

**Rehabilitation Hospital of Henderson**

June 28, 2019

Rick Combs, Director  
Legislative Counsel Bureau  
401 S. Carson Street  
Carson City, NV 89701-4747

Dear Mr. Combs:

Pursuant to NRS 439.877(4)(d) (AB280), which requires patient safety committees in medical facilities to report annually on the facilities review, revision, and usage of patient safety checklists and policies, the following is a summary of Encompass Rehabilitation Hospital of Henderson activities during 2018.

All checklists and policies were reviewed and approved. Several checklists were replaced with new checklists and several patient safety policies required minor revisions. The **Encompass Health Rehabilitation Hospital of Henderson (Facility #3190)** conducts Quality Council, Medical Executive Committee and Governing Body meetings on a quarterly basis. The Patient Safety Program including the patient safety and policy compliance requirements are being reviewed and approved by these committees. Attached you will find a report summarizing the specific checklists.

Please do not hesitate to contact me or my staff should you require additional information.

Sincerely,

A handwritten signature in black ink that reads 'Gloria Mandel'.

Gloria Mandel, RN  
Director, Quality and Risk Management  
**Encompass Health Rehabilitation Hospital of Henderson**  
10301 Jeffreys Street | Henderson, NV 89052  
Office: 702-939-9400 | C: 702-249-5488 | F: 205-262-8280 | DL: 702.939.9428

**REPORT TO THE DIRECTOR OF THE LEGISLATIVE COUNSEL BUREAU PURSUANT TO  
NRS 439.877(4)(d) – SUBMITTED BY:**

Encompass Health Rehabilitation Hospital of Henderson

10301 Jeffreys St., Henderson, NV 89052

Gloria Mandel, Dir. Of Quality and Risk Management; Anthony Puglisi, Dir. Of Plant Operations

January 1 to December 31, 2018

<b>Check Lists Developed Include:</b>	<b>Revisions*</b>	<b>Usage**</b>	<b>Review***</b>
Blood Administration Errors	12/30/2017	Nursing	2/19/2019
Blood Product Transfusion Reaction	12/30/2017	Nursing	2/19/2019
Behavior Management and Treatment	12/30/2017	Nursing	2/19/2019
Pain Re-Assessment	12/30/2017	Nursing	2/19/2019
Code Blue / Resuscitation Evaluations	12/30/2017	Nursing	2/19/2019
Patient Identification	12/30/2017	Nursing	2/19/2019
Critical Tests - Physician Notification Time	12/30/2017	Nursing	2/19/2019
Restraint Rate	12/30/2017	Nursing	2/19/2019
Restraint Use Effectiveness	12/30/2017	Nursing	2/19/2019
Total DC FIM Score Overall Mobility	12/30/2017	Rehab/Therapy	2/19/2019
Total FIM Score Change	12/30/2017	Rehab/Therapy	2/19/2019
Pain Goal Documented on Plan of Care	12/30/2017	Rehab/Therapy	2/19/2019
Bowel and Bladder	12/30/2017	Rehab/Therapy	2/19/2019
Driving Instructions	12/30/2017	Rehab/Therapy	2/19/2019
Respiratory -Administration	12/30/2017	Respiratory	2/19/2019
Respiratory – Assessments	12/30/2017	Respiratory	2/19/2019
Infection Control Goals	12/30/2017	All Staff	2/19/2019
Healthcare Associated Infection Rate	12/30/2017	All Staff	2/19/2019
# of HA infections that are sentinel events	12/30/2017	All Staff	2/19/2019
All Multi-drug resistant organisms (MDRO)	12/30/2017	All Staff	2/19/2019
Clostridium difficile (C-diff)	12/30/2017	All Staff	2/19/2019
Methicillin-resistant Staphylococcus aureus (MRSA)	12/30/2017	All Staff	2/19/2019
"Central line-associated bloodstream infections (CLBSI)"	12/30/2017	All Staff	2/19/2019
HA UTI - indwelling catheter related (CAUTI)	12/30/2017	All Staff	2/19/2019
Catheter Utilization	12/30/2017	All Staff	2/19/2019
Hand Hygiene - All	12/30/2017	All Staff	2/19/2019
Sharps Injuries	12/30/2017	All Staff	2/19/2019
Flu Vaccination Program (Overall Vaccination Rate)- During Flu Season	12/30/2017	All Staff	2/19/2019
Flu Vaccination Program (Employees) - During Flu Season	12/30/2017	All Staff	2/19/2019
Flu Vaccination Program (LIPs) -During Flu Season	12/30/2017	All Staff	2/19/2019

Flu Vaccination Program (students/ trainees/ volunteers) -During Flu Season	12/30/2017	All Staff	2/19/2019
Flu Vaccination Program (contract staff) - During Flu Season	12/30/2017	All Staff	2/19/2019
Flu Vaccination Documentation (employees) -During Flu Season	12/30/2017	All Staff	2/19/2019
Fall Rate	12/30/2017	All Staff	2/19/2019
Fall From Wheelchair Rate	12/30/2017	All Staff	2/19/2019
Falls with Injury	12/30/2017	All Staff	2/19/2019
Post-Fall Assessment	12/30/2017	All Staff	2/19/2019
Wound Event Rate	12/30/2017	All Staff	2/19/2019
Wounds-Other developing and worsening wounds	12/30/2017	All Staff	2/19/2019
Wound Assessment Documentation audit	12/30/2017	All Staff	2/19/2019
Wound Assessment Clinical Observations	12/30/2017	All Staff	2/19/2019
Discharge Planning Process - Post Discharge follow-up calls	12/30/2017	Social Services	2/19/2019
Acute Care Discharges	12/30/2017	Social Services	2/19/2019
Discharge to Community	12/30/2017	Social Services	2/19/2019
SNF Discharges	12/30/2017	Social Services	2/19/2019
Safety	12/30/2017	Social Services	2/19/2019
Security management	12/30/2017	Social Services	2/19/2019
Security	12/30/2017	Social Services	2/19/2019
Fire Safety	12/30/2017	Social Services	2/19/2019
Fire Drills	12/30/2017	Social Services	2/19/2019
Emergency Management	12/30/2017	Social Services	2/19/2019
Emergency Preparedness	12/30/2017	Social Services	2/19/2019
Utilities management	12/30/2017	Social Services	2/19/2019
Hazardous Materials and Waste Management	12/30/2017	Social Services	2/19/2019
Pharmaceutical Waste	12/30/2017	Social Services	2/19/2019
Medical Equipment Management	12/30/2017	Social Services	2/19/2019
Life Safety	12/30/2017	Social Services	2/19/2019
Lab Services - STAT Tests	12/30/2017	Outside Vendors	2/19/2019
O&P - Timeliness	12/30/2017	Outside Vendors	2/19/2019
PICC Line Insertion - Complications	12/30/2017	Outside Vendors	2/19/2019
PICC Line Insertion - Time Outs	12/30/2017	Outside Vendors	2/19/2019
Radiology Services - Timeliness	12/30/2017	Outside Vendors	2/19/2019
Radiology Services - Credentialed	12/30/2017	Outside Vendors	2/19/2019
Dialysis Services - Documentation	12/30/2017	Outside Vendors	2/19/2019
Dietician Services - Assessment	12/30/2017	Outside Vendors	2/19/2019
Dietician Services – Re-Assessment	12/30/2017	Outside Vendors	2/19/2019
Contract Services Management – Training	12/30/2017	Outside Vendors	2/19/2019

