

GOALS AND OBJECTIVES FOR 2016

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NURSING SERVICES

To provide improved quality care and patient safety to our clients in an effort to maximize patient outcome and satisfaction.

Strategies:

Continuous review and update of nursing policies and procedures.

Ensure that all policies and procedures are adhered to by nursing staff, through education, motivation and chart audits

Provide Continuous Nursing Education (CNE) On a monthly basis,

Incorporate the update policies and procedure into these monthly CNE.

Establish and maintain database statistical information regarding related issues/ indicators

Medical Errors

Falls

Pressure ulcers.

Implement Strategies to reduce the number of Medical Errors, Pressure Ulcers and Falls.

Re-educate and enforcement of infection prevention measures in an effort to reduce the number of Hospital Acquired Infection (HAI'S)

Improve effective communication in an effort to develop a better Nurse-Patient and Nurse-Staff relationship

Ensure that 50% of our nurses are Basic Life Support (BLS) AND Advance Cardiac Life Support (ACLS) Certified.

PHARMACY

As 2015 comes to an end we reflect on our objectives for 2015 and whether or not we have achieved any of it.

As we reflect and set objectives for 2016 our main focus is centered on patient care and meeting the needs of patients. Our pharmacists have recognized the need for continuing education, and will be starting a drug information leaflet focusing on different disease conditions and training. This will be led by Miss Shoneza Kingston. There will also be increase awareness and efforts to reduce expired items in hospital. In November 2015 our bond reported zero expired items, with improve and persistent monitoring we are aiming to achieve more of this.

Woodlands Limited have recently acquired distributorship of POEN, an Argentine ophthalmic company, we will soon be embarking on external ophthalmic medication detailing.

QUALITY CONTROL/ SAFETY AND HEALTH

My plan for 2016 is to work closely with the Infection Prevention Control Team to reduce the possibility of Hospital Acquired Infections.

I plan to prevent as far as possible, workplace accidents by;

Conducting a detailed Risk Assessment and putting administrative and engineering controls in place where necessary to ensure safer environment for customers and staff.

Conducting training sessions hospital-wide on safe work practices.

Customer service training for all frontline staff will be conducted with our clients in mind. It is my plan to deliver a service that is second to none.

LABORATORY

To obtain recertification of the laboratory by Guyana National Bureau of Standards for the period 2016 to 2018.

To introduce various health packages for customers at an affordable cost such as basic and comprehensive wellness package for both men and women.

To Offer New Lab Tests to the Public.

To provide training for all laboratory staff through continuing education both in house and external.

NEWS IN BRIEF**SOME STATISTICS FOR
November 2015****Emergency Room****Patients Seen-****2583****Admissions—72****Maternity****Total Deliveries— 81****Males— 42****Females— 39****Caesarean****Sections29****Neonatal Death— 1****Twins— 0****Premature—0****Breech—7****Still Births—0****Male ward****Admission—80****Deaths—0****Female ward****Admission -131****Deaths—0****ICU****Admissions— 34****Deaths- 2****Radiology****X-ray—1201****CT— 131****Ultrasound—2089****ECHO— 60****Holter—2****Theatre****Surgeries— 150****Pharmacy****Prescriptions —****4402****Laboratory****Patients attended****2667****DOCTORS MEETING:-****Was held on November 5 2015 at 17:00Hrs****Topic:: Understanding Hiatal Hernias - by Dr. Cheetanand Mahadeo****NURSES MEETING:-****RN/ RNRN/ SM was held on November 6, 2015 at 15:00Hrs****Topic – Diabetic Nutritional care– Ms Lambert****LPN-N/A November , 2015 at 15:00 Hrs****Topic:- Diabetic Nutritional care– Ms Lambert****ACCOUNTS AND SWITCHBOARD**

Updating our current Billing and Accounting Software; in order to improve our efficiency and better serve our customer.

Plans for Patient billing are as follow;

(1) Replacing our current manual receipt system with computerized receipts. The advantages of the afore mentioned are as follow;

(A) Shorter discharge process time-at present our cashiers are issuing hand written receipts which is time consuming when there is a queue.

(B) The legibility of receipts issued to customers will be improved.

(C) The Company would save fiancé since the printing of the huge volume of receipts books will no longer be required.

(2) Modifying our current billing software in order to improve our efficiency while processing discharges and retrieving monthly financial data for the accounts manager. The accounts staff has taken on this task hence there would be no cost to the company.

(3) Computerized Accounting Training (QuickBooks) for our staff, this training is expected to improve the speed and efficiency in patient billing.

(4) Printing of Pre-number admission books, this implementation is expected to speed up the admission process and eliminate the current mistakes being made while assigning unique case numbers to patients.

