



THE Lamp LIGHTER

Methodist Hospitals Nurse Newsletter • Aug. 2025

PROVISION OF CARE SPOTLIGHT: Patient Care Playbooks

As Methodist Hospitals anticipates the upcoming Joint Commission survey, the next several Lamplighter editions will feature a series focusing on various aspects of the provision of care. In this issue, we're spotlighting Patient Care Handbooks.

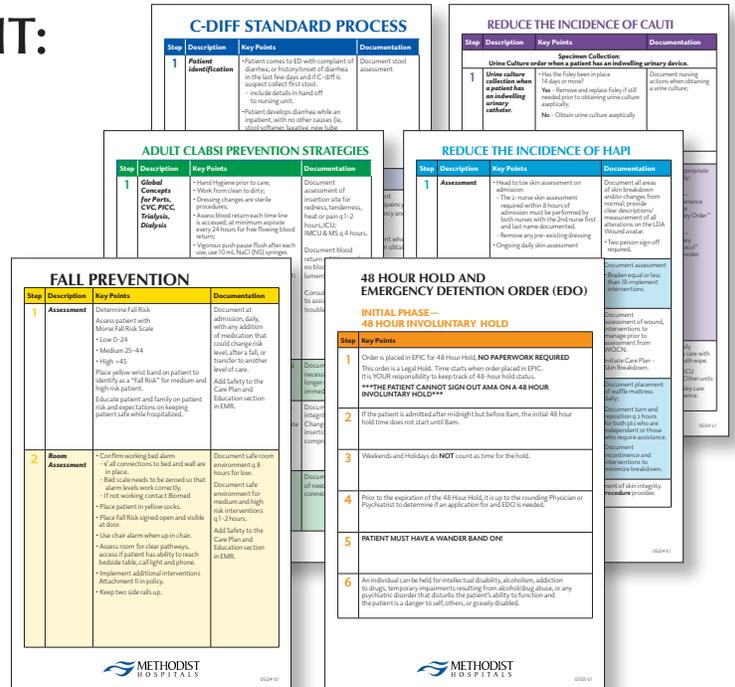
Nurses are encouraged to review the Patient Care Playbooks—concise, easy-to-access resources designed to support clinical excellence and compliance with our Provision of Care protocols.

These playbooks provide essential guidance on key topics, including:

- Clostridioides difficile (C-Diff)
- Central Line-Associated Bloodstream Infections (CLABSI)
- Fall Prevention
- Hospital-Acquired Pressure Injuries (HAPI)
- Catheter-Associated Urinary Tract Infections (CAUTI).

Developed for quick reference, each playbook outlines the most critical prevention strategies, clinical steps and documentation standards required to ensure consistent, high-quality patient care. They address everything from initial assessment and infection control measures to intervention checklists and care bundles.

For example, the C-Diff playbook emphasizes timely specimen collection, hand hygiene with soap and water, and proper isolation precautions; the CLABSI guide reinforces sterile technique, daily line necessity assessments, and CHG bathing; and the Fall Prevention protocol details risk assessment with the Morse Scale, environmental safety checks, and post-fall procedures.



The collage displays several pages from the Patient Care Playbooks. Visible pages include:

- C-DIFF STANDARD PROCESS:** A table with columns for Step, Description, Key Points, and Documentation. Step 1 is Patient Identification.
- REDUCE THE INCIDENCE OF CAUTI:** A table with columns for Step, Description, Key Points, and Documentation. Step 1 is Urine Culture order when a patient has an indwelling urinary catheter.
- ADULT CLABSI PREVENTION STRATEGIES:** A table with columns for Step, Description, Key Points, and Documentation. Step 1 is Global Concepts for PFTs, CVC/PICC, Dialysis, and Trachea.
- REDUCE THE INCIDENCE OF HAPI:** A table with columns for Step, Description, Key Points, and Documentation. Step 1 is Assessment.
- FALL PREVENTION:** A table with columns for Step, Description, Key Points, and Documentation. Step 1 is Assessment and Step 2 is Room Assessment.
- 48 HOUR HOLD AND EMERGENCY DETENTION ORDER (EDO):** A table with columns for Step, Description, Key Points, and Documentation. It includes an Initial Phase and 6 numbered steps.

The latest addition to this series is the **48-Hour Hold and Emergency Detention Order (EDO) Playbook**, which outlines the legal requirements, timelines, and nursing responsibilities for patients admitted under an involuntary hold.