CLABSI Prevention Checklist	02/05/2018	Infection Prevention and Control	02/05/2019
Universal Protocol Checklist	02/05/2018	Interdisciplinary	09/19/2018
Automated Dispensing Machine	04/19/2018	Pharmacy	04/19/2018
<b>Patient Safety Policies developed include:</b>	<b>Revisions</b>	<b>Usage</b>	<b>Review</b>
Construction Infection Control	4/19/2018	Facility Management	3/20/2019
Cimex lectularius (Bed Bug) Infestation	3/20/2019	Infection Prevention and Control	3/20/2019
Scabies	3/20/2019	Infection Prevention and Control	3/20/2019
Communicable Disease Outbreak / Investigation	3/20/2019	Infection Prevention and Control	3/20/2019
Definition of Healthcare Associated Infections	3/20/2019	Infection Prevention and Control	3/20/2019
Disinfection and Sterilization	3/20/2019	Infection Prevention and Control	3/20/2019
Flu Vaccination Program	3/20/2019	Infection Prevention and Control	3/20/2019
Hand Hygiene	3/20/2019	Infection Prevention and Control	3/20/2019
Infection Control Authority Statement	3/20/2019	Infection Prevention and Control	3/20/2019
Employee Health Surveillance	3/20/2019	Infection Prevention and Control	3/20/2019
Standard and Transmission-Based Precautions	3/20/2019	Infection Prevention and Control	3/20/2019
Management of MDROs	3/20/2019	Infection Prevention and Control	3/20/2019
Management of Patients with C Diff	3/20/2019	Infection Prevention and Control	3/20/2019
Neutropenic/Protective Precautions	3/20/2019	Infection Prevention and Control	3/20/2019
Pediculosis Corporis (Lice) Infestation	3/20/2019	Infection Prevention and Control	3/20/2019
Reportable Diseases	3/20/2019	Infection Prevention and Control	3/20/2019
Terminal Room Cleaning	3/20/2019	Infection Prevention and Control	3/20/2019
CAUTI Prevention	3/20/2019	Infection Prevention and Control	3/20/2019
CLABSI Prevention	3/20/2019	Infection Prevention and Control	3/20/2019
Tuberculosis Skin Test Administration	3/20/2019	Infection Prevention and Control	3/20/2019
Tuberculosis Exposure Program	3/20/2019	Infection Prevention and Control	3/20/2019

Respiratory Protection Program	3/20/2019	Infection Prevention and Control	3/20/2019
Infection Control Plan	3/20/2019	Plans	3/20/2019
Emergency Carts	9/19/2018	Nursing	9/19/2018
Emergency Medications	9/19/2018	Pharmacy	9/19/2018
Patient Identification	2/5/2018	Interdisciplinary	9/19/2018
Patient Tray Identification/Delivery System	9/19/2018	Nutrition	9/19/2018
Identification and Care of Age Specific Patients	2/5/2018	Nutrition	9/19/2018
Identification of Patients Not Receiving Oral Intake	9/19/2018	Nutrition	9/19/2018
Fall Prevention Program	2/5/2018	Interdisciplinary	9/19/2018
Admission and Discharge Class Assignments	12/26/2018	Administration	12/26/2018
Discharge Overview	2/5/2018	Interdisciplinary	9/19/2018
Discharge Planning	3/20/2019	Plans	3/20/2019

Summary of Review	Total # developed	Total # revised	Total # Reviewed
Patient Safety Checklists	67	0	67
Patient Safety Policies	33	5	33

\*Checklists and Patient Safety Policies were reviewed for the stated time period. Need for revision is noted by the date the revision was made.

\*\*Usage outlines the units/departments the checklists are used in.

\*\*\*As part of the annual review any required revisions will be identified. If revisions are required this is noted in the revision box. Any additional patient safety checklists or policies identified will be noted in this (review) column. If the annual review reveals no changes are required this box will be marked with an "X". An "X" means that the checklists and policies were reviewed but no changes were required.

❖ Reports are due on or before July 1 of each year, address report to:

Director LCB

Rick Combs (2016)

[director@lcb.state.nv.us](mailto:director@lcb.state.nv.us)

Copy to: [Megan.Comlossy@lcb.state.nv.us](mailto:Megan.Comlossy@lcb.state.nv.us)

Carson City, NV 89701

June 28, 2019

Rick Combs  
Director of the Legislative Counsel Bureau  
401 S. Carson Street  
Carson City, NV 89701-4747

Re: Annual Patient Safety Report per NRS 439.877  
Encompass Health Rehabilitation Hospital of Henderson

Dear Director Combs:

Pursuant to NRS 439.877 Encompass Health Rehabilitation Hospital of Henderson, is required to annually submit to your office a summary of its Patient Safety Committee Activities including information relating to the development, revision and usage of patient safety checklists and patient safety policies and a summary of the annual review conducted for the prior 12 month period. The following information is being provided in conformity with this requirement.