(5) Introducing of online banking, this would enable our directors to receive immediate updates on the Company's financial status as opposed to the current system of waiting on bank statements which can take as long as one month after current month.

SWITCHBOARD

Continuous training on protocols to performing current duties

Ongoing customer service training

Computerized accounting training (QuickBooks) on the admission process; receiving payments and issuing of computerized receipts

ALL OF THE ABOVE IS WITH THE AIM OF IMPROVING THEIR EFFICIENCY IN CUSTOMER SERVICE.

ADMINISTRATOR

Identified priorities that were focused on in 2015 for the expansion of our service, either starting to provide these services (Ophthalmology) or they are in the end stage of completion. While much was accomplished, there were delays beyond established time line.

2016 Plan is also a mission focused, designed to continue strengthening our capacity and the quality of our services. While 2015 was the year with many investments, 2016 will focus on the quality of our service. Customer service needs be at the heart of our model if the investments are to be successful.

The following are some of the projects identified for 2016 Complete the Cath Lab and Cardiac ICU.

Continue with maintenance/renovation schedule for the Pharmacy, A&E, Canteen's seating area, Laundry and kitchen.

Continue to develop the main building(Façade) to achieve a more modern presentation

Utilize the available space between North, South and Eastern wings of hospital to accommodate waiting area.

Restructure ground floor of Southern wing to accommodate Pathology Lab

Methicillin-Resistant Staphylococcus Aureus (MRSA)

Methicillin-resistant Staphylococcus aureus (MRSA) is a type of staphylococcus or "staph" bacterium that is resistant to many antibiotics. Staph bacteria, like other kinds of bacteria, normally live on your skin and in your nose, usually without causing problems. But if these bacteria become resistant to antibiotics, they can cause serious infections, especially in people who are ill or weak. MRSA is different from other types of staph because it cannot be treated with certain antibiotics such as methicillin.

MRSA infections are more difficult to treat than ordinary staph infections. This is because the strains of staph known as MRSA do not respond well to many common antibiotics used to kill bacteria. When methicillin and other antibiotics do not kill the bacteria causing an infection, it becomes harder to get rid of the infection.

MRSA bacteria are more likely to develop when antibiotics are used too often or are not used correctly. Given enough time, bacteria can change so that these antibiotics no longer work well.

How is MRSA spread?

MRSA, like all staph bacteria, can be spread from one person to another through casual contact or through contaminated objects. It is commonly spread from the hands of someone who has MRSA. This could be anyone in a health care setting or in the community. MRSA is usually not spread through the air like the common cold or flu virus, unless a person has MRSA pneumonia and is coughing.

MRSA that is acquired in a hospital or health care setting is called healthcare-associated methicillin-resistant Staphylococcus aureus (HA-MRSA). In most cases, a person who is already sick or who has a weakened immune system becomes infected with HA-MRSA. These infections can occur in wounds or skin, burns, and IV or other sites where tubes enter the body, as well as in the eyes, bones, heart, or blood.

In the past, MRSA infected people who had chronic illnesses. But now MRSA has become more common in healthy people. These infections can occur among people who have scratches, cuts, or wounds and who have close contact with one another, such as members of sports teams. This type of MRSA is called community-associated methicillin-resistant Staphylococcus aureus (CA-MRSA).

What are the symptoms of MRSA?

Symptoms of a MRSA infection depend on where the infection is. If MRSA is causing an infection in a wound, that area of your skin may be red or tender. If you have pneumonia, you may develop a cough.

Community-associated MRSA commonly causes skin infections, such as boils, abscesses, or cellulitis. Often, people think they have been bitten by a spider or insect. Because MRSA infections can become serious in a short amount of time, it is important to see your doctor right away if you notice a boil or other skin problem.

How is an infection diagnosed?

If your doctor thinks that you are infected with MRSA, he or she will send a sample of your infected wound, blood, or urine to a lab. The lab will grow the bacteria and then test to see which kinds of antibiotics kill the bacteria. This test may take several days. You may also be tested if your doctor suspects that you are a MRSA carrier. A MRSA carrier

is a person who has the bacteria living on the skin and in the nose but who is not sick. The test is done by taking a swab from the inside of the nose.

How is an infection treated?

Depending on how serious your infection is, the doctor may drain your wound, prescribe antibiotic medicine, give you an IV (intravenous) antibiotic, or hospitalize you.

Most cases of community-associated methicillin-resistant Staphylococcus aureus (CA-MRSA) begin as mild skin infections such as pimples or boils. Your doctor may be able to treat these infections without antibiotics by using a minor surgical procedure that opens and drains the sores.

