

THE PIONEERS

Dr. S. Fakeeh Hospital
Periodical Newsletter

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A Message from the Editorial Board

Welcome to the 4th Issue of the Pioneers.

Over the years Dr Soliman Fakeeh Hospital has worked tirelessly to become the leading Healthcare provider in the region, offering modern facilities coupled with high quality service for the benefit of all patients. This Issue of the Newsletter marks another milestone achievement of the Hospital, as we begin the final preparations for our JCI Accreditation.

It is with this vision in mind that we strive to meet the challenges of introducing new concepts of Hospital management, improved working conditions for staff members, and the continued provision of high standards of patient care. We hope that you find our Hospital Newsletter informative and engaging, and look forward to your continued articles for the benefit of us all.

Dr. Andrew Wild
Consultant Neurosurgeon
Editorial Board Member

Dr. Soliman Fakeeh College of Nursing and Medical Sciences Approved by the Ministry of Higher Education



In order to support the Kingdom's efforts towards Saudization and in order to provide highly qualified Saudi national nurses, Dr. Soliman Fakeeh established DSF College of Nursing and Medical Sciences. We are pleased to announce that the College has been awarded both general and academic accreditation from the Ministry of Higher Education.

The DSF College offers a Bachelor Degree in Nursing. This is a four year academic training Program, with an additional fifth Honorary year. All graduates will be obligated under contract to the Dr Soliman Fakeeh Hospital to work for time equal to the College's training years.

Prof. Dr. Ahlam Al Hamdan, DSFC of Nursing and Medical Sciences Acting Dean

Recommended Childhood and Adolescent Immunization Schedule

Most parents, and many grandparents, have no personal experience of seeing children suffer from these severe childhood illnesses: diphtheria, whooping cough, polio, mumps, and H. flu meningitis. Consequently, they may not appreciate the seriousness of these diseases or wrongly believe they no longer exist.

It is vital that we continue to immunize our children against these preventable diseases or else they will return. Unfortunately, there is much misinformation about vaccines, some of it on the Internet. We are pleased to provide you with accurate information about immunizations and encourage you to discuss any questions you may have with your pediatrician.

This schedule indicates the recommended ages for routine administration of currently licensed childhood vaccines. Any dose not administered at the recommended age should be administered at any subsequent visit when indicated and feasible.

Date	Type of Immunization
At Birth	BCG + HBV1
2 months	DTP 1 + Polio 1 + HBV 2 + HIB 1
4 months	DTP 3 + Polio 3 + HBV 3 + HIB 3
6 months	MMR + Varicella
12 months	DTP Booster 1 + Polio Booster 1 + HIB Booster
18 months	HAV 1 + Typhoid + Meningitis ACWY
2 years	HAV 2
4 years	DTP Booster 2 + Polio Booster 2 + MMR Booster + Typhoid + Meningitis ACWY
10 years	dT Booster 3 + Polio Booster 3 + HBV Booster 2 + HAV Booster
15 years	dT Booster 4 + Polio Booster 4 + HBV Booster 3

Newborn Screening Program

What is a Newborn Genetic Screening Program?

This comprises of a group of tests that detect the possibility of certain genetic disorders.

Who is eligible for this test?

All newborn babies should undergo testing, regardless of whether there is a family history of having any genetic disorder. Such genetic disorders often arise with infants born of normal individuals, despite no previous family history of the disease.

Why should we screen newborns for genetic disorders, although appearing healthy?

The Program screens for diseases which are not always physically apparent and that can have serious health consequences if left untreated, especially during the first month of life. A delay in the diagnosis of some diseases results in permanent brain damage, which cannot be reversed.

On what basis are these diseases selected for screening?

The Newborn Screening Program at Dr Soliman Fakeeh Hospital screens for common genetic disorders, not only found here but worldwide. Testing for these disorders is obligatory by authorities in Western countries.

What are these genetic disorders?

The series of disorders includes:

Congenital Hypothyroidism can lead to severe mental retardation. Timely treatment will allow affected children to develop normally.

Phenylketonuria leads to mental retardation, if left untreated,

however, if a special diet therapy is followed, mental handicap can be avoided.

Galactosemia results in poor development and even death. Treatment involves specified dietetic management.

Congenital Adrenal Hyperplasia: This is a group of disorders which leads to abnormal sexual development, and even death, without early treatment.

