

Patient Safety Awareness Week



2023

A young girl with dark hair pulled back, wearing a blue and pink patterned jacket, is shown from the chest up. She has a sad, pouting expression on her face. The background is a blurred outdoor setting with a large, reddish-brown structure in the distance.

SAFE CARE
SAFE PATIENTS
SAVES LIVES

Western Oregon Service Unit

Marc Baker, Safety Officer; CDR Jeffrey McCoy, Patient and Medication Safety; LCDR Rachel Taylor, Risk Management Officer; and Leann Yamanaka, Infection Control Officer.



Staff/ Team Role: Safety Team

In their commitment to patient safety, the Western Oregon Service Unit recognizes their Safety Team for exemplary work promoting patient safety. The team worked collaboratively to complete the national action plan to advance patient safety assessment tool in support of the agency's patient safety program. They meet monthly to discuss areas of risk and provide proactive responses to the facility. This core team strengthens patient safety across the clinic and are committed to providing safe, quality care to our patient population.

IHS National Pharmacy and Therapeutics Committee (NPTC)

Staff/Team Role: Medication and Vaccine Safety Monitoring

NPTC demonstrates excellence in ensuring the safety of medications prescribed/dispensed and vaccines administered in the IHS service population.

The IHS National Pharmacy and Therapeutics Committee (NPTC) is a standing committee of the Indian Health Service chartered to maintain the IHS National Core Formulary and provide national-level formulary management expertise to federal and participating tribal and Urban Indian Organization sites. The NPTC Pharmacovigilance Team promotes appropriate use and safety surveillance of medications and vaccines across the IHS system of care. The NPTC has served as the IHS COVID Vaccine Task Force Safety & Monitoring Team, ensuring vaccine safety, providing real-time clinical guidance, and promoting vaccine acceptance in tribal communities.



LCDR Heng “Helen” Chang, PharmD.

Staff/Team Role: Pharmacy Outreach Team Lead

Area/Facility/Department: PHX/Whiteriver Service Unit/Pharmacy

Helen Chang is nominated for patient safety excellence because of her innovative management of a pilot project to improve behavioral health outcomes in our community. LCDR Chang recognized that only 1 out of 10 Whiteriver Service Unit patients who were prescribed long-acting injectable antipsychotics (LAIs) were actually receiving and adherent to their medication. When patients with schizophrenia do not receive treatment, they suffer higher rates of psychosis, poorer quality of life, and higher risks for comorbidities, hospital admissions, substance use disorders, and death. Untreated and undertreated schizophrenia also places a significant burden on families and caretakers. This patient population also often presents significant challenges with regular attendance at medical appointments. LCDR Chang led a pharmacy-based project that began proactively locating these patients in the community where they live to administer their LAIs in the field. As a result of her efforts, the percentage of days covered by LAIs increased from 26% to 76%, and average number of ER visits per patient was reduced by 80%. This undoubtedly also improved patient quality of life and reduced risks of complications of schizophrenia. One patient provided the following statement about the personal effect of this program:

“Since I’ve been on this medication, I’ve been able to focus on staying at home and taking care of my kids instead of wandering around and getting in trouble.”

LCDR Chang is deserving of recognition for her innovative and “can-do” approach to caring for this vulnerable patient population. Her work is scheduled to be presented at the American Association of Psychiatric Pharmacists conference later this year, and is notable for its strong impact and ability to be replicated elsewhere. She has tirelessly devoted many hours of work and hundreds of miles to this project and has made an outstanding impact on the local community by improving care and reducing risks in this population.



Patient Safety and Adverse Event Reporting Policy Workgroups

Staff/Team Name: Patient Safety and Adverse Event Reporting Policy Workgroup

Staff/Team Role: Agency Level Policy Workgroup

Area/Facility/Department: National Workgroup; representation from all areas and facility types; supported by Office of Quality

national level workgroup drafted the agency level patient safety and adverse event reporting policies. These policies will provide the foundational elements of the agencies' patient safety program, provide standardized processes and tools, and standardized mechanisms for oversight.



