

## WORKPLACE ISSUES: Z-CH 25

### Case Studies

#### Crystal Ingersoll

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 needed to use good body mechanics when transferring and positioning patients. She should have asked for assistance if she was unsure.*
  - b) What did Angie do correctly in this situation? *She reviewed her notes, researched her patient and rushed to aid when things went south.*
  - c) Explain why back problems are the number-one cause of nurse injuries and describe the subsequent effects on nursing care. *Nurses have a tendency to care more for their patient welfare and not their own. Often at the time of emergency the reaction to help the patient is overwhelming and the thought is to only help the patient not the self.*
  - d) Describe how the "safe patient handling" legislation might have prevented the injury. *To reduce risk of injury several steps should be adhered to such as: assess patient dependency, have what assistive devices are needed, the nurse could benefit from doing yoga or pilates to limber and strengthen her muscles, and to report any injuries to patient and staff immediately.*

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? *This is a type of horizontal violence.*
- b) Which of the signs of bullying from Table 25-1 is (are) evidenced in this scenario? *Feeling as if you are going to throw up the night before work, she feels constantly agitated and anxious at work and at home, waiting for bad things to happen.*
- c) What steps can Becky take to minimize bullying in the workplace? *Name it, seek it and expose the bully.*
- d) What can Becky do if her supervisor brushes off her concerns? *She needs to seek out human resources or her boss's boss.*

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? [This is called for a combative patient in the hospital setting.](#)
  - b. Identify elements of this case that signal a potentially threatening situation. [Pacing, using foul language, raising one's fist or using threats.](#)
  - c. What preventive measures does the facility have in place to deal with hostile situations? [Preventative measures would include having another staff assist with care, calling the code before that violence starts, and understanding the patients triggers.](#)
  - d. If Amanda were floated to another floor where this situation occurred, would this change how she should approach the situation? Explain your answer. [Yes, she would use more caution by having staff available to help her.](#)

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? *Staffing in situation 1 seems the most ideal, by having the equipment needed for each unit, a nurse for 5 patients and nursing assistant for unit. In urban hospital this doesn't see appropriate with care to be one nurse and nursing assistant for 9 patients and the equipment is shared on units. The 3<sup>rd</sup> position is still not as ideal as the 5 patient ratio even with the nursing assistant and the magnet hospital goal.*
  - b) Which position provides the safest working environment? Explain your response? *I feel the first position is the safest. When you have lower patient ratios and equipment that is readily available on your own unit this elevates stress and concern so focus can be on the patient.*
  - c) What additional questions should be asked in relation to staffing? *What expectations are put on the staff - hours, shifts, if all departments have the same hours, such as pharmacy, respiratory, xray, ect.*
  - 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? A Magnet hospital is to help retain and keep nurses. This would have some sway in a decision but ultimately it would come down to the safest practice.