Name:	Date:

Joint Commission Prep Part II

- 1. Keep our patients and each other safe, deliver an exceptional patient experience, deliver an exceptional employee experience, meet the annual business plan.
- A. Pt's own meds
- 2. Committed to providing an exceptional pt. care experience that promotes healing & recovery in a compassionate environment.
- B. Advance Directive
- 3. We deliver superior qualtiy care in all that we do, we treat others as they would like to be treated, we are results orientated and achieve our objectives, we are team players, we are resourceful in overcoming obstacles.
- C. To prevent infection spread:
- 4. Is updated with approp. interventions if a patient falls while in the hospital.
- D. Contact Enteric Precautions

5. Completed within 36 hours of admission.

E. PT/OT/ST evals

6. Completed within 8 hours of admission.

- F. Our Mission
- 7. Use at least 2 ways to identify patients prior to ALL medication administrations.
- G. Nursing assessments
- 8. Distraction, positioning, rest, cold application, music, and relaxation to name a few.
- H. A National Pt. Safety Goal:
- 9. Right medication, right time, right dose, right patient, right route, and right circumstance.
- I. Modalities of pain mgmt:
- 10. Obtained prior to procedures such as hemodialysis, peritoneal dialysis, PICC line placement, joint aspiration, blood transfusion, and baclofen pump refill.
- J. Sharps Container
- 11. One B/P cuff per patient, clean equipment between EACH use, wipe down WOWs, use the right cleaning wipes for the right isolation.
- K. Informed Consent

12. Requires N95 mask.

- L. Incident report
- 13. Requires gown and gloves in the room. Patient and staff must wash hands when leaving room and equipment must be disinfected with bleach wipes.
- M. Care Plans

- N. Pain Reassessment 14. Inability to contain infectious organism (i.e. incont, diarrhea that cannot be contained in an adult brief or wound drainage that cannot be contained in a dressing). 15. Isolation signs remain on doors until the room has been cleaned O. Our Vision: and should only be removed by who? 16. Completed for ALL new and worsened wounds after notifying P. Exclude from gym/group act, the supervisor. Q. EVS 17. Sent home with family whenever possible. If not possible, pharmacy should be contacted by nursing to secure them in the pharmacy or other secure area for the duration of the patient's stay. IF to be administered by staff, must have an MD order and be verified per pharmacy. R. Discard date 18. Posted outside the elevators and provided on admission. 19. Reassessed 30-60 minutes after medication is given and S. Doors documented in the patient record. 20. To put the patient first. To help improve quality of life for the T. 6 rights for Med admin. community in which we live and work. To continually improve by being open to and welcoming of new ideas from all levels of the organization To attract, train, and retain the best possible staff, to stand out from others by fully embracing high-quality clinical care and sharing commitment to doing well by doing right. 21. A legal document that allows a person to give directions about U. Airborne precautions future health care or to designate another person to make health carea decisions if the individual loses decision-making capacity.
 - V. Patients Rights & Resp.
- 23. Items such as ultrasound gel and glucometers controls should be labeled with this at the time of opening.
- W. Key results:

24. Should NEVER be propped open.

22. Should be changed when 3/4 full.

X. Our Values: