

# Clinical Leadership Update



## August Activities



Published: September 1, 2022

The Clinical Leadership Update (CLU) provides Trinity Health clinicians information on current clinical activities and the opportunity to offer feedback on best practices and proposed system standards. All physicians and clinicians across our shared Ministry are encouraged to provide feedback on the proposed clinical practices in your respective specialty.

This edition of the CLU provides an overview of the general activities of our clinical framework teams over the previous month.





For more information on the Clinical Framework teams, click the link below:

<https://mytrinityhealth.sharepoint.com/sites/SO-ClinicalLeadershipCouncil>

Note: Link to site accessible only when connected to Trinity Health Network

### In this issue:

- [FAQ for the CLU](#)
- [TogetherCare Decisions](#) (Includes all Clinical Framework decisions made in the last 45 days. For more information on these decisions, please contact your local Informatics representative.)

Clinical Teams	 Information	 Feedback: Action required	 Final Decision based on feedback	 Implementation Bundle: Action Required	Intended Audience
<a href="#">Behavioral Health CEC</a>			1. Management of Agitation in a Hospital Setting		1. Psychiatrists, ED providers, primary care physicians, behavioral health clinicians, nurses and social workers
<a href="#">Cardiovascular CEC</a>			1. TogetherCare Orders and Workflow Optimization		1. Vascular Surgery Cardiology, APPs working with vascular surgery or cardiology, Radiology, Surgical and Cardiac ICU, Cath Lab,

					Pharmacists, Cardiac Device Nursing Educators
<a href="#">Clinical Operations CEC</a>		1. REMS – Medication Guides 2. Medical Malnutrition Diagnosis		3. Alcohol Withdrawal and Opioid Withdrawal TogetherCare Orderset Standardizations	1. Providers and nursing in Clinics, Infusion Centers, ASC and Emergency Centers, Pharmacist 2. Dietitian, Nutrition Services, Physicians, Advance Practice Providers 3. Emergency Department, Inpatient, and Behavioral Health Providers, Nurses, and Pharmacists
<a href="#">Oncology CEC</a>		1. Members Needed			1. Oncology Administrators / Cancer Navigators
<a href="#">Pharmacy CLG</a>		1. Members Needed			1. Medication Safety Physician Leaders and Quality Leaders
<a href="#">Pulmonary &amp; Critical Care CEC</a>		1. Members Needed	2. Family Meeting within 72 hours of ICU Admission		1. CNOs 2. Critical Care Providers, Nurses, Support Staff
<a href="#">Surgical Services CEC</a>		1. Members Needed 2. Alcohol Based Nasal Prep Solution and Documentation			1. Anesthesiologists 2. Surgical Leadership, Operating Room Directors, Supply Chain

---

 **KEY:** Feedback
  Final Decision based upon feedback

 Implementation Bundle
  Information

**Feedback:** Team has placed a clinical or operational standard/best practice out for clinician response.

**Final Decision Based Upon Feedback:** Team has identified a clinical or operational standard/best practice and is presenting initial information for implementation.

**Implementation Bundle:** Team has identified a clinical or operational standard/best practice and is delivering the

---

detailed implementation bundle.

**Information:** Team information – no action required.

---

## Behavioral Health Clinical Excellence Council

---

**Intended Audience: Psychiatrists, ED providers, Primary Care Physicians, Behavioral Health Clinicians, Nurses And Social Workers**



### **Final Decision based upon feedback: Management of Agitation in a Hospital Setting**

The Behavioral Health Clinical Excellence Council has reviewed ministry feedback regarding the Management of Agitation in a Hospital Setting guideline that was presented for feedback in June. After careful consideration of the feedback and with minor changes to the guideline, the Behavioral Health CEC has endorsed the guideline. Please see the final guideline attached here.

[Management of Agitation in Hospital Settings SBAR and Reference](#)

**Email:** [stoutcl@trinity-health.org](mailto:stoutcl@trinity-health.org)

**Leaders:** Carole Stout, R.N., director, clinical transformation and Carey A. Krause, D.O., F.A.P.A., medical director, behavioral health.

