

WOODLANDS HOSPITAL

DEPARTMENTAL GOALS FOR 2018

January 2018

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ACCOUNTS DEPARTMENT

My plan for the Accounts Department is to employ a relief staff. This staff would be responsible for two vital areas in the department which is:

Managing and monitoring the archive.

Managing the Asset register.

The staff would also undergo training in all aspects of the functions of the Department hence being able to fill any void that may be created. I also plan to work with my Supervisors and staff members to ensure that we provide a much more efficient billing service to our clients.

With the implementation of the HIMS I plan to have all cashier areas fully computerized and also have a more comprehensive invoice for our hospitalized patients. With the implementation of the above we would be able to provide a more reliable, efficient and effective service to our clients and also save on expenditure pertaining to printing of several receipt books.

SWITCHBOARD DEPARMTNET

I plan to have more intense training pertaining to the cashing aspect of the switchboard operators' duties. This is with the aim of minimizing errors. I also plan to have training in all protocols on a regular basis and also to work on team activity to improve the co-operation amongst switchboard operators.

I am also going to be recommending serious disciplinary actions when protocols are not adhered to by the operators.

This is to ensure that we provide an efficient and effective customer service.

HUMAN RESOURCES

Annually :Doctors and Nurses Registration, Staff Performance Appraisal, Review/update HR Policies, Succession plan /on the job training for staff to take up duties and function in the absence of co workers.

Biannually: Staff Performance Appraisal, Review of job descriptions.

Monthly: Participate in Departmental Meetings, Payroll, Leave Passage, Check due dates for Confirmation of new staff, Check staff Birthdays for Newsletter.

Weekly: Payroll, NIS Forms, Leave processing

NURSING DEPARTMENT

GOAL #1: TRAINING AND DEVELOPMENT

OBJECTIV: (a) Improve Nurse- Patient relationship

(b) Enhance skills and knowledge of Nurses

GOALS # 2: INFECTION PREVENTION

OBJECTIVE: (a) Monthly fumigation and sterilization of wards and critical areas

(b) Re-enforce proper infection prevent and control practices among Nurses

GOAL # 3: PROTOCOLS AND STANDARD OPERATING PROCEDURES

OBJECTIVE: (a) Re-enforce adherence to protocols through motivation and disciplinary

NEWS IN BRIEF**SOME STATISTICS FOR
DECEMBER 2017****Emergency Room****Patients Seen – 2591****Admissions – 104****Maternity****Total Deliveries – 64****Males – 30****Females – 34****Caesarean Sections – 28****Neonatal Death – 0****Twins – 1****Premature – 1****Breech – 0****Still Births – 0****Male ward****Admission – 67****Deaths – 0****Female ward****Admission – 105****Deaths – 0****ICU****Admissions – 232****Deaths – 3****Radiology****X-ray – 974****CT – 119****Ultrasound – 1811****ECHO – 0****Holter – 0****Stress – 0****Theatre****Surgeries – 124****Ophthalmology – 25****Pharmacy****Prescriptions – 3877****Laboratory****Patients attended – 2527****Pathology Lab****Cytology – 15****Histopathology – 79****DOCTORS MEETING:-****Was held on 24th May, 2017 at 17:00 Hrs.....Chairperson—Dr. N.Gobin****Needy Children's Party in Retrospect**

Special thank you to everyone who contributed to Woodlands Needy Children's Party 2017 making it a huge success. You were able to put a smile on the faces of the less fortunate children. So THANK YOU...

Because of your generosity you will notice we have a Balance on Hand of **\$230,162.00**

BALANCE ON HAND AS AT 31/12/2016	214,385.00
TOTAL CASH COLLECTED FOR 2017	1,140,780.00
	<hr/>
	1,355,165.00
EXPENDITURE	\$1,125,003.00
BALANCE ON HAND	\$230,162.00

Even as we consider that we had another successful Needy Children Party on auditing the event we have noticed some areas that would like to address for this Year's Needy Children Party.

More Needier Children: We noticed that approximately 70% of the children who would have benefited from this event are not so needy. We have therefore decided to approach community leaders of the more depressed communities to be able to reach these NEEDIER children.

Refreshments: It was observed that there seemed to be duplication of items that was served e.g. squares of cake + cupcakes. If one was a donation the other if it was bought should have been cancelled. Distribution by the helpers was a bit haphazard resulting in a few Children not receiving and some more than once. This is a problem that has repeated itself year after year. We wish to correct this by having designated helpers who will be responsible for severing their assigned tables.

Role of Entertainment Personnel: have clear cut instructions surrounding the service we require from them as well as time and payment. If possible, this should be in writing to avoid confusion at the event.

Hats or Jerseys: The hats for Santa's helpers seems a cheaper and less expensive option than the jerseys and worked pretty well. This option was only used as the Jerseys were misprinted with 'Children's Party 2018'.

We asked our Santa Claus **Nurse Bentick** who is also a new employee at Woodlands for her 'Woodlands Christmas experience'

This is what she had to say: I have always enjoyed the Christmas season with close family members and friends in my home area, this year I assumed it would be different

due to the fact that I was away from home around strangers and working most days. My assumptions were just a thought that did not come to pass. The final two weeks before Christmas, I walked into work at approximately 6:15 hrs., like I normally do and to my surprise the entire Hospital was decorated with all the fine, amazing pieces that screamed "Christmas is finally here and we are celebrating" my entire spirit lifted I instantly, I felt as though I was back home preparing for Christmas with my Family friends.

I can also remember, as though it was just yesterday, when my supervisor asked my workmate to be the Santa Clause for the Hospital's Needing Children's Party, even before my workmate answered I said "I would like to be Santa!!!, thinking to myself, what better way to make children happy at Christmas.

My thoughts failed me for a second time, because not only did I make the children happy but they made me even happier seeing the joy in their eyes, how the hugs of every child felt different but warm and true, and adults, how happy they were.

A **vaccine** is a biological preparation that provides active acquired immunity to a particular disease. A vaccine typically contains an agent that resembles a disease-causing microorganism and is often made from weakened or killed forms of the microbe, its toxins, or one of its surface proteins. The agent stimulates the body's immune system to recognize the agent as a threat, destroy it, and to further recognize and destroy any of the microorganisms associated with that agent that it may encounter in the future. Vaccines can be prophylactic (example: to prevent or ameliorate the effects of a future infection by a natural or "wild" pathogen), or therapeutic (e.g., vaccines against cancer are being investigated).

The administration of vaccines is called vaccination. Vaccination is the most effective method of preventing infectious diseases. Vaccines have historically been the most effective means to fight and eradicate infectious diseases. Limitations to their **effectiveness**, nevertheless, exist. Sometimes, protection fails because the host's immune system simply does not respond adequately or at all. Lack of response commonly results from clinical factors such as diabetes, steroid use, HIV infection or age. It also might fail for genetic reasons if the host's immune system includes no strains of B cells that can generate antibodies suited to reacting effectively and binding to the antigens associated with the pathogen. Even if the host does develop antibodies, protection might not be adequate; immunity might develop too slowly to be effective in time, the antibodies might not disable the pathogen completely, or there might be multiple strains of the pathogen, not all of which are equally susceptible to the immune reaction. However, even a partial, late, or weak immunity, such as a one resulting from cross-immunity to a strain other than the target strain, may mitigate an infection, resulting in a lower mortality rate, lower morbidity, and faster recovery.

Vaccination given during childhood is generally safe. **Adverse effects** if any are generally mild. The rate of side effects depends on the vaccine in question. Some common side effects include fever, pain around the injection site, and muscle aches. Additionally, some individuals may be allergic to ingredients in the vaccine. MMR vaccine is rarely associated with febrile seizures.

Severe side effects are extremely rare.^[1] Varicella vaccine is rarely associated with complications in immunodeficient individuals and rotavirus vaccines are moderately associated with intussusception.

1. Measles

What it is: A highly contagious lung infection.

How you get it: The measles virus gets into the air when someone who has it coughs or sneezes. It can also last for up to 2 hours on something they touched. Most people who aren't immune -- 90% -- will get it if they are near an infected person.

Why it's serious: The annual mortality rate per 100,000 people from measles in Guyana has decreased by 62.7% since 1990, an average of 2.7% a year.

Though this has been the trend overall, adjust the filters at the top of the visualization to see how the mortality rate for measles has changed over time for men and women of specific age groups in Guyana. For men, the deadliness of measles in Guyana peaks at age 55-59. It kills men at the lowest rate at age 55-59. Women are killed at the highest rate from measles in Guyana at age 55-59. It was least deadly to women at age 55-59. The peak deadliness was identical for men

and women at 0.0. Measles can cause pneumonia, brain swelling, and death.

2. Whooping Cough (Pertussis)

What it is: A lung infection that makes it hard to breathe due to severe coughing.

How you get it: People can breathe in the pertussis bacteria when someone who has whooping cough coughs or sneezes.

Why it's serious: It can be life-threatening, especially in babies less than 1 year old. Whooping cough can lead to pneumonia, seizures, and slowed or stopped breathing.

3. Flu

What it is: A viral infection of the nose, lungs, and throat.

How you get it: When someone with the flu coughs, sneezes, or talks, droplets can spread up to 6 feet away. People get the virus from the air or by touching something the sick person touched and then touching their own nose or mouth.

Why it's serious: Up to 49,000 Americans die from the flu each year. The flu can worsen asthma and diabetes.

4. Poliomyelitis

What it is: A viral disease

How you get it: The polio virus lives in the intestines. You can get infected by coming into contact with a sick person's feces.

Why it's serious: Most people get no symptoms or flu-like symptoms that last a few days, but polio can cause brain infection, paralysis, and death. It was one of the most feared and devastating diseases of the 20th century. Polio cases are down sharply thanks to vaccination, but the disease is not gone from the world. The last case of polio was in 1962. Guyana's success with its Immunization Programme was achieved through the strategies used to combat preventable diseases in children and through the hard work of its health care workers

5. Pneumococcal Disease

What it is: A bacterial disease that can cause many types of illness, including pneumonia, ear and blood infections, and meningitis (which affects the brain and spinal cord).

How you get it: By coming into contact with an infected person's mucus or saliva.

Why it's serious: Complications can be serious and fatal. As pneumonia, it's especially deadly in people older than 65. If it causes meningitis or infects the blood, these can be life-threatening. *Guyana* also introduced the vaccine in December, 2010,

6. Tetanus

What it is: A bacterial disease that causes lockjaw, breathing problems, muscle spasms, paralysis, and death.

How you get it: The bacteria that causes tetanus is found in soil, dust, and manure. It can get in your body through a cut or open sore.

Why it's serious: 10% to 20% of tetanus cases are fatal. Deaths are more common in people who are older than 60 or who have diabetes.

7. Meningococcal Disease

What it is: A bacterial disease that can cause meningitis, an infection and swelling of the brain and spinal cord. It can also infect the blood.

How you get it: It's caused by bacteria that live in the back of an infected person's nose and throat. It can spread through kissing or just living with someone who is infected. Symptoms are usually fever that starts suddenly, headache, and stiff neck. Getting diagnosed and treated ASAP is key.

Why it's serious: Between 1,000-1,200 people in the U.S. get meningococcal disease each year. Even with antibiotics, as many

9. Mumps

What it is: A disease caused by a virus that gives people swollen salivary glands, a fever, headache, and muscle aches. It also makes you feel tired and curbs your appetite.

How you get it: When someone with mumps coughs or sneezes, the virus gets into the air, and other people can breathe it in.

Why it's serious: It can cause long-lasting health problems, including meningitis and deafness. Mumps is now rare in the U.S., thanks to the MMR (measles-mumps-rubella) vaccine. But outbreaks still happen, usually among people spending time close together, like living in a dorm.

10. Hib (Haemophilus Influenzae Type B)

What it is: A bacterial disease that infects the lungs (pneumonia), brain or spinal cord (meningitis), blood, bone, or joints.

How you get it: Some people have Hib bacteria in their nose or throat but are not ill. When they cough or sneeze, the bacteria go airborne. Babies and young children are especially at risk because their immune systems are weak.

Table of routine vaccines during childhood and in schools

	Hepatitis B	Tetanus, Diphtheria, Whooping cough, Polio	Haemophilus influenzae type B	Pneumococcus	Rotavirus	Measles, Mumps, Rubella, Chicken pox	Hepatitis A	Papilloma Virus	Influenza
On birth, in hospital	1st Dose								
1 Month	2nd Dose								
2 Months		1st Dose		1st Dose	1st Dose				
4 Months		2nd Dose		2nd Dose	2nd Dose				
6 Months	3rd Dose	3rd Dose + bOPV polo vaccine			3rd Dose				Starting from the age of half a year two doses, followed by one dose per year before the influenza season
12 Months		4th Dose		3rd Dose		1st Dose			
18 Months		bOPV polo vaccine					1st Dose		
24 Months							2nd Dose		
6 Years (1st Grade)						2nd Dose			
7 Years (2nd Grade)		Booster							Beginning in 2016-2017, the vaccine will be given to 2nd graders
13 Years (8th Grade)		Booster (without Polio)					2 doses		

Some pictures from our Needy Children's Party 2017



Management and Staff wish to congratulate the following persons on their birth anniversary for December, 2017

Barbara Rogers-Nero	1st
Salesh Augustine	6th
Nikieta Mingo	8th
Roger Astwood	14th
Jays James	14th
Selma Adams	16th
Elizabeth Pickett	17th
Shaundel Cort	19th
Karen Dundas	19th
Clarence Booker	20th
Sheneise Welcome-Lopes	22nd
Binsha Babu	26th
Keith Pellew	27th
Sheron Datterdeen	28th
Indera Mangru	30th

TAKING A BREAK FROM WOODLANDS HOSPITAL

Staff	Leave
Jibina Sebastian	3rd Jan – 30th Jan
Churmani Prasad	5th Jan – 8th Jan
Estel Wills	11th Jan – 12th Jan
Khemwattie Talmakund	15th Jan – 21st Jan
Xianne Munroe	16th Jan – 17th Jan



Pharmacists: 5 positions
 Attendant: 1 position
 Housekeeper: 1 positions
 Multipurpose Technician: 1 Position
 Receptionist: 2 positions

ALL APPLICANTS WILL BE EXPECTED TO WORK ALL SHIFTS

We can now be perused on our Web Site

www.woodlandshospital.com