Hospital Room of Horrors Assignment

Learning Objectives and Outcomes		
Area	**Objective**	**Course Student Learning Outcome (CSLOs), BSN Essentials, NCLEX & QSEN**
Knowledge	Identify actual and potential safety risks at client bedside environment.	CSLO 1. Demonstrate evidence-based clinical judgment to provide safe, patient-centered care for adults with a variety of complex acute and chronic health problems. 2. Apply pathophysiology to prioritize safe, evidence-based nursing care to patients with complex acute and chronic health conditions. BSN Essentials Domain 1: Knowledge for Nursing Practice • 1.3a Demonstrate clinical reasoning. Domain 5: Quality and Safety • 5.2a Describe the factors that create a culture of safety. Domain 8: Informatics and Healthcare Technologies • 8.3e Identify impact of information and communication technology on quality and safety of care. NCLEX Safety and Infection Control • Educate client on safety issues • Idenitfy deficits that may impede client safety

		<u>QSEN</u>
		Patient-Centered Care
		  • Examine how the safety, quality, and cost effectiveness of health care can be improved through the active involvement of patients in their own health care processes
		Teamwork and Collaboration
		  • Describe examples of the impact of team functioning on safety and quality of care
		Safety
		  • Examine human factors and other basic safety design principles as well as commonly used unsafe practices (such as, work-arounds and dangerous abbreviations)
		  • Describe factors that create a culture of safety (such as, open communication strategies and organizational error reporting systems)
		  • Discuss potential and actual impact of national patient safety resources, initiatives and regulations
		Informatics
		  • Contrast benefits and limitations of different communication technologies and their impact on safety and quality

Skills	Create safe client bedside environment. Adhere to safety protocols. Implement standards of care for client safety.	<u>CSLO</u> 5. Perform advanced nursing psychomotor skills for safe, quality patient care.

		BSN Essentials
		Domain 2: Person-Centered Care
		• 2.4b Create a list of problems/health concerns.
		• 2.4c Prioritize problems/health concerns.
		• 2.5c Delegate appropriately to team members.
		Domain 5: Quality and Safety
		• 5.1 Recognize nursing's essential role in improving healthcare quality and safety.
		• 5.2b Articulate the nurse's role within an interprofessional team in promoting safety and preventing errors and near misses.
		• 5.2c Examine basic safety design principles to reduce risk of harm.
		• 5.2f Use national patient safety resources, initiatives, and regulations at the point of care.
		Domain 6: Interprofessional Partnerships
		• 6.2b Delegate work to team members based on their roles and competency.
		Domain 8: Informatics and Healthcare Technologies
		• 8.3b Evaluate how decision support tools impact clinical judgment and safe patient care.
		NCLEX
		Safety and Infection Control
		• Protect client from injury (e.g., falls, electrical hazards)
		• Report unsafe practice of health care personnel and

		intervene as appropriate • Facilitate appropriate and safe use of equipment QSEN Safety • Demonstrate effective use of strategies to reduce risk of harm to self or others • Use national patient safety resources for own professional development and to focus attention on safety in care settings
Attitudes	Value own role in preventing injury/illness.	CSLO 4. Differentiate the nursing role in delegation and supervision of care of the adult patient. BSN Essentials Domain 5: Quality and Safety • 5.2d Assume accountability for reporting unsafe conditions, near misses, and errors to reduce harm. Domain 9: Professionalism • 9.1b Reflect on one's actions and their consequences. NCLEX Safety and Infection Control • Acknowledge and document practice errors and near misses (e.g., incident report for medication error) QSEN Teamwork and Collaboration • Appreciate importance of intra- and inter-professional collaboration Safety

			Value the contributions of standardization/reliability to safety
			Value own role in preventing errors

Instructions:

1. Silently and independently review the client environment and the scenario presented. You may walk around the bed and look at the client, medication list, equipment, etc. You will have 15 minutes to complete this task.

2. Identify as many safety risks in the client environment as you can and document these safety risks in the chart below.

3. In the chart you will identify the safety risks, potential harm the risk could cause, prioritize the safety risks 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 (interprofessional collaboration).

4. There will be an answer key and debriefing discussion at the end of the simulation. During this debriefing, you are encouraged to utilize critical reasoning skills to discuss potential risks that may not be as obvious as actual risks.

Safety Risk	Potential Harm	Prioritization	Responsible Party (Delegation)	Reporting Required (Interprofessional Collaboration)

Open medication on the table	Child could swallow the medication	8	Nurse	Charge Nurse
Needle on the table	Anyone could get a needle stick	7	Nurse	Charge Nurse
Bed on high position	The patient is a fall risk and could fall when trying to get out of bed	9	Nurse/Tech	N/A
Bed rails not up	The patient is a fall risk and could fall out of bed	10	Nurse/Tech	N/A
Opaque tape on the IV	It makes it hard to assess the IV site for infiltration or phlebitis	11	Nurse	N/A
Suction tube across the patient's neck	Creates a strangulation hazard from the patient getting tangled up	2	Nurse	N/A
Wrist band name doesn't match the one on the board	The staff doesn't know if this is the correct patient	5	Nurse/Charge Nurse	Charge Nurse
Allergy band doesn't match the board	The staff isn't aware if the patient has an allergy or not	6	Nurse/Charge Nurse	Charge Nurse
Catheter bag isn't below the level of the patient's bladder	This prevents the flow of the urine out of the bladder	3	Nurse	N/A
Catheter is not secured to the leg	The patient could pull the catheter out more easily	4	Nurse	N/A
No call light near the patient	The patient is unable to contact someone if they need help	12	Nurse/Tech	N/A
Tracheostomy collar is not secured	The tracheostomy tube could come out and the patient could aspirate	1	Nurse	Charge Nurse

Reflective Activity

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

It's important to always take inventory of the room and look for any dangers that were overlooked. Nurses should always check if the patient's band matches who they say they are, and the white board is up to date so that communication is clear with staff.

How did this experience change your view of preventing risks?

It's easy to over-look dangers when you're busy but it's important to take the time to ensure all risks/dangers are accounted for. This is the first line of preventing injuries to the patient.

(Grading Criteria)

Points	If…
5	The student found all 10 actual safety risks in addition to identifying potential safety risks in the client environment.
4	The student found all 10 actual safety risks but did not identify any potential safety risks in the client environment.
3	The student found 7-9 actual safety risks and/or potential safety risks in the client environment.
2	The student found 4-6 actual safety risks and/or potential safety risks in the client environment.
1	The student found 1-3 actual safety risks and/or potential safety risks in the client environment.
0	The student did not find any safety risks in the client 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: O 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 client'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:

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