor patients with existing conditions more carefully.
10. **Preventing Falls and Harm from Falls** – Our falls risk process recognises patients that are at a higher risk of falls and harm from falling. We ensure our patients at risk of falling are monitored more closely.

Did you know....

We have released our new website: www.loganendoscopy.com.au

Our hand hygiene compliance rate is above the National Average!

We're celebrating 20 years of service this year.

Would you like to talk at a staff meeting about your care?

Is there something you would like to teach our staff about your care that you liked? Or how you can become involved in improving our service? Please email us on: office@loganendoscopy.com.au, or speak directly to one of the nursing staff.

Logan Endoscopy Service

LOGAN ENDOSCOPY SERVICE

Unit 3/3276 Mt Lindsay Highway QLD 4118

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THROUGH THE SCOPE

June 2014



Tell us what you think

Every couple of months, we will attempt to identify an area that we would like to improve.

This month, we are trying to seek feedback from patients about how we may improve our waiting time before you see the admission nurse.

Do you have any suggestions? Please let the nurse know, or you may choose to email us on:

office@loganendoscopy.com.au

This feedback is given directly to our management team.

Our New Website



**LOGAN
ENDOSCOPY
SERVICES**

www.loganendoscopy.com.au

What's New

Logan Endoscopy Service has been going through some big changes.

This year is our full accreditation survey with ACHS, this is undertaken every 4 years to ensure we meet specific requirements. This year, we are also being accredited to the National Safety & Quality in Healthcare Standards. You may wish to review these standards in more detail. The website is: www.safetyandquality.com.au These standards now apply to all hospitals across Australia. There are 10 National Safety & Quality Standards, each with a number of actions to meet. At a glance, these standards are:

1. Governance
2. Partnering with Consumers
3. Preventing and Controlling healthcare associated infections
4. Medication Safety
5. Patient Identification and Procedure Matching
6. Clinical Handover
7. Blood and Blood Products
8. Preventing and Managing Pressure Injuries
9. Recognising and Responding to Clinical Deterioration
10. Preventing Falls and Harm from Falls

It has taken us some time to review our policies and our processes, the way we care for our patients and how we engage patients. This has been a steep learning curve for all of us. We appreciate your patience while we continue to implement and improve our processes.

What we have done?

We strive to provide safety and quality care to our patients.

1. **Governance** – Regular performance and skill management of staff, further developed our incident, complaints and feedback systems, and updated our patient engagement processes.
2. **Partnering with consumers** – Introduced a pre-procedure phone call and patient brochure to help identify what our patient's need before their procedure. We seek feedback about our new paperwork and invite patients & carers to provide direct feedback to our staff. Patient Charter is on display in 3 different languages and Interpreter Services are available for non-english speaking patients.