Maple Syrup Urine Disease is characterized by poor feeding and vomiting in newborns, leading to seizures and mental retardation. If left untreated, it results in early death.

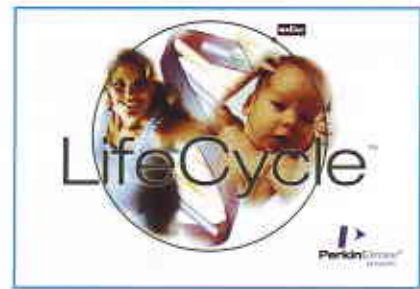
Glucose-6-Phosphate Dehydrogenase Deficiency is a common disorder associated with sensitivity to certain drugs or foods, such as? ?Fava beans. These? ?substances trigger a serious response resulting from haemolysis (destruction of red blood cells).

When should the test be performed?

The test should be done four days following delivery, when the newborn has commenced feeding. This allows for a stable level of metabolites to accumulate in the blood.

How much blood is needed for all of the tests?

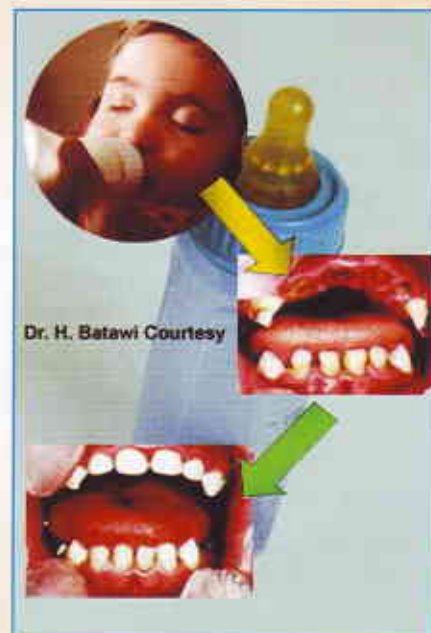
The infant's heel is pricked, but only a few drops of blood are needed. The blood is placed on special filter paper (free of charge) supplied by the Hospital.



Our Children Deserve a Healthy Smile

Poor nutritional habits constitute a major threat to our children's oral health worldwide. It is all too easy today, under the stresses of modern, busy lifestyles, to neglect good dietary practices, oral hygiene, and dental healthcare. For example, excessive infant night feeding significantly contributes to early tooth decay. This may lead to a severe form of decay, (Nursing Caries), which can result in the destruction of primary teeth, (most of the upper front teeth and back teeth). Conventional treatment is to remove the affected teeth. Such early loss of primary teeth is a major cause of malnutrition, speech impediments, and the future need for expensive orthodontic treatments.

DSFH Dental Department is proud to be one of the few Centers here that can offer treatment for nursing caries. With collaboration from our colleagues from the Pediatric Department, by referring patients to us with suspected dental problems, we can help to restore the confidence of children and parents alike.



Creation of International Patient Safety Goals

The Joint Commission International (JCI) has developed International Patient Safety Goals, which were adapted from the Joint Commission's National Patient Safety Goals. Since the Dr Soliman Fakeeh Hospital has always aimed to achieving the highest standards in healthcare, compliance with these Patient Safety Goals is a high priority. The important aspects of these individual National patient Goals are detailed below

Goal 1. Identify Patients Correctly

Use at least two (2) ways to identify a patient when giving medicines, blood, or blood products; taking blood samples and other specimens for clinical testing; or providing any other treatments or procedures. The patient's room number cannot be used to identify the patient.

DSFH utilizes a wrist band identification system, which includes the Patient's name and Medical Record Number.

Goal 2. Improve Effective Communication

Implement a process/procedure for taking verbal or telephone orders, or for the reporting of critical test results, that requires a verification "read-back" of the complete order or test result by the person receiving the information.

DSFH has Verbal & Telephone Order policies that govern this process clearly.

Goal 3. Improve the Safety of High-Alert Medications

Remove concentrated electrolytes (including, but not limited to, potassium chloride, potassium phosphate, sodium chloride >0.9%) from patient care units.

At DSFH these concentrated electrolytes are only available in Intensive Care Units where appropriate precautions are applied in their storage (secure, labeled cabinets, an inventory noted with the expiry dates and direct supervision by the Unit's Physician and Nursing Staff). They are not available on the floors.

