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

		QSEN
		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.	CSLO 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)

Oxygen and IV wrapped around the neck.	Having the oxygen and IV wrapped around the patient's neck could cause an obstructed airway and impair the patient's oxygen saturation.	1st priority	The Nurse The Technician	The Provider The Charge Nurse
Oxygen is not attached.	The patient is not receiving the oxygen that was ordered, and therefore, the patient's oxygen saturation will not improve and will likely decrease.	2nd priority	The Nurse	The Provider The Charge Nurse
The wristband did not match the whiteboard.	This could result in the patient receiving the wrong treatment plan.	10th priority	The Nurse Registration	Registration The Charge Nurse
Seizure precautions are not implemented (the bed is in the highest position, no bumpers or pads, suction is not available)	The patient is at risk of harming themselves during a seizure by falling. The patient is also at risk of aspirating emesis, blood, or saliva.	3rd priority	The Nurse The Provider The Technician	The provider The Charge Nurse
Uncapped needle	This could result in the patient accidentally harming themselves or possibly harming another person.	5th priority	The Nurse	The Charge Nurse
Unattended medication	The patient is at risk for overdose.	6th priority	The Nurse	The Charge Nurse Risk Management The Provider
Open ostomy bags	If the patient's colostomy bag is not closed, then the patient's fecal matter will spill out of the	7th priority	The Nurse The Technician The Patient (The	The Charge Nurse The Provider

	bag and can cause impaired skin integrity		patient may not be re-educated on how to close the ostomy bag.)	
The food tray is present; however, the client is NPO.	The patient is at risk for aspiration.	9th priority	The Nurse

The Medical Technician

The CNA

The Dietitian | The Charge Nurse

Dietitian Management |
| poorly dressed wound | The patient is at risk for infection. | 4th priority | The Nurse | The Charge Nurse

Infection Prevention

The Provider |
| plastic wrapper in the bed | The patient is at risk for skin breakdown. | 12th priority | The Nurse | The Charge Nurse |
| IV pump is not running. | If the IV pump is not running, then the patient is not receiving any fluids or medications that the patient needs, and the patient's condition could get worse. | 8th priority | The Nurse | The Charge Nurse |
| Foley bag was on the floor | Leaving the foley bag on the floor puts the patient at risk of getting a catheter-associated urinary tract infection. | 11th priority | The Nurse

The Medical Technician

The CNA | The Charge Nurse |

Reflective Activity

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

The major take-home lesson for me is ensuring I am as organized as possible. I want to make sure that I am properly disposing of all trash and materials used. I want to ensure that I allocate enough time to administer medication so that I never put medications unattended in a patient's room. I want to make sure that I complete all parts of a task before moving to another so that I will not forget an important step, like making sure the patient's oxygen is hooked up properly. As a new nurse I may make a checklist so that I can check off all the steps until I am more experienced.

How did this experience change your view of preventing risks?

Through this experience, I found that preventing risk can be much more difficult in practice than in theory. When I went into the room, I thought to myself, how could anyone let any of these risks happen? I then thought about how staffing is an issue in the nursing profession. Maybe this nurse was busy and got pulled away. It made me think about how important it is to be organized in this profession. As a nurse, it is important to allocate your time wisely to what needs to be done during the shift. It is also important to become adaptable because each shift is not always going to go the way we want it to. However, our most important responsibility is our patient's safety. Nurses need to be comfortable delegating tasks to unlicensed assistive personnel and licensed medical assistants. Therefore, nurses need to know which tasks can be delegated, and the nurse must ensure that the delegate is qualified to do said task. The nurse also must remember to get a report for the delegatee and make sure everything went smoothly.

(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

<u>Debriefing</u>

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: