Putting Safety First
Quality/Do No Harm
Health First is not only committed to keeping our patients safe, but our associates safe as well.
What is Your Patient Safety I.Q.?

http://www.who.int/patientsafety/education/quiz.html

Source: The World Health Organization (WHO)
2019 Hospital National Patient Safety Goals (NPSG)

- Identify patients correctly
- Improve staff communication
- Use medicines safely
- Use alarms safely
- Prevent Infection
- Identify patients at risk for suicide
- Prevent mistakes in surgery
Today’s NPSG Focus

- Suicide Risk Assessment
- Fall Prevention
- HF Restraint Use
Suicide Reviewable Sentinel Event

- The Joint Commission definition: Suicide of any patient receiving care, treatment and services in a staffed around-the-clock care setting or within 72 hours of discharge

http://www.jointcommission.org/Sentinel_Event_Policy
Identify Patients at Risk for Suicide

Elements of Performance:

- The new and revised requirements address:
  - Environmental risk assessment and action to minimize suicide risk
  - Use of a validated screening tool to assess patients at risk
  - Evidence-based process for conducting suicide risk assessments of patients screened positive for suicidal ideation
Identify Patients at Risk for Suicide

Elements of Performance:

- Documentation of patients’ risk and the plan to mitigate
- Written policies and procedures addressing care of at-risk patients and evidence they are followed
- Policies and procedures for counseling and follow-up care for at-risk patients at discharge
- Monitoring of implementation and effectiveness, with action taken as needed to improve compliance
Suicide Statistics

While this data is the most accurate we have, we estimate the numbers to be higher. Stigma surrounding suicide leads to underreporting, and data collection methods critical to suicide prevention need to be improved. Learn how you can become an advocate.

- Suicide is the 10th leading cause of death in the US
- Each year 44,193 Americans die by suicide
- For every suicide 25 attempt
- Suicide costs the US $51 Billion annually

Additional Facts About Suicide in the US

- The annual age-adjusted suicide rate is 13.26 per 100,000 individuals.
- On average, there are 121 suicides per day.
- Firearms account for almost 50% of all suicides.
- Men die by suicide 3.5x more often than women.
- White males accounted for 7 of 10 suicides in 2015.
- The rate of suicide is highest in middle age, in particular.
Suicide Facts: Our Youth

- **Second** leading cause of death for ages 10-24.
- Over **5,240** attempts by young people grades 7-12 in America **every day**
- **Four out of five** teens who attempt suicide give clear warning signs

Suicide Risk Factors

**Health Factors**
- Mental health conditions
  - Depression
  - Bipolar (manic-depressive) disorder
  - Schizophrenia
  - Borderline or antisocial personality disorder
  - Conduct disorder
  - Psychotic disorders, or psychotic symptoms in the context of any disorder
  - Anxiety disorders
- Substance abuse disorders
- Serious or chronic health condition and/or pain

**Environmental Factors**
- Stressful life events which may include a death, divorce, or job loss
- Prolonged stress factors which may include harassment, bullying, relationship problems, and unemployment
- Access to lethal means including firearms and drugs
- Exposure to another person's suicide, or to graphic or sensationalized accounts of suicide

**Historical Factors**
- Previous suicide attempts
- Family history of suicide attempts
Suicide Warning Signs

**Talk**
If a person talks about:
- Being a burden to others
- Feeling trapped
- Experiencing unbearable pain
- Having no reason to live
- Killing themselves

**Behavior**
Specific things to look out for include:
- Increased use of alcohol or drugs
- Looking for a way to kill themselves, such as searching online for materials or means
- Acting recklessly
- Withdrawing from activities
- Isolating from family and friends
- Sleeping too much or too little
- Visiting or calling people to say goodbye
- Giving away prized possessions
- Aggression

**Mood**
People who are considering suicide often display one or more of the following moods:
- Depression
- Loss of interest
- Rage
- Irritability
- Humiliation
- Anxiety
Suicide Precautions

Defined as **continuous** interventions aimed at providing a **safe environment** for patients identified as exhibiting suicidal behavior and or ideations.
Suicide Precautions

- Based on validated/evidence based Screening and Risk Assessment tools
- Patient Observer
- Patient and belonging search
- Environmental assessment and risk reduction
- Explanation of restrictions and safety measures
- Resources
- Document
Suicide Risk Reduction is Everyone’s Job

What is my role?

- Be alert to “red flags” for immediate risk
- Communicate patient’s suicidal risk
- Assess and reassess per policy (CP 3.09)
- Create safe environments
Falls Reviewable Sentinel Event

- Patient falls resulting in injury
- Some contributing factors may include:
  - Inadequate assessment
  - Lack of clear communication
  - Lack of adherence to protocols and safety practices

http://www.jointcommission.org/Sentinel_Event_Policy_
Fall Prevention

- Risk Assessment
  - Morse Fall Risk Scale
  - Humpty Dumpty
- Interventions
- Reassessment
  - Every shift
  - Change of condition
Fall Prevention Initiatives

- Be Safer Campaign
- Health First Safe Patient Handling & Mobility Program
Be Safer Campaign

B = Belts, socks and alarms
E = Eliminate hazards
S = Syncope
A = Assess as you move
F = Find Help
E = Educate and encourage
R = Refusals
Safe Patient Handling and Mobility Program

- Intended to keep both patient and associate safe
- Remember, mobility is a vital sign
- Ambulate patients a minimum of two to three times a day, as tolerated
- Health First Safe Patient Handling and Mobility Assessment Tool
Safe Patient Handling and Mobility Assessment Tool

- Assessment completed by Registered Nurse (RN) or Physical Therapist (PT)
- Completed on admission, each shift, and when patient’s condition changes
- Once completed, post on patient door
# HEALTH FIRST SAFE PATIENT HANDLING AND MOBILITY PROGRAM

<table>
<thead>
<tr>
<th>ROOM #</th>
<th>MOBILITY LEVEL 1</th>
<th>MOBILITY LEVEL 2</th>
<th>MOBILITY LEVEL 3</th>
<th>MOBILITY LEVEL 4</th>
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</thead>
<tbody>
<tr>
<td>DATE:</td>
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<td></td>
<td>Use hoover lift (Maxi Move), transfer board, friction reducing sheets.</td>
<td>Use hoover lift (Maxi Move), transfer board, friction reducing sheets or Sara 3000 if patient able to bear weight on at least one leg.</td>
<td>Use gait belt, walker, cane, Sara 3000 or Sara Steady.</td>
<td>If PASS (must demonstrate good safety awareness), patient is mobility level 4 &amp; independent.</td>
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</tbody>
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| ADMISSION |                  |                  |                  |                  |
| AM SHIFT: |                  |                  |                  |                  |
| PM SHIFT: |                  |                  |                  |                  |

**Equipment Used:** Maxi Move  Sara 3000  Sara Steady  Walker  Cane  Distance (ft) walked______________

**Special Considerations:**

Any questions, please call Rehab Dept. ext. 47192
Safe Patient Handling and Mobility Devices

Walker

Cane

Sara Stedy

Maxi Move

Sara 3000
Fall Prevention is Everyone’s Job

What is my role?

- Answer call lights
- Hourly rounding
- Use yellow identifiers
- Gait belt
- Bed in low position
- In arms reach
- Provide adequate lighting

- Clear clutter
- Always lock moveable equipment
- Transfer patient toward stronger side
- Activate bed/chair alarm
- Proactive toileting
- Utilize safety equipment
Health First is committed to preventing, reducing and striving to eliminate the use of restraints.
Restraint Definition

Any manual method, physical or mechanical device, material or equipment that **immobilizes or reduces** the ability of a patient to move his or her arms, legs, body, or head freely.

- What is the intent for the use of the device?
References

- https://www.jointcommission.org/assets/1/6/2018_HAP_NPSG_goals_final.pdf
- https://www.jointcommission.org/assets/1/18/Event_type_2Q_2016.pdf