**Link to team materials accessible only when connected to Trinity Health Network:** [Behavioral Health CEC Homepage](#)

---

## Cardiovascular Clinical Excellence Council

---

**Intended Audience: Vascular Surgery Cardiology, Advance Practice Providers working with vascular surgery or cardiology, Radiology, Surgical and Cardiac ICU, Cath Lab, Pharmacists, Cardiac Device Nursing Educators**



### **Final Decision based upon feedback: Standardized Workflow and Documentation for Anticoagulation Therapy for Cardiac Procedures: EKOS (TogetherCare Orders and Workflow Optimization)**

The CV CEC reviewed Expert Panel recommendations, including CLU feedback during our August meeting. The TogetherCare team demonstrated proposed changes. All

---

recommendations were unanimously approved by full council. Changes were moved to production with August TogetherCare updates.

[Standardized Workflow and Documentation for Anticoagulation Therapy for Cardiac Procedures: EKOS](#)

**Email:** [Jim.Vandewarker@Trinity-Health.org](mailto:Jim.Vandewarker@Trinity-Health.org)

**Leaders:** Jim Vandewarker, R.N., director clinical transformation and Russell Silverman, M.D., medical director, cardiovascular services.

**Link to team materials accessible only when connected to Trinity Health Network:** [Cardiovascular CEC Homepage](#)

---

## [Clinical Operations Clinical Excellence Council](#)

---

**Intended Audience: Providers and nursing in Clinics, Infusion Centers, ASC and Emergency Centers, Pharmacist,**



### **Feedback: REMS – Medication Guides**

The Clinical Operations CEC is requesting feedback on REMS Medication Guides. SBAR was reviewed at our August 2nd meeting. Option 2 was unanimously supported to ensure compliance with regulatory requirements. No need to provide an inpatient REMS report unless requested by patient/family. Clinic, infusion centers, ASC and Emergency Centers are areas where REMS medication guide (for a list of medications designated by the FDA) is required prior to the first dose of required medications. Director of Accreditation and Pharmacy CLG supports option #2.

[REMS– Medication Guides SBAR](#)

[Click here for survey](#)

---

**Intended Audience: Dietitian, Nutrition Services, Physicians, Advance Practice Providers**



### **Feedback: Medical Malnutrition Diagnosis**

The Clinical Operations CEC is requesting feedback on Medical Malnutrition Diagnosis Best Practice Alert (BPA) for moderate and severe malnutrition. The proposed new BPA would fire for physicians alerting them that the dietitian has made a nutrition diagnosis for malnutrition based on assessment, and care plan documentation. The provider can use a designated smartphrase in their documentation if they agree which will import the diagnosis, malnutrition criteria and nutrition intervention. Option 1 was unanimously supported.

---

[Medical Malnutrition Medical Diagnosis SBAR and References](#)

[Click here for survey](#)

---

**Intended Audience: Intended Audience: Emergency Department, Inpatient, and Behavioral Health Providers, Nurses, and Pharmacists**



### **Implementation Bundle: Alcohol Withdrawal and Opioid Withdrawal TogetherCare OrderSet Standardizations**

**REMINDER: Implementation in TogetherCare will occur on September 14th, 2022. Please refer to implementation bundle sent July 1st – there is a corrected slide on Alcohol Withdrawal order set educational PowerPoint below.**

The Clinical Operations Clinical Excellence Council has supported the evidence-based updates to the alcohol withdrawal and opioid withdrawal TogetherCare ordersets as a system standard. The attached Implementation Guide is intended to assist Ministries to implement the orderset updates in Emergency Care, Inpatient, and Behavioral health units across the Trinity Health system.

Ministry leaders are encouraged to communicate this information to the appropriate clinicians.

[Alcohol Withdrawal and Opioid Withdrawal Implementation Bundle](#) (see updated att) *Please note, you have to click the image of the document and download to see the complete file due to a new document posting system for Excel files.*

[Alcohol Withdrawal Order Sets](#) (CORRECTION: slide 17) (see updated att)

**Email:** [Jim.Vandewarker@Trinity-Health.org](mailto:Jim.Vandewarker@Trinity-Health.org)

**Leader:** Jim Vandewarker, R.N., director clinical transformation and Tammy Lundstrom, M.D., J.D., senior vice president and chief medical officer.

**Link to team materials accessible only when connected to Trinity Health Network:** [Clinical Operations CEC Homepage](#)

---

[Oncology Clinical Excellence Council](#)

---

**Intended Audience: Oncology Administrators / Cancer Navigators**



**Feedback: Oncology CEC Administrator/Cancer Navigator Member Needed**

The Oncology CEC is seeking Oncology Administrator / Cancer Navigator membership. Anyone interested in serving on the council should please contact Carole Stout, Director Clinical Transformation at the mailbox below.

