

CHAPTER 25

Work Place Issues



Workplace Issues: How Safe Are You?

- Determine your risk of encountering a workplace issue that can affect your health or well-being.
- Understand ergonomics and ways to safeguard your musculoskeletal system.
- Strategize ways to recognize errors and minimize further harm or injury.
- Know the risk of exposure to hazardous substances.

WORKPLACE ISSUES: HOW SAFE ARE YOU?

- Understand the risk for violence at work and how to reduce your risk.
- Analyze workplace bullying and harassment.
- Create a personal plan to deal with workplace problems such as staffing shortages and being assigned (floating) to an unfamiliar workplace.
- Identify useful Internet sites to remain up-to-date with potential workplace issues (e.g., OSHA, CDC, ANA).

Questions to Ask When Starting a New Position

- Latex-free facility?
- Ergonomic devices available?
- Any lifting, pulling, using computers?
- Antiviolence program?
- Needleless facility?
- Exposure policy?
- Workmen's compensation program?
 - When can I return to work? Restrictions?
- Bioterrorism plans?
- TB, influenza prevention plans?

QUESTIONS TO ASK WHEN STARTING A NEW POSITION

- Adherence to OSHA regulations and CDC guidelines?
- Who is the Safety Officer?
- Emergency response plan?
- Is the parking lot safe?
- Vaccination programs?
- Surveillance plan for multidrug-resistant organisms?

Does your facility implement principles of ergonomics?

A. Always

B. Sometimes

C. Never

D. Not sure

ERGONOMIC HAZARDS FOR HEALTH CARE WORKERS

- Major safety concern.
- Nurses at risk for musculoskeletal injuries—most common type.
 - Back
- 90% of the nurses complain of back pain.

ERGONOMIC HAZARDS FOR HEALTH CARE WORKERS

- Risks related to back injury
 - Repetitive tasks
 - Heavy lifting or moving done manually
 - Any lifting, transferring, repositioning, and reaching activities
 - Sudden position changes
 - Rooms not set up ergonomically
- Proper body mechanics do not result in fewer injuries—there is ***no safe way to manually lift patients!***

ERGONOMIC HAZARDS FOR HEALTH CARE WORKERS

- Reduce the risk of serious back injury.
 - Assess the patient's dependency needs and abilities.
 - Decide appropriate assistive devices needed, and use them correctly.
 - Keep yourself fit.
 - Join a yoga or Pilates program.
 - Stretch or perform warm-up exercises prior to start of shift.
 - Report any injury.

ERGONOMIC HAZARDS FOR HEALTH CARE WORKERS

- Ergonomic workstations
 - In developing these workstations, consider the task, posture, and work activities.
 - Workstation components.
 - Chair, desk, placement of computer, keyboard, monitor
 - Chair: Ensure proper padding and lumbar support
 - Desk: Large enough for CPU and writing
 - Monitor, keyboard, and mouse
 - Monitor height should be 18 to 22 in above desk surface
 - Keyboard aligned to center of user's body
 - Mouse placed on side of dominant hand



ERGONOMIC HAZARDS FOR HEALTH CARE WORKERS

- Repetitive motion disorders (RMD)
 - Associated with users who work for long periods at poorly arranged and constructed workstations
 - Possible solutions to reduce risk of RMD
 - Use ergonomically designed computers, desks, chairs, and workstations.
 - Learn and use proper body alignment strategies.
 - Switch between sitting and standing positions often.
 - Perform stretching exercises that focus on the neck, shoulders, back, arms, and fingers.

WORKPLACE VIOLENCE: A GROWING CONCERN IN HEALTH CARE

- Violence—intentional use of physical force with likelihood of causing injury or death.
 - Coworkers
 - Patients
 - Families
 - Visitors
- Studies report that at least 80% of nurses have experienced some type of workplace violence in their career.

What type of “code” would the nurse initiate if a person became combative in a hospital setting?

- A. Code blue
- B. Code pink
- C. Code green
- D. Code white
- E. Code yellow

WORKPLACE VIOLENCE

- Crisis intervention programs
 - Recognize signs of escalating anger.
 - Strategies to de-escalate situation.
- Code white
 - Signals a potentially violent situation.
 - Used to summon trained personnel.
 - The goal is to de-escalate the situation.

Workplace Violence

- *Horizontal violence* (bullying)—a systematic mistreatment of an individual by a perpetrator (can be verbal, behavioral, or sabotage).
- Not a single event—occurs over time.
- Can occur in any workplace setting.
- The target may experience psychological and physiological signs and symptoms.
 - Chest pain, anxiety, headaches, vomiting, abdominal pain

Workplace Violence

- If you are the violence
 - First of all, **Name It**—this is a target of horizontal violence that your experience is not your fault.
 - **Seek Respite**—“Bully proof” yourself.
 - **Expose the Bully**—address the situation with your employer.

OTHER WORKPLACE ISSUES

- Latex allergies
- SARS
- HIV
- TB exposure
- Needlestick injuries

DEALING WITH STAFFING SHORTAGES

- Nurses have many options for employment and will look for the best offer, which may include these features.
 - Higher salaries, benefits, sign-on bonuses, and tuition repayment—these “extras” are very attractive to new graduates.
 - Nursing autonomy, low nurse-to-patient ratios, and collaborative relationships.
 - A facility that has attained Magnet status.

COPING WITH MORE PATIENTS AND HIGHER NEEDS FOR NURSING

- Know to whom you should report your concerns.
- Remain calm; use assessment skills.
 - Number of patients; what's going on with them; nursing tasks needed; priorities?
 - Available resources; anyone to delegate to; any family support?
 - Any colleagues available to help?
 - Another way to deliver care?
 - Policies for high census/patient loads?
- Document concerns.

MANDATORY OVERTIME

- Creates loss of control for nurses.
- Puts safe patient care at risk.
- Fatigue jeopardizes safety.
- Legislation opposed to mandatory overtime an ANA priority.

The state you are working in does not prohibit mandatory overtime. You have been notified by your nursing supervisor that several nurses called in sick for the night shift and that you will need to stay to help the staff on the night shift. What do you do?

- A. Tell the nursing supervisor that you cannot stay.
- B. Stay to help the night shift until they are caught up.
- C. Stay but tell the supervisor that you will need to leave by a certain time.
- D. Put in your resignation notice and leave after your shift.

MANDATORY OVERTIME

- Possible creative solutions to prevent it
 - On-call system
 - Policies limiting mandatory overtime and ensuring rotation
 - Giving incentives to encourage the part-time staff to pick extra shifts
 - Developing creative shifts for high activity
 - Identifying the shortages early
 - Rewarding the nurses for extra effort

FLOATING—WHAT DO I DO NOW?

- Ethical issue is that if you are not on your assigned unit, there will be a disproportionately high number of patients to nurses, which increases errors, or there is the risk of having a less skilled nurse on a unit, which can also lead to problem.
- Studies have not demonstrated that the risk of a less skilled nurse has really contributed to patient harm; studies of nursing workload have indicated that the greater the workload, the greater the risk for harm to patients (Kane-Urrabazo, 2006).

MAKING A MISTAKE—WHAT DO I DO NOW?

- In the IOM report on errors in health care, 44,000 to 98,000 people die every year from errors (IOM, 2006).
- Report the medical error per facility policy.

As a new nurse, what workplace issue are you most concerned or worried about?

- A. Floating to an unfamiliar area of the hospital
- B. Mandatory overtime
- C. Horizontal violence
- D. Sexual harassment
- E. Needlestick injuries