**Establishment of Patient Safety Checklists:** Pursuant to the provisions of NRS 439.877 the Patient Safety Committee adopted Patient Safety Checklists. These checklists are reviewed and modified as necessary based upon outcome and performance data on a yearly basis. Currently, Encompass Health Rehabilitation Hospital of Henderson utilizes and monitors compliance with checklists covering numerous patient areas. These include Hand Hygiene, Patient Identification, Code Blue Cart Inspection, Central Line Insertion, (etc.) Checklist.

**Adoption of Policies, Procedures and Protocols:** In conjunction with the checklists, Encompass Health Rehabilitation Hospital of Henderson has developed and implemented policies, procedures and protocols to ensure compliance with the letter and intent of the checklists. A list of the current policies covering the above-referenced checklists include, but are not limited to the following:

**Patient Safety**

- Patient Safety Checklists.
- Patient Safety Plan

**Hand Hygiene and Infection Control**

No.	Policy Name	Policy #
1	Construction Infection Control	804
2	Cimex lectularius (Bed Bug) Infestation	110
3	Scabies	111
4	Communicable Disease Outbreak / Investigation	120

5	Definition of Healthcare Associated Infections	130
6	Disinfection and Sterilization	140
7	Flu Vaccination Program	150
8	Hand Hygiene	170
9	Infection Control Authority Statement	180
10	Employee Health Surveillance	190
11	Standard and Transmission-Based Precautions	200
12	Management of MDROs	210
13	Management of Patients with C Diff	220
14	Neutropenic/Protective Precautions	230
15	Pediculosis Corporis (Lice) Infestation	240
16	Reportable Diseases	250
17	Terminal Room Cleaning	270
18	CAUTI Prevention	300
19	CLABSI Prevention	605
20	Tuberculosis Skin Test Administration	667
21	Tuberculosis Exposure Program	673
22	Respiratory Protection Program	674
23	Infection Control Plan	240

### **Emergency Carts**

1	Emergency Carts	370
2	Emergency Medications	200

### **Patient identification**

1	Patient Identification	200
2	Patient Tray Identification/Delivery System	606
3	Identification and Care of Age Specific Patients	609
4	Identification of Patients Not Receiving Oral Intake	611

### **Fall Prevention**

	Fall Prevention Program	677
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### **Patient Discharge**

1	Admission and Discharge Class Assignments	601
2	Changes to Discharge Destination	205
3	Discharge Overview	810
4	Discharge Planning	300

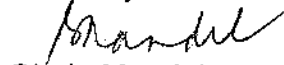
**Patient Safety Compliance:** During the calendar year 2018 the hospital Patient Safety Officer in conjunction with the hospital Quality Management and Risk Management Departments and Nursing leadership conducted reviews of staff and physician compliance with established patient safety checklists, including the ones referenced above. These reviews included direct surveillance, clinical process reviews and root cause analysis.

**Patient Safety Committee have reviewed the following policies:**

<b>No.</b>	<b>Policy Name</b>	<b>Policy #</b>
1	Construction Infection Control	804
2	Cimex lectularius (Bed Bug) Infestation	110
3	Scabies	111
4	Communicable Disease Outbreak / Investigation	120
5	Definition of Healthcare Associated Infections	130
6	Disinfection and Sterilization	140
7	Flu Vaccination Program	150
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21	Tuberculosis Exposure Program	673
22	Respiratory Protection Program	674
23	Infection Control Plan	240
24	Patient Identification	200
25	Patient Tray Identification/Delivery System	606
26	Identification and Care of Age Specific Patients Identification of Patients Not Receiving Oral	609
27	Intake	611
28	Fall Prevention Program	677

If you have any questions regarding the hospital's patient safety checklists or its quality programs, please feel free to contact me at your earliest opportunity.

