

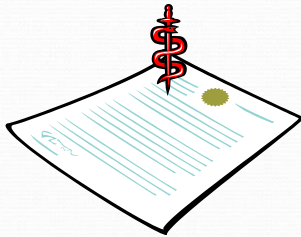


# Patient Sitter Required Education



## Patient Sitter Required Education

- All Nurses, Nursing Assistants, EMT's, ED liasons working in the inpatient and ED settings are required to complete this education packet






## Objectives

- After completion of this module, the learner will be able to:
- List standard sitter responsibilities with all patients.
- Describe safety guidelines specific to the environment of the patient on suicide precautions.
- Discuss fast facts regarding suicide.
- Implement care of the patient after discontinuation of suicide precautions.
- Delineate the procedure when scheduled as a sitter.



## GENERAL SITTER GUIDELINES

- Patients require a sitter for one or more of these reasons:
- Safety: To prevent a confused patient from falling or pulling out IVs or other tubes, etc.
- Suicide precautions: To prevent the patient from intentionally committing self harm.
- Patient is an involuntary commitment who has been identified by a physician order as a high risk patient requiring continual observation.



When serving as a patient sitter for ANY patient, all of the responsibilities listed below should be followed:

- Keep patient as the central focus: no cell phones used, no computer games, no calls, no texting.
- Respect patient's preferences related to age, gender, and culture.
- Follow standard infection control precautions. Must wear applicable personal protective equipment if patient requires isolation.



## Sitter Responsibilities

- Keep the patient within a safe distance at all times.
  - For non-violent patients, sit at the bedside, not in the doorway.
  - Stay on the side of the bed where the patient is most likely to exit.
  - If the patient is in the bathroom, the door to bathroom must remain open with the patient accessible.
- For violent or IVC patients who are high risk for leaving the facility, the sitter should sit outside the room or behind observation window



## Sitter Responsibilities

- You may not leave the patient at any time unless directed by the nurse.
- If the patient goes to a procedure, go with patient unless otherwise directed by the patient's nurse.
- If sitter orders are discontinued, all nursing personnel will call the Nursing Office to determine if reassignment is needed before leaving (7108).



## **GUIDELINES FOR PATIENTS ON SUICIDE PRECAUTIONS**

- Anytime a patient has suicidal ideation (ideas, thoughts, plans), the nurse initiates continual monitoring and notifies the physician immediately for emergency assessment and intervention.
- The nurse notifies the physician immediately for emergency assessment and intervention
- Nurse initiates continual monitoring based on physician order
- The physician will collaborate with staff concerning suicidal or self-harm potential for patient.



## GUIDELINES FOR PATIENTS ON SUICIDE PRECAUTIONS

- Communication between health care providers is essential. [Nursing staff will document the use of suicide precautions.](#)
- To maintain the patient's safety, a reassessment of the patient's suicidal thoughts and/or suicidal plan will be documented **EVERY SHIFT** in PCS while the patient is on suicide precautions.
- Behavior and/or mood changes should be observed for, and physician should be notified of any changes.
- The patient's behavior and response to interventions should be documented in the notes and/or plan of care.
- If a patient's safety cannot be maintained using these least restrictive measures, restraints should be used as a last resort to prevent self-harm.
- Additional safety checks will be documented per level of suicide precautions or as outlined in the physician order



## SITTER RESPONSIBILITIES


- NHSC employees are not eligible to sit with their family members on suicide precautions or constant observation IVC monitoring
- Keep the patient in your sight and within easy access at all times.
- All Nurses, NA's, PCT/EMTs, ED liaisons along with all are required to complete sitter education prior to sitting with a patient
- Sitters may be obtained through consultation with the Nursing Office or Security Office depending on specific order.





## **SITTER RESPONSIBILITIES**

- A sitter **MUST** stay with the patient even if visitors are allowed.
- In the case of involuntary commitment patients, visitors may only be permitted at designated unit-specific times.
- Sitters should remain with the patient at all times, obtaining relief for lunch and breaks from other staff members.



## **Guidelines in caring for a patient on Suicide Precautions or ordered on High Risk, involuntary commitment watch**

- 3) Keep the suicide patient in your sight and within your reach at all times.
  - When the patient goes to the bathroom, the door must be kept open (ajar).
  - If you walk with the patient, avoid elevators or stairwells as the patient may try to escape.
  - For violent or patients at high risk for elopement, sit outside the room or behind an observation window. For non-violent patients, it is better to sit at the side of the bed that the patient is most likely to exit.
- 4) Make sure all windows in the room are closed and locked.

## Guidelines in caring for a patient on Suicide Precautions or ordered on High Risk, involuntary commitment watch

- 5) Be aware that a suicidal or IVC patient can be very creative in using everyday items to harm themselves. Carefully watch all medical tubing (IV tubing, NG tubing, O<sub>2</sub> tubing), strings (balloon ties, shoe strings), cords (call bell, electrical, Venetian blind), clothing (belts, ties) or any item that could be twisted into a rope (linen, gowns).



