

WORKPLACE ISSUES: Z-CH 25

Case Studies

1. As a nursing student, Angie learned the proper handling of patients in her fundamentals course. During clinical rotation, Angie is assigned a patient with left-sided weakness related to a stroke and dementia. She reviews her notes on positioning, transferring, and handling a patient with musculoskeletal weakness. When entering the patient's room, Angie finds the patient halfway out of bed. She rushes to assist the patient to sit and immediately afterwards feels a sharp pain in her back. Subsequently, Angie has a herniated lumbar disk and is unable to continue nursing school.

a) How should Angie have approached moving this patient?

Angie should have approached moving this patient by assessing the patient's dependency needs and abilities and use the appropriate assistive device or asked for help.

b) What did Angie do correctly in this situation?

In this situation, Angie correctly reviewed her notes on positioning, transferring, and handling a patient with musculoskeletal weakness. It was good that she rushed to assist the patient, although she should have assisted him in a way that was not harmful to either her or her patient.

c) Explain why back problems are the number-one cause of nurse injuries and describe the subsequent effects on nursing care.

Back problems are the number-one cause of nurse injuries as the risk for injury increases if the nurse provides direct patient care such as turning, toileting, and providing for activities of daily living. Lifting, repositioning, and transferring are also actions that relate to back problems. The configuration of a patient's room and the placement of furniture, monitors, and equipment can require the nurse to reach and stretch in unusual positions. The subsequent effects on nursing care include a reduction of the short supply of nurses due to back injuries, which may cause an increased risk for the few nurses left working.

d) Describe how the "safe patient handling" legislation might have prevented the injury.

The safe patient handling legislation might have prevented the injury as this would train the nurses and give them a chance to learn how to use the equipment to provide safe transfers. It would also allow for the discussion of any revisions to improve the work environment.

2. Becky graduated from nursing school a year ago and since then, has worked on a neurology unit. Normally a happy and healthy person, Becky recently noticed that she always feels run down and is losing her hair. During the past year, she was told that her assessment skills were lacking because she missed an important finding on a patient while covering for another nurse. Her supervisor seemingly assigns her high-risk admits every time she works. Her co-workers complain that Becky always gets the lightest patient assignments and should take the admissions. Last week, she overheard another nurse saying, "Becky is almost useless. She spends so much time with her patients she can never help other nurses." Becky feels physically ill every time she goes to work. She wonders if these "tests" of her nursing skills will ever end.

a) What type of violence is Becky experiencing?

Becky is experiencing bullying as it is repeated, unwanted, or harmful actions that are intended to humiliate, offend, or cause distress to Becky.

b) Which of the signs of bullying from Table 25-1 is (are) evidenced in this scenario?

The signs of bullying evidenced in this scenario include being left out of office culture, such as chitchat, being asked to do new tasks or tasks outside of your typical duties without training or help even when requested, seeming like your work is frequently monitored, to the point where you have doubt in yourself and have difficulty with regular tasks, and being asked to do difficult or seemingly pointless tasks and be ridiculed or criticized when you can't get them done.

c) What steps can Becky take to minimize bullying in the workplace?

Becky can minimize bullying in the workplace by going to her supervisor and discussing her concerns, along with having a discussion with her co-workers. She can explain how she is feeling and ask questions as to why they feel the way they do and try to figure out a solution.

d) What can Becky do if her supervisor brushes off her concerns?

If Becky's supervisor brushes off her concerns, she has a couple options which include saying that you are being bullied to validate your experience, seek respite, which includes taking time off to check your mental and physical health, research state and federal legal options, gather data regarding the economic impact the bully has had on your unit, and start a job search for a new position because it will give more options as the current situation is addressed. She can also expose the bully, which gives the employer a chance to address the situation.

3. Amanda is caring for an 82-year-old patient with a fractured hip and dementia. In the shift report, she learns that the patient becomes agitated and combative at night. During her evening shift assessment, Amanda notes that the patient does not know where she is or why Amanda is in her room. Amanda remembers her hospital training on dealing with agitated patients by using soothing tones when addressing the patient and ensuring a calm environment. During assessment, the patient yells that Amanda is killing her. She begins swinging at Amanda with the telephone, breaking her jaw. Amanda runs out of the room, and her co-worker calls a "Code White."

a. What is a Code White, and how would it help in this situation?

A Code White is a code that alerts all staff of a potentially violent situation. This would be helpful in this situation as the patient is becoming increasingly violent and trained volunteers' other staff such as hospital security to ensure that the situation was deescalated, and that Amanda would not be alone with this patient.

b. Identify elements of this case that signal a potentially threatening situation.

Elements of this case that signal a potential threatening situation include a patient with dementia that becomes agitated and combative at night, along with belongings in reach that could cause harm to the nurse or patient if used as a weapon.

c. What preventive measures does the facility have in place to deal with hostile situations?

The preventative measures that the facility has in place to deal with hostile situations includes the Code White, a crisis intervention program, which taught nurses and other hospital staff how to recognize signs of escalating anger that could result in a violent attack and strategies to deescalate the situation, and nurses were also taught how to protect themselves during an attack.

d. If Amanda were floated to another floor where this situation occurred, would this change how she should approach the situation? Explain your answer.

If Amanda were floated to another floor, this would not change how she should approach the situation as she approached it in the way she was trained to and the Code White should still be in place in case the situation was to reoccur. Amanda would just need to make sure the policies are handled the same on that floor.

4. In reviewing available hospital employment, you identify three potential positions as a staff nurse in orthopedics. Because orthopedics is where you would like to work, you evaluate each of the positions:
- Position 1: A regional medical center, with a nurse to patient ratio of 5:1. Total patient care is expected of all nurses, and there is only one nursing assistant assigned to each unit. The hospital recently purchased safe handling equipment for every unit.
 - Position 2: An urban hospital with a nurse to patient ratio of 9:1. There is one nursing assistant assigned to every nurse. The hospital has new patient handling equipment, although it is shared between two units.
 - Position 3: a local hospital with a nurse to patient ratio 7:1. There is one nursing assistant for every nine patients. The hospital is moving toward Magnet status and uses a shared governance model.
- a) Explore each position in relation to your safety as a nurse. What are the benefits and detriments of each position?**

Position 1: Benefits of position 1 include the nurse-to-patient ratio and the availability of safe handling equipment. Detriments include only having one nursing assistant assigned to each unit.

Position 2: Benefits of position 2 include having one nursing assistant assigned to every nurse and having new patient handling equipment. The detriments include the nurse-to-patient ratio and having to share the equipment between 2 units.

Position 3: Benefits of position 3 include the hospital moving towards Magnet status and a shared governance model. Detriments include the patient ratio and the nursing assistant ratio.

b) Which position provides the safest working environment? Explain your response?

I feel that the third position provides the safest working environment as there is a nursing assistant that is assigned to the majority of the patients and the Magnet status is beneficial. The shared governance model is also beneficial as those working in the hospital can come up with policies that make the work environment helpful to them.

c) What additional questions should be asked in relation to staffing?

Additional questions that should be asked in related to staffing include questions on the amount of staff and if it is short staffed at all.

d) The hospital in position 3 is described as working towards Magnet status. What impact might this have on your decision to accept or turn down an employment offer?

Magnet status is known as a hospital where patients can find satisfied nurses and can expect to receive a higher level of care. This would impact my decision in a positive way and influence my decision as I want to work for a reputable hospital.