**Email:** [stoutcl@trinity-health.org](mailto:stoutcl@trinity-health.org)

**Leader:** Carole Stout, R.N., director, clinical transformation and Adam Boruchov, M.D.

*Link to team materials accessible only when connected to Trinity Health Network:* [Oncology CEC Homepage](#)

---

## Pharmacy Clinical Leadership Group

**Intended Audience: Intended audience: Medication Safety Physician Leaders and Quality Leaders**



**Feedback: Hospitalist and Quality Representative Needed**

The Pharmacy Clinical Leadership Group (CLG) is requesting nominations for a hospitalist physician with an interest in medication safety and a local quality partner to fill a member vacancy on the Medication Safety Expert Panel (MSEP). The MSEP is a new multidisciplinary panel that collaborates with the Trinity Health TogetherSafe program and provides system-level guidance on medication safety. Interested candidates should submit a resume or CV below.

**Email:** [PharmacyCLG Contact Email](#)

**Leaders:** Damon Redding, Pharm.D, MPH, MBA, V.P. & Chief Pharmacy Officer - Trinity Health Enterprise Pharmacy (THE-P)

*Link to team materials accessible only when connected to Trinity Health Network:* [PharmacyCLG Homepage](#)

---

## Pulmonary & Critical Care Clinical Excellence Council

**Intended Audience: CNOs**



**Feedback: CNO CEC Member Needed**

The Pulmonary & Critical Care CEC is in need of a CNO representative. If interested, please contact Kelly Hojnacki at the email below.

---

**Intended Audience: Critical Care Providers, Nurses, Support Staff**

---



## **Final Decision based upon feedback: Family Meeting within 72 hours of ICU Admission**

Keeping patients and families informed and involved in their care is a goal for the critical care team. The Pulmonary & Critical Care CEC, in accordance with SCCM, has established holding family meetings within 72 hours of ICU admission as a system standard. The patient for whom family meetings should be held are, at minimum:

- Patients with a complicated clinical course
- Patients post cardiac arrest
- Patients on mechanical ventilation
- Patients with anticipated ICU LOS of 72 hours or greater
- Patients for whom end of life decision making is necessary
- For families that may experience conflicts in care decision-making

Existing TogetherCare functionality will be used to document and track these meetings. An Implementation Bundle will follow to assist ICU leaders.

### [Family Meeting within 72 hours of ICU Admission SBAR](#)

**Email:** [hojnacka@trinity-health.org](mailto:hojnacka@trinity-health.org)

**Leader:** Kelly Hojnacki, R.N., director, clinical transformation and Bruno DiGiovine, M.D., M.P.H., medical director, medical specialties

*Link to team materials accessible only when connected to Trinity Health Network:*

[Pulmonary and Critical Care CEC Homepage](#)

---

## **Surgical Services Clinical Excellence Council**

---

**Intended Audience: Anesthesiologist**



### **Feedback: Anesthesia Provider CEC Member Needed**

The surgery CEC is seeking Anesthesia provider membership. Anyone interested in serving on the council should please contact Carole Stout, Director Clinical Transformation at the email below.

---

**Intended Audience: Surgical Leadership, Operating Room Directors, Supply Chain**



### **Feedback: Alcohol Based Nasal Prep Solution and Documentation**

The surgery CEC is seeking feedback on an SBAR for Ethyl Alcohol (EA) nasal antiseptic. Trinity Health currently uses two types of nasal antiseptic. Povidone-iodine (PI) nasal solution and an alcohol based nasal solution. To standardize, the Surgery CEC proposes standardizing to Ethyl Alcohol over Povidone Iodine. Comparative profile of available

---

evidence indicates these antiseptics are comparable. Both PI and EA are well received by patients and have low to very low frequency of adverse reactions after application. Please see attached PPT and SBAR.

[Alcohol Based Nasal Prep Solution and Documentation SBAR and Reference](#)

[Click here for survey](#)

**Email:** [stoutcl@trinity-health.org](mailto:stoutcl@trinity-health.org)

**Leaders:** Carole Stout, R.N., director, clinical transformation; Steve Ruby, M.D., medical director, surgical services; Matthew K. Folstein, M.D., FACS

**Link to team materials accessible only when connected to Trinity Health Network:** [Surgical Services](#)  
[CEC Homepage](#)

---

---

---