

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

Unit Objectives:

- Determine your risk for encountering a workplace issue that can affect your health or well-being. (1,7)*
- Understand ergonomics and ways to protect yourself from workplace injuries. (5,7)*
- Analyze workplace bullying and harassment. (3,5)*
- Recognize the risk for violence at work and how to reduce your risk. (2,5,7)*
- Create a personal plan to handle workplace problems such as staffing shortages and being assigned to an unfamiliar workplace. (3,7)*

*Course Objectives

Case Studies

Review chapter 25 and place your answers to the following questions in the Z-Chapter 25 dropbox by 0800 on 3/10/2025.

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 grabbed an assistive device to use that should've already been in the room as in a gait belt, or even mechanical lift. She should've called for assistance, given the patient's weakness she knew of she should've called someone for her immediately. She should've used a proper technique like using her legs to lift instead of her back if that is what she didn't do
 - b) **What did Angie do correctly in this situation?**

Angie did prioritize the patient safety as well by rushing to prevent a fall from occurring when she realized the patient was out of bed. She also reviewed her notes prior on how to handle patients with weakness, so she was familiarized with what to do.
 - 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 injury because we lift and repositions repetitively, every day. Some nurses also do not use proper lifting techniques or equipment. Some effects on nursing care are short

staffing which leads to increase workloads and less help, increased turnover rates and reduced quality of patient care.

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

Legislation mandates hospitals to provide mechanical lifts, gait belts and other assistive devices. They also require nurses to receive regular training on safe patient handling techniques. They also encourage reporting of unsafe conditions and implementing policies that prioritize nurse well-being.

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, which is violence directed to an individual by another individual who is considered a colleague or equal in terms of job scope. This type of violence is like bullying.

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

It may seem like your work is frequently monitored, to the point where you begin to doubt yourself and have difficulty with your regular tasks. (She was told that her assessment skills were lacking because she missed an important finding on a patient while covering for another nurse. she overheard another nurse saying, “Becky is almost useless. She spends so much time with her patients she can never help other nurses. “)

You might be asked to do difficult or seemingly pointless tasks and be ridiculed or criticized when you can’t get them done. (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.)

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

Becky can start to write down the incidents and keep a record of them and even report the workplace harassment going on, she could try to address these situations directly by talking to her coworkers and she can also seek emotional support to help her.

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

Becky can report the issue to higher up management so something can be done, she can consider legal options if the bullying becomes harassment, and she could also look for other job opportunities to try and get in a better environment.

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 alerts all staff of a potentially violent person or situation. It calls a specialized response team to de-escalate a situation safely. In Amanda's situation they code white is called to provide immediate assistance to remove Amanda from the danger, try and control the patient and de-escalate the situation.

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

There are several elements to this situation to signal that there is a potential threat. The patient is confused and has dementia which can cause agitation, fear, and aggression. The night shift nurse had already reported that she has been agitated and combative during the night.

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

They have code whites in place to ensure a rapid response by trained volunteers and other staff from the hospital. They also have medication and restraint protocols in place.

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

Some protocols may vary depending on the unit, but Amanda's approach should remain the same focusing on the safety. When she gets to the different unit she should ask for unit-specific policies on handling aggressive patients, communicate

with other staff to identify high-risk patients and be extra vigilant since she will be in an unfamiliar with the patient's history or triggers.

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?

Benefits:

Position 1- Lower nurse-to-patient Ratio (5:1), safe handling equipment on every Unit

Position 2- One nursing assistant per nurse, new safe handling equipment available even though it is shared, urban hospital setting, diverse patient population

Position 3- Magnet status in progress, shared governance model, moderate nurse-to-patient ratio (7:1)

Detriments:

Position 1: Limited nursing assistant support, total patient care model and possibly limited career advancement

Position 2- High nurse-to-patient ratio (9:1), shared safe handling equipment, fast-paced, high-stress environment, increased physical and emotional strain

Position 3- Increased workload, limited nursing assistant support, magnet status not yet achieved, actual staffing improvements may take time

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

Among the three options think position 1 offers the safest working conditions for nurses because of the lower nurse-to-patient Ratio (5:1) because a manageable patient load allows nurses to provide thorough assessments, proper patient care, and reduces stress and fatigue. They also have safe

handling equipment on every unit which means they always have access to lifting and transfer devices, which significantly reduces injury risks. There's a better chance of reduction in errors. With more time per patient, nurses can provide safer, higher-quality care, reducing medication errors, patient falls, and missed assessments.

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

How often are assignments adjusted based on patient needs? What tasks are NAs responsible for, and how are duties divided between nurses and assistants? Are there float nurses, charge nurses without patient assignments, or resource nurses available to assist? What are the typical shift lengths (8, 10, or 12 hours)?

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?

This would help me accept the position because hospitals working toward magnet status are actively improving nurse support, patient outcomes, and workplace culture.

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.