The playbooks are accessible on all WOW terminals and within EPIC, ensuring they're readily available at the point of care. They are designed not only to help nurses navigate daily patient care but also to standardize best practices across the organization, supporting our readiness for regulatory review and, most importantly, safeguarding our patients.

Please take time to review these resources, refresh your knowledge, and integrate the key points into your daily practice. By doing so, we can collectively uphold the highest standards of patient safety and quality care, while ensuring we're fully prepared for the Joint Commission survey.

CNO MESSAGE:

Take our 2025 Community Health Needs Assessment

As nurses, we play a vital role not only in caring for patients but also in shaping the health of our entire community. To better understand the needs of the people we serve, Methodist Hospitals is conducting our 2025 Community Health Needs Assessment (CHNA). This survey will help us identify the greatest health challenges facing Northwest Indiana and guide how we, as a hospital and as caregivers, can respond.

Your perspective matters. By taking just a few minutes to complete the online survey, you'll help ensure our voice as nurses is represented. The information collected will directly influence programs, services, and outreach efforts that impact both our patients and our practice.

Please visit www.methodisthospitals.org/chna2025 to complete the survey today. Together, we can help build a healthier Northwest Indiana.

Thank you for your commitment to our patients and our community.



Marla Hoyer-Lareau,
RN, BSN, MHA,
Senior Vice President,
Chief Nursing and
Operations Officer

Shared Governance Digest

Shared Governance met in July to continue advancing initiatives that support Methodist Hospitals nurses and enhance patient care. Highlights from the meeting include:

- **Addressing Video Recording Concerns:** The council discussed how to manage situations when patients or visitors record staff while care is being delivered. Staff expressed concerns about de-escalating such situations, and the council will collaborate with the legal department for guidance.
- **Workplace Violence Awareness:** Workplace violence remains a top concern. The group is awaiting the results of the Patient Safety Survey, which includes workplace safety data, before developing recommendations for improvement.
- **Peer Review Completed:** The council conducted a referred peer review—an opportunity for nurses to evaluate a colleague's care against professional standards. This non-punitive process helps identify both strengths and areas for growth, supporting professional development.
- **Council Updates:** The Critical Care Council is developing a proposal for onboarding Resource staff, including a pre-hire knowledge exam, extended orientation, and limited unit movement during the acclimation period. The Med Surg Council also shared updates on its current focus.
- **Welcoming a New Member:** The Shared Governance council welcomed Dawn Rottstin, RN, from the Cath Lab, as its newest member.

Methodist Hospitals nurses are encouraged to get involved in Shared Governance and help shape the future of nursing practice at our hospital. To learn more or to join, please email **Mary Jo Valentine** at mvalentine@methodisthospitals.org.

IT UPDATE:

New Discharge Milestones Feature Now Live

A new **Discharge Milestones** tool is now available within the Discharge Navigator to help streamline and monitor patient discharge planning. This enhancement supports care teams by tracking key steps needed for a timely and safe transition to post-discharge care.

Discharge planning begins at admission and continues throughout the patient's stay. With this update, care team members can now

Complete?	Override?	Milestone	Override Time	Disciplines	Comment
<input type="checkbox"/>	<input type="checkbox"/>	DISCHARGE ORDER			
<input type="checkbox"/>	<input type="checkbox"/>	Discharge Med Rec Complete			
<input type="checkbox"/>	<input type="checkbox"/>	Belongings Returned		Nurse	
<input type="checkbox"/>	<input type="checkbox"/>	Discharge AVIS Printed			
<input type="checkbox"/>	<input type="checkbox"/>	SLP Discharge Readiness		SLP, SLP	
<input type="checkbox"/>	<input type="checkbox"/>	CM Discharge Readiness		CM	
<input type="checkbox"/>	<input type="checkbox"/>	OT Discharge Readiness		OT	
<input type="checkbox"/>	<input type="checkbox"/>	PT Discharge Readiness		PT	
<input type="checkbox"/>	<input type="checkbox"/>	Social Work Discharge Readiness		Social Work	
<input type="checkbox"/>	<input type="checkbox"/>	Signed Admission Order			

view and update real-time discharge progress during interdisciplinary rounds or directly from their workflow. The new Discharge Milestones and Delays section includes checkpoints such as:

- Discharge order status
- Completion of discharge medication reconciliation
- PT/OT/SLP clearance
- AVS printing
- Belongings return
- Signed admission order
- Case Management (CM) discharge readiness
- Social Services (SS) discharge readiness

This feature helps ensure no critical step is missed, improving communication and discharge efficiency. Please explore the new section within the Discharge Navigator and integrate it into your daily workflow.