Goal 4. Eliminate wrong-site, wrong-patient, wrong-procedure surgery

a. Use a checklist, including a "time-out" just before starting a surgical procedure,

to ensure the correct patient, procedure, and body part.

b. Develop a process or checklist to verify that all documents and equipment needed for surgery are on hand and correct and functioning properly before surgery begins.

c. Mark the precise site where the surgery will be performed. Use a clearly understood mark and involve the patient in doing this.

DSFH complies with all of the above goals through a Surgical Site/Side/Patient verification form. This includes three verification steps and finally a fourth 'time out' step immediately prior to pre-anaesthesia.

Goal 5. Reduce the risk of health care –associated infections.

Comply with current published and generally accepted hand hygiene guidelines.

DSFH has an Infection Control Unit, which plays a highly active role in following the CDC guidelines, educating, training and monitoring the whole process of Infection Control.

Goal 6. Reduce the risk of patient harm resulting from falls.

Assess and periodically reassess each patient's risk for falling, including the potential risk associated with the patient's medication regimen, and take action to decrease or eliminate any identified risks.

At DSFH every patient is initially assessed, including a Functional Assessment in OPD. On admission the process of reassessment is continuously performed. High emphasis is placed on the potential risk of a fall, especially during his/her treatment scheme.

This process is monitored through document review and occurrence variance reporting of falls.

DSFH Continuous Medical Education (CME) Program

DSFH Continuous Medical Education Program is planned in a way to ensure that different medical topics are covered each year.

This variety ensures broader benefit for physicians, especially General Practitioners.

The program is approved by the Saudi Council for Health Specialties.

The following is the CME schedule for the next 3 months:

NO.	Title	Speaker	Date	Credit Hour
1	Cutaneous manifestations of collagen disorders	Dr. Hanan Nada Dermatology Consultant	18/7/2006	1 hour
2	New insights into the management of septicemia	Dr. Ayman Khater Chest Consultant	22/8/2006	1 hour
3	Dyslipidaemia management in chronic renal failure patients	Dr. Samir Sally Medicine Consultant	19/9/2006	1 hour

For more information, please contact Dr. Hesham Salah Eldin, MD, FCCP, Director of Education

CME Approval from Saudi Council for Health Specialties



DSFH Education Section has recently obtained Certification from the Saudi Council for Health Specialties to introduce a series of lectures about laboratory quality in the Hospital under our continuing Medical Education Program (CME). The Saudi Council agreed to award one hour continuing education credit for each one-hour lecture – not to exceed ten hours per year. Furthermore, their official accreditation number must be referenced on all Newsletters, Announcements, Flyers and Certification of Attendance letters (official accreditation No 0259/2006, Date 13-1-1427 H).

Recommended E-sites

Joint Commission on Accreditation of Healthcare Organizations (JCAHO):

This site provides reliable up-to-date information to continuously improve the safety and quality of care provided to the public through the provision of health care accreditation and related services that support performance improvement in health care organizations.

<http://www.jointcommission.org>



Joint Commission International (JCI):

JCI extends the Joint Commission's (JCAHO) mission worldwide, through international consultation, accreditation, publications and education.

<http://www.jointcommissioninternational.com>



Joint Commission Resources, Inc. (JCR):

JCR, an affiliate of the Joint Commission on Accreditation of Healthcare Organizations is the official publisher and educator of the Joint Commission. JCR is an expert resource for health care organizations, providing consulting services, educational services and publications to assist in improving quality and safety and to help in meeting the accreditation standards of the Joint Commission.

<http://www.jcrinc.com>



Joint Commission International Patient Safety Center:

This website provides resources and information regarding patient safety, for patients and their families, as well as personnel from the healthcare professions. Please see the website for numerous practical safety solutions

www.jcipatientsafety.org



For more information, Please contact Medical Library, Mrs. Hana Al-Osta, Ext: 3023

DSF College of Nursing and Medical Sciences Celebrates International Nursing Day

International Nursing Day is celebrated around the world every May 12, the anniversary of Florence Nightingale's birth. Every year since its establishment in 2004, Dr. Soliman Fakeeh College of Nursing and Medical Sciences has celebrated it as well. This year, with great support from the Owner and Chairman of the Board of Directors, Dr. Soliman Fakeeh, the College participated in separate events to celebrate International Nursing Day.

