

RESIDENT AND PATIENT SAFETY WORKSHEET

A TOOL TO GUIDE YOUR EVALUATION OF A SKILLED NURSING CENTER

QUESTIONS TO ASK

Whenever possible, aim to ask these questions of staff in different roles. Ask all questions of Certified Nursing Assistants (CNAs); they have the closest relationships with residents and family members. Try to direct clinical questions to Registered Nurses. Ask process questions of facility administrators and pay extra attention to whether their answers affirm or contradict answers from other staff.

SAFE PROCESSES AND PROCEDURES

Certain systems and processes lay the foundation for safety and prevent unintended negative health outcomes. Asking questions about a center's processes will give you a sense of how focused they are on creating a culture of patient safety.

1. HOW DOES YOUR STAFF COMMUNICATE BETWEEN SHIFTS?



Staff should exchange information about each person in their care during shift changes. CNAs, nurses and administrators should be able to tell you exactly when and how this communication happens each day.

2. HOW ARE MISTAKES AMONG STAFF HANDLED?



Listen for clues that the center embraces a culture of performance improvement and learning rather than punishment. Staff should feel comfortable raising issues and concerns so that everyone can learn from mistakes.

3. HOW DO YOU MAKE SURE STAFF MAINTAINS THE SKILLS AND COMPETENCIES NEEDED TO PERFORM THEIR JOBS AT THE HIGHEST LEVEL?



Approaches to health care safety evolve constantly. Continuous training and evaluation ensure that the staff provides high quality care.

4. HOW DO FAMILY MEMBERS PARTICIPATE ON PERFORMANCE AND QUALITY IMPROVEMENT TEAMS? HOW CAN I GET INVOLVED?



Listen for existing processes that take family member feedback into account. Also, try to discern from tone and visual cues whether the staff is open to hearing from residents/patients and family members.

5. HOW DO YOU GET TO KNOW INDIVIDUAL RESIDENTS?



A big part of health care safety is a staff that knows each person well and can detect issues before or as they arise. Does the center practice consistent assignment, meaning that care givers care for the same people every time they work? Does the center rely too heavily on temporary staff?

CLINICAL AREAS

1. WHAT IS YOUR APPROACH TO ENSURE THAT MEDICATION IS PRESCRIBED AND ADMINISTERED SAFELY?



Non-medicine interventions should be explored before medication is prescribed.

2. HOW ARE PERSONAL ALARMS USED?



Nursing centers will often use alarms on a patient's seat or bed to alert staff when the resident has gotten up. These alarms can sometimes help staff understand a new resident's activity level or movement patterns. However, long-term use of alarms is not recommended, as they can give staff a false sense of security and have not shown to be effective at preventing falls.

3. HOW DO YOU REDUCE THE RISK OF FALLS?



The center should have a comprehensive fall prevention program that keeps people moving, including physical/occupational therapy and safe use of medication. Care should also be taken to reduce environmental factors that increase the risk of falls.

SAFE PROCESSES AND PROCEDURES

As you are visiting a facility, use these checklists to guide your safety observations.

RESIDENTS

- No use of physical restraints
- Residents appear well groomed
- Residents appear comfortable
- Most residents are awake, alert and meaningfully engaged

STAFF

- Reasonable number of staff are present with residents
- No visible discord among staff
- Staff communicates often
- Staff help residents move around when they want to

CENTER

- No visible hazards (exposed sharp surfaces, furniture or flooring in disrepair)
- Facilities are maintained and clean
- Alarms and call bells are responded to in a timely manner
- Visitors are required to sign in at reception