If your doctor prescribes antibiotic medicine, be sure to take all the medicine even if you begin to feel better right away. If you do not take all the medicine, you may not kill all the bacteria. No matter what your treatment, be sure to call your doctor if your infection does not get better as expected.

How can I prevent getting or spreading MRSA?

As more antibiotic-resistant bacteria develop, hospitals are taking extra care to practice infection control, which includes frequent hand-washing and isolation of patients who are infected with MRSA.

Practice good hygiene.

Keep your hands clean by washing them frequently and thoroughly with soap and clean, running water or using an alcohol-based hand sanitizer. Hand-washing is the best way to avoid spreading germs.

Keep cuts and scrapes clean and covered with a bandage, and avoid contact with other people's wounds or bandages.

Do not share personal items such as towels or razors.

Be smart about using antibiotics. Know that antibiotics **can** help treat bacterial infections but they **cannot** cure viral infections. Always ask your doctor if antibiotics are the best treatment. And avoid pressuring your doctor into prescribing antibiotics when they won't help you get better.

Always take all your antibiotic medicine as prescribed by your doctor. Using only part of the medicine may cause antibiotic-resistant bacteria to develop.

Do not save any antibiotics, and do not use antibiotics that were prescribed for someone else.

If you are in the hospital, remind doctors and nurses to wash their hands before they touch you.

If you have an infection with MRSA, you can keep from spreading the bacteria.

Cover your wound with clean, dry bandages. And follow your doctor's instructions on caring for your wound.

Keep your hands clean. You, your family, and other people with whom you are in close contact should wash their hands often with soap and clean, running water or use an alcohol-based hand sanitizer, especially after changing a bandage or touching a wound.

Methicillin-Resistant Staphylococcus Aureus (MRSA)

Do not share towels, washcloths, razors, clothing, or other items that may have had contact with your wound or a bandage. Wash your sheets, towels, and clothes with warm water and detergent and dry them in a hot dryer, if possible.

Keep your environment clean by wiping all frequently touched surfaces (such as countertops, doorknobs, and light switches) with a disinfectant.

If you need to go to the hospital for some reason, and you have staph bacteria living on your skin and in your nose, you may be treated to try to prevent getting or spreading a MRSA infection. You may be given an ointment to put on your skin or inside your nose. And you need to wash your skin daily with a special soap that can get rid of the bacteria.

WHAT'S NEW AT WOODLANDS??

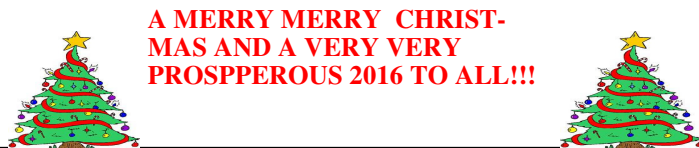
Woodlands Limited has been able to provide a number of new services for its customer this year.

We have now added a Dialysis service. We have already done two cases, and will be available for our customers in need of such care.



HUMOR IN UNIFORM

Due to a job transfer, Brian moved from his hometown to New York City. Being that he had a very comprehensive health history, he brought along all of his medical paperwork, when it came time for his first check up with his new Doctor. After browsing through the extensive medical history, the Doctor stared at Brian for a few moments and said, "Well there's one thing I can say for certain, you sure look better in person than you do on paper!"



A MERRY MERRY CHRISTMAS AND A VERY VERY PROSPEROUS 2016 TO ALL!!!

We can now be perused on our Web Site
www.woodlandshospital.com

Management and Staff wish to congratulate the following persons on their birth anniversary for December-2015

Shonette Bynoe	5-Dec
Videsha Persaud	6-Dec
Elizabeth Taylor	8-Dec
Savitree Melville	10-Dec
Susan Daniels	13-Dec
Orin Josiah	14-Dec
L. Latchmenarine (Ruby)	15-Dec
Delker Welch	23-Dec
Natasha Laundry	23-Dec
Meethu Thomas	24-Dec
Estel Wills	27-Dec
Lijo Joseph	27-Dec
Leslyn Younge	27-Dec
Gary Grant	29-Dec
Stacy Nixon	30-Dec
Kim Stanton	31-Dec
Alana Douglas	31-Dec

TAKING A BREAK FROM WOODLANDS HOSPITAL



Fazana Allim	1 st -14 th December, 2015
Bibi Nafeeza Bacchus	1 st -14 th December, 2015
Sherry Ann Khan	1 st -4 th December, 2015
Del Welch	7 th -12 th December, 2015



vacancies exist for

Security Guard
Yard Attendant,
Canteen supervisor,
Cook
Human Resource Manager
Maid