On May 3rd, Dr. Mazen Fakeeh, Deputy Director General inaugurated an exhibition of the students' scientific activities useful for individuals, families and society alike. The College also published its first annual magazine with contributions from both staff and students.

Poor health in a significant percentage of a society's population is a major obstacle to social and economic development. Actions that nurses take to promote health, prevent disease, alleviate suffering and aid healing and rehabilitation can help people lead healthy and productive lives. In cooperation with Jeddah Municipality, on May 9th and 10th the College participated in a program to improve health in the Al Nozla Al



Yamania region. They set up tents where over 450 people were given general check-ups, measuring height, weight, pulse, blood pressure, blood glucose level, cholesterol, and blood group. The region's citizens were very appreciative to the College, to Dr. Soliman Fakeeh, and Dr. Mazen Fakeeh for their unique support in this endeavor.

Dr. Ahlam Al Hamdan, Acting Dean of DSF College of Nursing and Medical Sciences.

Epidemic Outbreak Disaster Drill

As part of the Emergency Management Plan, DSFH has a contingency plan in place to respond to epidemic outbreak emergencies that could threaten our community. This Contingency Plan is routinely tested during drills under supervision of the External Disaster Emergency Technical Advisor Group, Safety and Security Unit, and Total Quality Management Department.

On March 27th 2006, DSFH External Disaster Drill #3 was performed. The scenario involved a large number of patients with suspected Avian Flu, as this is a potentially global epidemic threat.

The value of these drills is to train the Staff and evaluate the Hospital's preparedness to handle any epidemic outbreak. This also involves the evaluation of the Staff's performance during the initial assessment process and primary care of patients. This is in com-



pliance with the International standards, regarding personnel protective equipment, early laboratory and radiological diagnoses, preparedness of the Emergency Department, ICUs and Isolation Unit to receive and manage these patients accordingly.

New Consultants Staff



Dr. Lajgut Attila
Consultant Neurosurgeon
M.D, Semmelweis Medical University
Budapest, Hungary
Consultant in Borsod-A-Z County Teaching
Hospital, Miskole



Dr. Shaker Ezz-Eddin
Consultant Dermatologist and
Venereologist
M.D, Al-Azhar University, Cairo, Egypt
Professor of Dermatology and
Venereology, Al-Azhar University



Dr. Abdelrahim Rouzi
Consultant Obstetric/Gynecology and IVF
Canadian Fellowship in
Obstetric/Gynecology
Canadian Fellowship in Subspecialty
Infertility and Reproductive Medicine.



Dr. Emad Fodah
Human Resource Director
Doctor of Philosophy-Business
Administration, Kennedy Western
University, CA- USA

MRQP Executive Quality Series

In February 2006, the Health Development Council in the Makkah Region announced the beginning of the Executive Quality Series that was directed mainly towards hospitals that were accredited in 2005, and a calendar was prepared for that purpose. Our Hospital has been MRQP accredited since May 2005- this being the first time that the MRQP Program was put into operation. The 4 workshops which were held once monthly from March through June 2006 were limited to only Hospital Management Leadership positions:

- Hospital Director- Represented by Dr Maged Magrhabi, Risk Manager
- Medical Director- Represented by Dr Armand Agababian, Deputy CMO
- Administrative Director- Represented by Dr Liza H Hassan, TQM Director
- Nursing Director- Represented by Mrs Luisa Galace, Acting CNO

The purpose of the above series was not only to maintain the already attained quality standards by the concerned hospitals, but also to focus on the implementation of these standards and to aim at attaining even higher standards through expanding and developing the survey process. Roundtable discussions concerned issues such as enhancing the quality of care rendered to customers and improving patient safety standards.

Our Hospital is not only endorsing MRQP standards, but is also simultaneously endorsing JCIA and Saudi Aramco standards of care.

Dr Liza H Hassan, TQM Director
Dr Armand Agababian, Deputy CMO

FOCUS PDCA: Impetus for Improvement



As a result of a safety complaint in the Hospital's Psychiatric Ward, a DSFH team began a Risk Assessment to determine the risks related to patient safety and security. Based on the results of the assessment, the risk issues were presented to the Hospital Administration along with an Action Plan which proposed several actions for improvement.

