

Hospital Room of Horrors Assignment

Learning Objectives and Outcomes		
Area	Objective	Course Student Learning Outcome (CSLO'S)
Knowledge	Identify actual and potential safety risks at patient bedside environment.	CSLO 1, 2
Skills	Create safe patient bedside environment. Adhere to safety protocols. Implement standards of care for patient safety.	CSLO 5
Attitudes	Value own role in preventing injury/illness	CSLO 3

Instructions:

Silently review the patient environment and the scenario presented. You may walk around the bed and look at the patient, medication list, equipment, etc. You will have 15 minutes to complete this task. Identify as many safety risks in the patient environment as you can and document on this sheet within this chart. In the chart you will identify the safety risks, causes, prioritize them in order of greatest safety risk to minor safety risk, list the responsible party (delegation), and if you need to report the safety risk to another healthcare member. There will be an answer key and discussion when instructed by your instructor. Utilize critical reasoning skills to discuss potential risks that may not be as obvious as actual risks.

Safety Risk	Causes	Priority	Responsible Party (delegation)	Do you need to report to a member of the healthcare team (inter-professional collaboration)
Food tray (client is NPO)	Not following NPO order.	High risk, aspiration	Nurse/assistive personnel	Yes, if the client has eaten.
NG tubing left on bedding, unsecured.	Failure of medical personnel to secure tubing after placement.	High, risk of infection and risk of pulling out NG tube, or aspiration.	Nurse to resecure it.	No
Sharps left out	Negligence to dispose	High risk, needle stick.	Nurse	No, put in sharps
Bed left in high position	Left up post procedure.	Moderate, increases fall risk	Nurse/assistive personnel.	No
Soiled/bloody material left out.	Failure to dispose of soiled pads.	Moderate, risk of infection.	Nurse or Unlicensed assistive personnel	No, just clean it up.
I&Os not properly documented	Failure to properly chart.	Moderate risk, FVO or FVD depending on	Nurse/unlicensed personnel	Yes, inform the provider.

		client conditions		
Empty IV bag secured to client.	Failure to discontinue upon completion.	Moderate risk, could cause an air embolism/infection.	Nurse	No, unless air embolism is suspected, rapid response.
Medications left out	Failure to dispose after use.	Moderate, could lead to drug misuse.	Nurse	Yes, may indicate an incident report if medications are missing/misplaced.
Wash basin/bed bath on the floor	Neglect to properly store supplies.	Moderate, tripping hazard	Assistive personnel/nurse	No
Call light on floor	Neglect to properly secure.	Moderate, tripping hazard	Assistive personnel/nurse	No
Stethoscopes draped on hand sanitizer.	Improper storage	Minor, unsanitary and looks unprofessional.	Assistive personnel/ nurse	No

Reflective Activity

What are the major take-home lessons for you today?

Client care can be very messy. Being vigilant in cleaning up after medical interventions helps to prevent better client health and safety. It also helps to promote a more professional healthcare environment and better client outcomes.

How did this experience change your view of preventing risks?

To mitigate the amount of risks to client care nurses/assistive personnel should clean up after all procedures, reduce clutter, and ensure that all orders are being properly followed as prescribed by the provider.

Shawn Weber

(Grading Criteria)

Points	If...
5	The student found all 10 actual safety risks in addition to identifying potential safety risks in the patient environment.
4	The student found all 10 actual safety risks but did not identify any potential safety risks in the patient environment.

3	The student found 7-9 actual safety risks and/or potential safety risks in the patient environment.
2	The student found 4-6 actual safety risks and/or potential safety risks in the patient environment.
1	The student found 1-3 actual safety risks and/or potential safety risks in the patient environment.
0	The student did not find any safety risks in the patient environment.

Prioritization/Delegation/Communication Chart

__ Points out of 5 Total

Reflective Essay

__ Points out of 5 Total

Debriefing

Did student actively participate in debriefing by reflecting and discussing experience?

Yes: 5 points

No: 0 points

TOTAL POINTS

20 _____

Hospital Room of Horrors: Post Exercise Evaluation (Likert scale 1-5, least to most)

- 1) I feel prepared to diligently watch for patient's safety and quality of care.
 1 2 3 4 **5**

2) I have improved in my ability to synthesize nursing theory and content to the clinical setting as a result of the "Safety Day Simulation" exercise.

1 2 3 4 5

3) Debriefing with faculty provided an opportunity to self-reflect, which improved my knowledge, skills, and attitude/confidence.

1 2 3 4 5

4) Faculty was prepared and facilitated enhanced learning during the debriefing period

1 2 3 4 5

5) I recommend the continuation of "Safety Day Simulation" and feel it is a valued learning experience.

1 2 3 4 5

Suggestions:

I enjoyed this learning activity because it was hands on, and it required some critical thinking.
