

Unit 6: Workplace Issues
Z-Chapter 25
ONLINE CONTENT (1 H)

Case Studies

Due March 11, 2024 @ 0800 in the Z-CH # 25 dropbox

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 asked for help before moving the patient. She should have then used proper body mechanics and using the correct assistive device for that patient.
 - b) What did Angie do correctly in this situation?

In this situation Angie saw that her patient was half out of bed and immediately knew that she had to help the patient get back into bed. Before she had the patient, she knew it would be important to review the information on transferring and positioning that patient.
 - c) Explain why back problems are the number-one cause of nurse injuries and describe the subsequent effects on nursing care.

Back injuries can result from lifting, repositioning, and transferring, it is also associated with the placement of furniture, monitors, and equipment which require the nurse to reach and stretch. Back injuries reduce the supply of nurses and then there are fewer nurses which increase the risk for back related injuries and other musculoskeletal injuries.
 - d) Describe how the "safe patient handling" legislation might have prevented the injury.

It would establish a standard on safe patient handling, mobility, and injury prevention to keep healthcare workers safe.

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 lateral violence.

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

a. Left out of office culture

b. Seems like your work is frequently being monitored to the point where you doubt yourself

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

a. Name it – to validate it for your own sense of self

b. Seek respite – check mental health, check your 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

c. Expose the bully – for your mental and physical health you need to consider giving employer an opportunity to address the situation

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

Becky can move up the chain of command and seek help from a person in a higher position.

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 person with violent or aggressive behavior and calling this code would bring other healthcare workers to help contain the aggressive person and to help the person that is caring for that patient at the time the code was called.

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

In report the nurse was told that the patient becomes combative and agitated at night so it would be a good idea to go in with another person for safety, The patient has dementia and does not understand what is going on, the patient started swinging at her with the phone and the nurse was hit

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

Verbal communication that is clear and calm, non-threatening mjbody language, respect the patient, use assessment tools to detect possible situations early on.

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

I think Amanda would have been more cautious going into the situation because it is a unit she is not necessary familiar with and would be more willing to ask for help or another person to be with her while she was in the room.

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 – you would have a lower nurse to patient ratio so you could be safer and focus on the patients you have. There is only one assistant on the floor meaning you likely would have to do all the patient care and would rarely get help from them. Each unit has safe handling equipment readily available.

Position 2 – The nurse ratio is much higher meaning you will not get as much time with each patient and have to do a lot of interventions at once making it easy to forget something or get patients mixed up. Each nurse has an assistant to help out which will help with the patient load but there is only so much they are allowed to do. New patient handling equipment is available but shared between two units which could cause issues and lots of waiting.

Position 3 – A patient ratio between the other two positions but a nursing assistant to every 9 patients to help out when needed and making it easier to delegate. With it being magnet status, it would empower the nurse to improve the quality of patient care and better patient outcomes.

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

I think that position 1 would be the safest because there is a lower patient ratio meaning you could put more focus on each patient, There is new safety equipment that is specific for that unit meaning what is needed should be available and less of a wait time if it is in use.

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

Is there anyone that is able to come in when it is necessary to help the workload and keep a safer environment? How long is orientation? What is

the frequency of floating nurses? What is the turnover rate and average length of stay? Is there mandated overtime?

- 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 facilities are known for their high standards and excellent nursing care. You may lose independence and flexibility in practice and need to make sure to do everything following the policies.

In order to receive full credit (1 H class time) for this assignment, it must be completed in its entirety by the due date/time assigned. Any assignments not completed in its entirety by the assigned due date and time will result in missed class time.