Sincerely,



Gloria Mandel

Director of Quality and Risk Management/Patient Safety Officer



**PATIENT SAFETY COMMITTEE  
ENCOMPASS HEALTH REHABILITATION HOSPITAL OF HENDERSON  
HOSPITAL # (3190)**

**TO:** Director of the Legislative Counsel Bureau for transmittal to the Legislative Committee on Health Care.

**RE:** 439.877,4.(d)

**CHECKLIST REPORT: June 28, 2019**

1. All checklists in place reviewed and approved for use by the Patient Safety Committee in December 2017.
2. All checklists in use reviewed monthly and new checklists are approved for initial and continued use by the Patient Safety Committee at each monthly meeting.
3. No amendments to existing document formats were recommended by the Patient Safety Committee.
4. Current check lists:
  - a. **Nursing:**
    - i. Blood Administration Errors
    - ii. Blood Product Transfusion Reaction
    - iii. Behavior Management and Treatment
    - iv. Pain Re-Assessment
    - v. Code Blue / Resuscitation Evaluations
    - vi. Patient Identification
    - vii. Critical Tests - Physician Notification Time
    - viii. Restraint Rate
    - ix. Restraint Use Effectiveness
  - b. **Rehabilitation:**
    - i. Total DC FIM Score Overall Mobility
    - ii. Total FIM Score Change
    - iii. Pain Goal Documented on Plan of Care
    - iv. Bowel and Bladder
    - v. Driving Instructions
  - c. **Respiratory:**
    - i. Respiratory -Administration
    - ii. Respiratory – Assessments
  - d. **All staff:**
    - i. Infection Control Goals
    - ii. Healthcare Associated Infection Rate
    - iii. # of HA infections that are sentinel events
    - iv. All Multi-drug resistant organisms (MDRO)
    - v. Clostridium difficile (C-diff)
    - vi. Methicillin-resistant Staphylococcus aureus (MRSA)
    - vii. "Central line-associated bloodstream infections (CLBSI)"

- viii. HA UTI - indwelling catheter related (CAUTI)
- ix. Catheter Utilization
- x. Hand Hygiene - All
- xi. Sharps Injuries
- xii. Flu Vaccination Program (Overall Vaccination Rate)- During Flu Season
- xiii. Flu Vaccination Program (Employees) -During Flu Season
- xiv. Flu Vaccination Program (LIPs) -During Flu Season
- xv. Flu Vaccination Program (students/ trainees/ volunteers) -During Flu Season
- xvi. Flu Vaccination Program (contract staff) -During Flu Season
- xvii. Flu Vaccination Documentation (employees) -During Flu Season
- xviii. Fall Rate
- xix. Fall From Wheelchair Rate
- xx. Falls with Injury
- xxi. Post-Fall Assessment
- xxii. Wound Event Rate
- xxiii. Wounds-Other developing and worsening wounds
- xxiv. Wound Assessment Documentation audit
- xxv. Wound Assessment Clinical Observations

**e. Social Services:**

- i. Discharge Planning Process - Post Discharge follow-up calls
- ii. Acute Care Discharges
- iii. Discharge to Community
- iv. SNF Discharges

**f. Safety/ Environment of Care/Environmental Services:**

- i. Safety
- ii. Security management
- iii. Security
- iv. Fire Safety
- v. Fire Drills
- vi. Emergency Management
- vii. Emergency Preparedness
- viii. Utilities management
- ix. Hazardous Materials and Waste Management
- x. Pharmaceutical Waste
- xi. Medical Equipment Management
- xii. Life Safety

**g. Outside Vendors:**

- i. Lab Services - STAT Tests
- ii. O&P - Timeliness
- iii. PICC Line Insertion - Complications
- iv. PICC Line Insertion - Time Outs

- v. Radiology Services - Timeliness
- vi. Radiology Services - Credentialed
- vii. Dialysis Services - Documentation
- viii. Dietician Services - Assessment
- ix. Dietician Services – Re-Assessment
- x. Contract Services Management – Training

- 5. Patient Safety Committee approved all existing checklists for 2018 and reviews any new presentations at the monthly Patient Safety Committee meetings in the new business agenda section.
- 6. In 2018, 67 checklists were completed by staff and vendors who supply services to patients at the Encompass Health Rehabilitation Hospital of Henderson. For 2018 calendar year, we have completed 67 checklists for use at the HealthSouth Rehabilitation Hospital of Henderson.