## 6) Meal trays should be delivered with only styrofoam plates for the duration of the hospitalization.

- In addition, patient's who are listed as high risk for suicide or are ordered involuntary commitments, will be ordered strictly on "Finger Foods" to this will eliminate plastic utensils from the tray altogether. (An order set is used at the time of the IVC order.)
- Make sure all items are returned with the meal tray. Nursing is to communicate with Food and Nutrition Services via phone and computer order in the Special Modifications and/or Dietary Information drop down boxes.
- Patients will not receive paper menus and all snacks will be placed in plastic or styrofoam containers.
- Also, all drinks that are taken into the patient rooms will be poured into paper cups in the Nourishment rooms.
- Under no circumstances will any aluminum or tin cans for drinks or soups be taken into patients' rooms ordered under precautions or IVC.

7) **Make sure that the patient's area is kept free of any potentially harmful items. The sitter will search the patient's clothing, personal belongings, and room once a shift for the following items:**

- **SHARPS:** such as razors, knives, scissors, nail file, soft drink can "pop tabs" or any glass/ceramic/plastic item (it could be broken to form a sharp object)
- **Plastic Bags:** trash cans are NOT to be lined with plastic bags and no personal belongings may be left in a plastic bag. Trash cans will be left without a plastic bag OR if available, a trash can may be lined with a paper bag.
- **Ingestible Items:** such as mouthwash, shampoo, aftershave, cologne, perfumes, cleaning supplies.
- **Medication of any kind:** notify the RN immediately if any medications are seen.
- **Lighters or Matches**
- **Balloons**
- **Cords of any kind including equipment and telephones**
- **Shoelaces**
- **Belts**
- **If found, these items are removed and secured per valuables policy until patient discharge. If patient is an involuntary commitment being discharged to a psychiatric facility, belongings will be sent to the receiving facility and not ever given directly to the patient.**

**Guidelines in caring for a patient on Suicide Precautions or ordered on High Risk, involuntary commitment watch**

- 8) All bags or suitcases, including pocketbooks and wallets, brought to the patient **MUST BE** checked for potentially dangerous items. (refer to the valuables policy). Store suitcases and bags in locked storage on the unit. **All medications will be stored according to valuables policy and MAY NEVER be left in the patient's room**





## Guidelines in caring for a patient on Suicide Precautions or ordered on High Risk, involuntary commitment watch

- 10) Notify the RN or Charge RN if the patient expresses suicidal thoughts or if the patient's actions indicate immediate suicide potential. Examples of suicidal thoughts for example: "I don't want to live anymore"; "I think I will slit my wrists"; "I've been saving medications".
  - Report immediately any assertive, aggressive or restless behavior. Examples of assertive, aggressive or restless behavior for example: continually getting out of bed; rapid, repetitive motions; frequent cursing or verbal threats to self or others; frequent demands; or threats to leave the room or hospital.

## Guidelines in caring for a patient on Suicide Precautions or ordered on High Risk, involuntary commitment watch

- 11) If the patient has any physical or behavioral changes or you find yourself in a situation that makes you feel uncomfortable, **GET HELP IMMEDIATELY**. Security may be notified immediately as well. May initiate Code Orange by dialing 5000
- 12) Another staff member must relieve you before you leave the room for any reason.
- 13) If working as a sitter, this will be indicated on the unit's assignment sheets.
  - If working as a sitter on another unit/department, the employee will need to badge in, then sign the sitter log and notify their home unit/dept. of the unit/dept worked.



## **SUICIDE PRECAUTIONS:** **NURSING CARE OF THE PATIENT**

- When a physician evaluates the patient's need for suicidal precautions, an order should be written to communicate the level of observation necessary to ensure the patient's safety.
- The physician must make one of the following four recommendations:
  - **High** Risk (requires continual monitoring)
  - **Moderate** Risk (requires q 30 minute checks)
  - **Low** Risk (requires hourly checks)
  - **Discontinue** suicide or safety precautions



## **NURSING CARE OF THE PATIENT**

- The physician is the only person who may discontinue suicide precautions
- If staff observe any behavior indicating the patient is at a high risk for suicide or self harm, the staff member will remain with the patient under constant observation while alerting other staff or the MD via the nurse call system (or any other means without leaving the patient), to come and reevaluate the patient.



## **NURSING CARE OF THE PATIENT**

- Provide the crisis hotline number for behavioral healthcare services to suicidal risk patients on discharge. 1-888-235-4673 (1-888-235-HOPE), TTY (1-800-749-6099)




## Questions

1. When sitting with a patient, while the patient is in the bathroom, you may close the door to allow for privacy. True False
2. When sitting with a patient, you do not need to get a report. Go immediately to the bedside. True False
3. When sitting with a patient, you may watch TV with the patient but must consider their personal preferences. True False
4. When sitting with a patient on suicide precautions, you may go on a meal break if a family member is with the patient. True False
5. When sitting with a patient on suicide precautions, staff may use a computer to play games to pass the time. True False



## Questions

6. The difference between a suicide precaution patient and an involuntary commitment patient is that one can sign out against medical advice and one cannot. True False
7. When sitting with a patient on suicide precautions, you may go to the bathroom if the patient is asleep. True False
8. In ICU, when the video camera is used for close observation, a sign is required on the door letting all visitors and staff know that they are being audio-taped. True False
9. When sitting with a patient on suicide precautions, finger foods only should be ordered for the duration of the patient's hospitalization. True False
10. When sitting with a patient on suicide precautions, you must go through his/her belongings on admission, lock them up with two hospital employees as witnesses, listing all items. True False



Please sign the acknowledgement form  
that states you have read and  
understood this information

*Thank you*