*28 total members; several members not pictured

Workgroup Members (pictured members left to right and members not pictured):

CAPT Michael Lee (HQ, OQ), LCDR Michelle Livingston (HQ, OQ), CDR Fiona Chao (NAV), Anna Knight (CAL), Ricardo Murga (BIL), Robin Watkins (HQ, ORAP), Roger Chaufourrier, CSI (facilitator), LCDR Rachel Taylor (POR), Jimi Risse (HQ, OQ), Dr. Philippe Champagne (HQ, OQ), Nicole Flom (HQ, OQ), Dr. Paula Mora (TUC), Dr. Kevin Gaines, CAPT Charles Woodlee (NAS), CDR Kelly Owens (PHX), Dr. Ashley Tuomi (POR), Kailee Fretland (BEM), Dr. Gary Lang (OKC), Dr. Melissa Hubbard (BIL), CDR Julie Whitmire (OKC), Cecelia Belone (NAV), Dr. Matthew Clark (ALK), Jeffery Connors (ABQ), Dr. Thomas Faber (ABQ), Cheyenne Tallbull (BIL), CDR Columbus Nettles (BEM) Joanna Ferraro (BEM), Christine Gilliam (GRP), Dr. Natalie Holt (GRP), Cecelia Belone (ABQ), Kimberlyn Tom (NAV), Dixie Gaikowski (TUC), CDR Juliana Upshaw (PHX), RADM Gregory Woitte (OKC), Stephen Pionkowski (HQ, OEHE), CAPT Mike Reed (HQ, OEHE), Dr. Lisa Majewski (HQ, OQ), CADR Kari Wato (NAV), CAPT Carol Lincoln (IHS Chief Nurse), Dr. Loretta Christensen (IHS CMO)

Cass Lake Environmental Services (EVS)

Cass Lake IHS set out to establish a baseline for Environmental Services (EVS). Four staff acquired a certification as a trainer in Certified Health Care Environmental Service Technicians (CHEST) training and rolled it out to, then housekeeping staff. All staff have completed the training and will take their certification exam this week. All EVS staff were engaged during the 24hr training program. They were all eager to enhance their knowledge and it was a pleasure to train them. Cass Lake EVS team are now technicians who are testing for certification. CHEST certification is the gold standard in the EVS field and demonstrates the application of knowledge required to effectively clean and disinfect all areas of healthcare facilities. This team's dedication to continued learning and excellence actively strengthens patient safety at Cass Lake.



Cass Lake Environmental Services (EVS)

Team: Pictured left to right, Adrian Lussier, Brandon Lussier, Gene Londo, Jonas Northbird, Darion Cobenais and Adam Sullivan. Not pictured, Devry Bismarck and Rawlen Guinn

Mari Raphael, RN

Staff/Team Role: Registered Nurse

Area/Facility/Department: Bemidji Area/ Grand Traverse Band Family Health Clinic

Mari Raphael has worked at the Grand Traverse Band Family Health Clinic for more than 20 years. She is an excellent, caring nurse. She is a member of Grand Traverse Band (GTB), participates in traditional activities and community events. Mari advocates for each patient as if they were in her immediate family, doing home visits when needed, calling Elders to ensure they have needs met, and being a consistent and trusted resource for the clinic and community. She is detail oriented and patient centered. She was instrumental in putting all our adult patients' immunization records in the state immunization registry (The Michigan Care Improvement Registry or MCIR), about 5 years ago which has been invaluable in improving our community's vaccination rates. It made and still makes it easier for us to protect our community by checking the registry (MCIR) for every patient, every encounter, to offer every recommended vaccine. Mari has also been part of the GTB disaster preparedness planning and was integral part of pandemic response. She has conducted thousands of COVID19 tests and given thousands of COVID19 vaccines throughout the pandemic. The GTB community is blessed to have her and we would like to honor her.



Nathaniel Pine



Staff/Team Role: Motor Vehicle Operator

Area/Facility/Department: Navajo Area Office/
Northern Navajo Medical Center/Public Health
Nursing

Nate Pine, the Public Health Nursing Motor Vehicle Operator (MVO) from Northern Navajo Medical Center-Shiprock Service Unit has played an integral role in promoting robust patient safety in public health nursing events, community clinics, vaccine clinics, and home visits. Nate works diligently to provide up-to-date fleet safety education and training to the department in addition to providing health education, well-being and prevention in the community. He is a team player and has helped patients and their families stay safe and healthy, delivered patient education materials, supplies, food boxes, and testing kits for families in isolation. Shiprock Service unit would like to recognize his role in patient safety excellence in the public health nursing department, his attention to promoting safety in every level of practice—from preparation to delivery of patient care services.

