

Nursing Shared Governance



Code Committee Meeting

November 20, 2017

1100-1200

Cos Cob Conference Room

AGENDA

Time	Topic	Respondent
1100	Welcome & Approval of Minutes	Co-chairs
	STANDING AGENDA ITEMS <ul style="list-style-type: none"> • FPDR (Family Presence during Resuscitation) EBP initiative • Get with the Guidelines (GWTG) data • End Tidal Carbon Dioxide (ETCO2) by respiratory therapist • YNHHS code committee report out • Code debriefing 	Co-chairs Gabrielle Sandaire Co-chairs
	OLD BUSINESS <ul style="list-style-type: none"> • Pediatric code cart trial update • Items from B. Flanagan for the code committee 	Herbert Facey All
	NEW BUSINESS	
	OPEN DISCUSSION <ul style="list-style-type: none"> • Pharmacy • SPD • Respiratory • Education • GEMS • Cardiology • Anesthesia 	

Council decisions are based on the clinical nurse *scope of authority*- focused on nursing practice, quality, standards, and outcomes. All financial decisions (human, material, and fiscal resources) rest with the Chief Nursing Officer.

Code Committee Minutes

Time: 1100-1200
Location: Cos Cob Conference Room
Recorder: Gabrielle Sandaire
Date: November 20, 2017
 P=Present A=Absent E=Excused I=Invitee

ATTENDANCE					
E	M. Auerbach, MD	A	K. James, RN	P	D. Scherer, DNP,MHA,RN,CNOR Co-Chair
P	H. Facey	E	R. McElwain, RN, BSN	P	D. Schupp, RN, CCRN
P	K. Carley-Spanier, MSN, RN	A	A. McGroory, RN, MSN	A	C. Seelig, M.D.
A	W. Maleek, MD	P	S. Graham, MD	A	S. Smith, MSN, RN
P	M. Franco, M.D. Co-Chair	P	S. Polaski, RN, BSN	I	M. Caspare, RN
P	G. Sandaire, Respiratory Director	P	C. Rae, BSN, RN	P	P. O'Connor

Agenda Item	Presenter	Discussion	Outcome/Follow-up	Responsible Person
Welcome & Approval of Minutes		Motion to approve minutes from September 2017 meeting.	Minutes approved with no changes	N/A
Family Presence During CPR	C. Rae D. Scherer	<p>Family presence during CPR with facilitator is not consistent and families are not asked if they want to be present during code; staff needs to be reminded to have a facilitator present.</p> <p>Discussion of FPDR (Family Presence during Resuscitation) EBP Initiative; literature review discussed; literature reveals that this creates less anxiety for family members and not traumatic; grief was eased by sharing the last moments with their loved one and were content with their decision to be present. At 1 and 6 months after</p>	<p>All members present agree that this is a best practice and FPDR will be adopted at GH; Teaching plan will be developed by D. Scherer, Dr. Franco will bring to MEC in January 2018; Policy & SOP work to begin lead by C. Rae. Good discussion</p>	C. Rae D. Scherer All

Agenda Item	Presenter	Discussion	Outcome/Follow-up	Responsible Person
Code Debriefing	M. Franco	<p>the event, lower levels of anxiety, depression, intrusive imagery, posttraumatic avoidance behavior, and grief were observed in family members. Proposal for this to be a best practice at GH.</p> <p>Dr. Franco stated that he personally does debrief with house staff post-code but suspects it is not consistent at all codes.</p> <p>Dawn states that this may not be done on nights or weekends due lack of staff and infrequency of codes.</p> <p>EMS stated they do debrief but it is an informal process that isn't documented.</p>	<p>Nursing feedback is that the physician staff may debrief but may not always include nursing staff and questioned if it should.</p> <p>Suggestion made that questions on the back of the code sheet could guide the discussion.</p> <p>Practice debriefing is added to the Mega Code that is done on Tuesdays</p>	Dr. Franco Education
Code Cart Education	B.Flanagan	<p>Issues/Concerns that have been brought to light during nurse competency for the code cart are</p> <ol style="list-style-type: none"> 1. There are 2 red locks, which exp. date should be documented on the checklist? 2. Can outside drawers of adult cart be labeled with its contents? 	<ol style="list-style-type: none"> 1. Was decided of the two locks the medication lock is the one that should be documented 2. As the carts come down they could started to be labeled as requested. 	Education and SPD to follow up
ACLS		<p>Question came up if ACLS is required of anesthesiology staff and whether it is AHA</p>		Anesthesia to follow up
Broselow Cart	H.Facey	<ol style="list-style-type: none"> 1. Paper working missing from the cart 2. PEDI cart drawers to be repainted 3. SPD given extra tape Broselow tape for cart 	<ol style="list-style-type: none"> 1. Committee suggested laminated pockets to keep sheets in that can be wiped off 2. Colors on drawers are to reflect the reference and match the Broselow tape. Corresponding weight to go on drawer as well 	H.Facey

Agenda Item	Presenter	Discussion	Outcome/Follow-up	Responsible Person
Medications	S. Vigneau	<ol style="list-style-type: none"> Shortage of Bristojets for bicarb. Epinephrine shortage continues as well Was brought to committee's attention that Mg Sulfate and Narcan too close in code cart and look similar. 	<p>After this is done there can be a trial of the cart.</p> <ol style="list-style-type: none"> Kits have instructions printed on bags on how to mix for these medications Pharmacy to separate them in the cart medication tray so these two medications are not confused 	Pharmacy
Report from System Code Committee	Dr. Franco	No meeting as meeting schedule was changed. Next meeting in July 2019	NA	
Get with the Guidelines (GWTG)	Rachel V	Data presented Etco2 compliance 100%	GWTG data will continue to be reviewed every other meeting	Rachel V Nursing and respiratory staff
Defibrillator standardization	Dr. Franco and Rachel	Survey done and the decision is to go with Stryker Physio-Control defibrillator. EMS asked for their feedback and they like this device as well.	System agrees with decisions and still awaiting funding (no date)	Yale Purchasing

Respectfully submitted,

Gabrielle Sandiare
Gabrielle Sandiare, Respiratory Therapist