

Suggested Work Plan for Facility Preparation, Staff Education, and Patient Education

Area #1

Organizational Approval
See Task Chart for specific steps

Review

✓ **Adopting this initiative may require approval by appropriate committees, such as:**

- ~ Patient Safety Committee
- ~ Medical Staff Committee
- ~ Quality Improvement Council
- ~ Board of Directors

Action Plan

Organizations have different committees that are required to approve systemwide changes, or changes that directly impact patient care. Each organization needs to assess which committees need to approve the adoption of the initiative and begin to get on meeting agendas for approval. For some organizations, this may mean simply a presentation at one committee, such as the Patient Safety Committee. Other organizations may need to have this approved by several committees, depending on their culture.

 **Consider the stakeholders and be sure they approve and understand the initiative before it is implemented so they can support it.**

Area #2

Supplies Assessment and Purchase
See Task Chart for specific steps


Review

✓ **Assessment of current supply** ✓ **Wristband procurement**

Action Plan



Most organizations have a vendor they are using for wristbands. It is important to communicate to your vendor that you are adopting the national consensus for color-coded wristbands. Most vendors are aware of the initiative and what bands should be ordered. However, if yours does not know, inform it of the colors and the alert message that needs to be printed directly on the band. Please see “Vendor Information” section. Vendors do need some lead time for the imprinting (about 2-3 weeks).

Coordinate with your Materials Management Department to evaluate when current stock will be used up. Once this is known, the rest of the implementation plan will “backfill” into this date.

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Area #3			
Hospital-Specific Documentation			
Review			
✓ Policy adoption	✓ Assessment revision	✓ Forms revised to meet standards	✓ Consents
Action Plan			
<p>Color-banding policy should be reviewed and approved if changes are made.</p> <p>Hospitals should review their respective forms for possible modifications (patient education assessments, etc.) You may want to include language that the patient received the wristband education brochure. See Patient Education section.</p> <p>If a patient refuses to wear a wristband, do you have a document indicating this? Perhaps this needs to be discussed by the Policy and Procedure (P&P) Committee. A sample has been provided in this tool kit.</p>			
 Coordinate with risk management staff and individual hospital administrators			
Area #4			
Staff and Patient Orientation, Education, and Training			
Review			
✓ Schedule/training content	✓ Documentation requirement	✓ Posters and FAQs	
Action Plan			
<p>Education format and training materials need to be reviewed.</p> <p>Competency content and format have been standardized. The competency form may be individualized for the hospital.</p> <p style="padding-left: 40px;">Hospital staff education will need to be scheduled, completed, and documented per hospital policy.</p> <p>Make changes to the new employee orientation booklets so employees are provided current information.</p>			
 Coordinate with individual Hospital Education Staff			

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