LT Tyler Maanum, Pharmacist

Area/Facility/Department: PHX/Whiteriver Service Unit (WRSU)/Pharmacy and Office of Environmental Health & Engineering



LT Maanum served as the main patient point of contact for a safe, at home, medication disposal project for WRSU. This initiative included providing drug deactivation bags to patients as part of a statewide response to the opioid epidemic. When unused medication are placed in a drug deactivation bag the contents are deactivated and rendered safe for deposit in the domestic trash.

LT Maanum has focused his distribution efforts on patients receiving opioid medications, to provide a safe and convenient way for patients to dispose of these potentially dangerous unused medications at home. He personally calls every patient who previously received a disposal bag and inquires if the bag was utilized. Patients have expressed gratitude for this safe and easy disposal method.

This program is increasing safety by providing a disposal method for potentially dangerous unused medications in the community.

[Injury Prevention](#) | [Environmental Health \(ihs.gov\)](#)

I-STAR Patient Safety Dashboard Workgroup



*18 total members; several members not pictured here

Workgroup Members (members pictured left to right and members not pictured): Roger Chaufournier, CSI (facilitator), LCDR Michelle Livingston (HQ, OQ), CAPT Michael Lee (HQ, OQ), LCDR Jason Truax (BEM), LCDR Rachel Taylor (POR), CDR Kelly Owens (PHX), Yolanda Adams (ABQ), Dr. Olivia Beckman (BEM), Cecelia Belone (ABQ), Patrick Cunningham (ABQ), Ben Feliciano (HQ, OQ), Olinka Foster (ABQ), Dr. Kevin Gaines (NAV), Patrick Galdun (PHX), Dr. Melissa Hubbard (BIL), Dr. Juanita Johnson (NAS), Dayle Knutson (GRP), Jonathan Lewis (ABQ), Dr. Lisa Majewski (HQ, OQ), CDR Columbus Nettles (BEM), Joyce Oberly (OKC), Cheyenne Tallbull (BIL), Kimberlyn Tom (NAV), CDR Julie Whitmire (OKC), Stephanie Porter (OKC)

This national level workgroup consisted of a multidisciplinary team with membership from National Combined Councils (NCC) and included representatives from ambulatory care facilities, hospitals and Area Offices. This team used a sprint methodology (rapid cycle design) to develop a standardized patient safety dashboard consisting of 22 patient safety reports in the I-STAR system. The Patient Safety Dashboard is available to all I-STAR log-in users and can be used to track and trend patient safety data, provide patient safety data and analysis to leadership and the governing body, and to drive quality improvement activity.

Mescalero Pharmacists and Providers

**LCDR Thu Tran, Dr. Pierrette Toussaint,
Dr. Michael Shing, Dr. Salvador Mercado, Dr. Wally Jean, Dr. Kayt Whitebird-Orange, CDR John Sickman, LT Michelle Lin, Opeyemi Komolafe**



Staff/Team Role: Opioid Stewardship Program

This team has made outstanding contributions to Patient Safety through the recognition of necessary patient education contributing to safe and effective pain medication prescribing.

Mescalero Indian Health responded to community calls for safe and effective pain relief. To address this, an opioid stewardship program was developed providing collaboration among different health disciplines focusing on patient education & literacy. The opioid stewardship program is our commitment to patient care with

safe prescribing and education so patients receive the right pain medication, for the right reasons, for the right length of time & at the correct dose.

Team Accomplishments/Impact:

- Addressed the surgeon general priority of opioid safety and prevention. Provided naloxone & training to twelve emergency medical services personnel within two communities.
- Formed an opioid stewardship, interdisciplinary committee whose members meet twice a month addressing pain treatment & safety with education provided to increase patient health literacy and safety.
- Improved access to prevention & treatment of opiate overdose, targeting the availability, distribution & use of opiate overdose reversing medication, & advancing the practice of pain management & drug addiction. 200+ nasal naloxone kits dispensed.
- Reviewed 30+ patients on long term opiate medication and determined if higher levels of care were necessary. ding pain specialty involvement.

Patient Safety is Our Priority



*Our mission...to raise the physical, mental, social and
spiritual health of American Indians and Alaska Natives
to the highest level*