



Patient Safety Award

LAMMICO Patient Safety Award & Grant Application

2019 TOPIC: Reducing HAIs: Instrument Point of Use Care
APPLICATION DUE DATE: APRIL 30, 2020

Award Description

The application period for this award begins June 1, 2019 and ends April 30, 2020. Entries must be received by midnight of the posted application due date. Promotion is subject to local, state and federal laws, and is void where prohibited. Application submission implies acceptance of and agreement with award rules and conditions.

Background Information

Reusable medical instruments are frequently needed in non-surgical areas of healthcare such as an emergency department, GI lab, urology clinic and many others. As these instruments are used, specific care and handling procedures are needed at the point of use through transport for reprocessing. When the facility procedures for contaminated instrument management are not followed or are inadequate, the safety of patients and staff may be compromised. Procedure-related infections or exposure of staff to potentially infectious materials may result. Unfortunately, this problem may go undetected until a serious consequence, such as an outbreak of infections, occurs.

LAMMICO's learning management system includes an educational activity, *Reducing HAIs: Instrument Point of Use Care*, offered free of charge to Louisiana, Arkansas and Mississippi hospitals and facilities. This activity will provide guidance for situations when medical instruments are used in one area and the contaminated items are processed in a separate location. Standards and guidelines from OSHA, CDC, Association for the Advancement of Medical Instrumentation (AAMI), The Joint Commission and Association of periOperative Registered Nurses (AORN) are incorporated to facilitate patient and healthcare worker safety.

To access the learner activity, please use the following link: <https://medicalinteractive.com/courses/50608>

Award Entry

No purchase necessary to apply for the grant or to win. Hospital/facility applicants will enter by submitting this application for entry. After the hospital/facility staff complete the educational activity, review your current policy/procedure/process. Perform an audit to establish a baseline (utilizing the skills checklist found as an attachment to the learning activity).

Make the necessary changes to your policies, procedures and/or processes. Perform a second audit after implementation of changes. To participate in the 2019 LAMMICO Patient Safety Award and Grant program, applicants are required to submit hard copy (print) or digital (electronic) examples of changes and improvements made to their current policy, procedure and/or process and the way it was communicated to the staff.

Eligibility

The award is open to hospitals and facilities in Louisiana, Arkansas and Mississippi. Applicants are not required to be underwritten by LAMMICO to participate in the competition. Learn more about this year's program at www.lammico.com/grant.

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Selection

To further enhance your efforts towards patient safety, LAMMICO sponsors this Award and Grant for the hospital or facility that can best demonstrate the most meaningful improvement in policies, procedures and/or processes, as determined by a LAMMICO committee. All judging decisions are final.

Prizes

The hospital or facility that best demonstrates the most meaningful improvement in policies, procedures and/or processes, will be awarded:

- A **\$10,000** grant to the **winner** to be used for nursing professional development
 - One-year risk manager membership to the American Society for Health Care Risk Management (ASHRM)
 - One-year complimentary membership to Medical Interactive Community for all employees to access our risk management CME/CNE/MOC courses online
- A **\$5,000** grant to the **second place** participant to be used for nursing professional development
 - One-year risk manager membership to the American Society for Health Care Risk Management (ASHRM)
 - One-year complimentary membership to Medical Interactive Community for all employees to access our risk management CME/CNE/MOC courses online

Winner Notification

Winners will be notified within 15 days after determination date. Employees of LAMMICO will communicate directly with winning facility representatives to coordinate prize distribution, announcements and celebration logistics.

General Conditions

Contestants hereby grant LAMMICO a non-exclusive, perpetual, worldwide license to broadcast, publish, store, reproduce, distribute, syndicate, and otherwise use and exhibit the Submission (along with submitted names, motivational communication samples, voices, performance, images, and/or likenesses obtained as a result of this Submission) in all media for the purposes of trade or advertising without further compensation. The official rules are subject to modification by LAMMICO. In the event of a dispute, all decisions made by LAMMICO are binding and final.

Contact Information

Please contact LAMMICO's Hospital Risk Management Specialist, Lynne Vega, BSN, RN, CNOR(E) at lvega@lammico.com or 504.841.2738 for additional inquiries and to submit your application.

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Name of Organization		
Address of Organization		
Name of CEO		
Name & phone of CNO		Phone:
Name of Medical Director		
Name of Risk Manager		
# of Beds _____	Average Daily Census _____	

1. Did staff complete the learning activity <i>Reducing HAIs: Instrument Point of Use Care?</i> Yes or No (please circle). If yes, please provide the number of nurses.	RNs _____ LPNs _____
2. Were policies/procedures/processes updated as a result of viewing the educational activity?	Please Circle Yes No
3. Were audits performed, pre and post implementation of changes, utilizing the skills checklist in the learning activity?	Please circle Yes No
4. Provide information about the changes and/ or education that you implemented to reinforce the use of best practices. Information may be in the form of a video, flyers, memos, pocket cards, posters, etc. When did you make changes and/or provide education? What is the effect so far?	Date(s):
5. Please submit a signed attestation statement that all of the competition eligibility requirements were completed.	

I attest that the information provided above is correct and I have attached a copy of our motivational communication with our staff.

Signature _____

Date _____

Title _____