Implementation began immediately to renovate the psychiatric ward. The Hospital Administration decided to move the entire Psychiatric Ward to the 4th Floor New Building and to rename it Behavioral Health Unit – BHU. The corridors were renovated with ceramic tiles, female/male areas were well-segregated, entertainment rooms were made for both males and females and the risk issues found were corrected. The surgical ward, formerly in 4th New moved to 4th Pedia, a floor that had not been occupied since the Pedia opening in 1999; 4th Old is now being demolished and will be rebuilt into state-of-the-art general clinics. Proper Risk Assessment/FOCUS PDCA steps were taken to identify and define areas for improvement which resulted in 3 different areas of improvement - an improved BHU, an upgraded surgical ward and future state-of-the-art clinics.

DSFH Pest Control Certification

by Al Majal Servicemaster



In order to comply with Aramco and JCIA standards, DSFH Support Services has implemented a Pest Control Training Program in conjunction with Almajal Servicemaster specific to healthcare facilities. The intensive training schedule for these technicians included both theory (classroom) and field training (on the job). Our DSFH trainees Cesar Jocson, Head of Environmental Services, Marlon Betonio, Ramon Licardo, and Miguel Cabaoan, began training on May 6th and trained through June 11th 2006.

Ms. Glenda Adcox, Director of Support Services Department.



Dr. Derick P. Pasternak, JCI International Consultant Reviews JCIA Compliance with DSFH Leadership

Dr. Derick P. Pasternak, a board certified internal medicine specialist, and a Consultant for Joint Commission International met for four days with the DSFH Leadership Group from 17-20 May 2006. His visit began with a review of the Agenda, followed by document review for patient care centered standards (ACC, AOP, COP, PFE, PF). On day 2 he visited all patient care clinical areas using the new Tracer Methodology. Medication management was the focus for day 3 and the day ended with a visit to all clinical areas to review medication storage practices. On his last day here, Dr. Pasternak reviewed Clinical Indicators and summarized his findings to the Leadership Group. We feel fortunate to have had the opportunity to have Dr. Pasternak's expertise in preparation for our final JCI survey.

Dr. Soliman Fakeeh Hospital 1st International Cardiovascular Conference

مستشفى الدكتور سليمان فقيه
DR. SOLIMAN FAKEEH HOSPITAL

1st International Cardiovascular Conference

Topics:

1. Workshop on controversial issues in clinical practice.
2. Workshop on managing atherosclerosis risk factors.
3. Coronary and non-coronary interventions.
4. High risk CABG and LV remodeling surgery.
5. Cardiology in the eyes of non-Cardiologists.

PARALLEL NURSING PROGRAM

Organizing Committee:

- Dr. Hassan M. El Tokry (HU) - Guest Web Consultant
- Dr. Peter Badlak - Consultant Cardiac Surgeon
- Dr. Abdulhameed Agba - Park, Riyadh & Mecca Branch
- Dr. Adham Al-Hamdan - A member of IFR Saudi College

Honorary Chairman:
Dr. Soliman Fakeeh

Chairman of Organizing Committee:
Dr. Hesham Salah El-Din, MD, FCCP
Cardiology Consultant, Director of Cardiology

Date: 8-9th June, 2006. VENUE: 7th Floor, Pedia Building, Hospital Auditorium

Pfizer

On June 8, 2006, Dr. Soliman Fakeeh Hospital conducted its first International Cardiovascular Conference which lasted two days. More than 400 physicians and 350 nurses attended this outstanding event from across the Kingdom. Experts in different cardiovascular aspects were invited as guest speakers from several European countries to share their knowledge and update the medical staff on the latest in the field of Cardiology.

The program included state-of-the-art lectures and workshops on controversial issues in clinical practice, cardiac interventions and open heart surgery. To make the program more attractive for other specialties a workshop on cardiology by non-cardiologists was added.

A parallel nursing program addressing cardiology and ICU related topics was also incorporated into the program.

The meeting was approved by Saudi Council for Health Specialties and awarded 16 credit hours Continuing Medical Education (official accreditation number 1197/2006). The conference provided an exciting forum for exchange and assimilation of findings in the field of Cardiovascular Medicine and Surgery.

The feedback from the attendees was extremely positive with special appreciation of both the scientific and organizational aspects. Finally, we would like to thank all Hospital staff who helped make this event a true success.