

Nurses Improving Care for Healthsystem Elders

NICHE



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SITTER/CLOSE OBSERVATION POLICY

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PROBLEM: Inconsistent and/or inappropriate use of sitters; variable staff knowledge and skill level of sitters.

SOLUTION: Implement sitter/close observation policy, provide staff with education on the needs of cognitively impaired older adults.

Problem Identified Even though the Cape Breton District Health Authority was spending in the millions of dollars on sitters for patients at-risk for falls, delirium, wandering and harm to themselves and others, there was no formal sitter policy in place. Because of this lack of guidance, sitters were used inconsistently and sitter knowledge and skills were unreliable. Moreover, staff knowledge varied regarding the needs of the older person with dementia and/or delirium.



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Solution Formulated To bring more consistency and success to the use of sitters at the hospital group, a team first established a Sitter and Close Observation Policy to provide definitive guidance. A survey of the staff in selected units was conducted to determine the current knowledge level regarding the use of sitters. And the team encouraged outside service providers to adopt standardized educational requirements for sitters.

To help raise staff knowledge levels on the care of agitated, confused and wandering patients, an education program was developed and implemented. Interventions and tools were provided to guide staff in best practices for dealing with challenging behaviors. Tools included the Confusion Assessment Method Instrument (CAMI), PRISME Assessment Method, Sitter Request Form, and Continuous Observation Plan of Care Form.

NICHE Role The NICHE Geriatric Resource Nurse (GRN) core curriculum is designed for use by those at NICHE sites who train nurses in best practices for hospitalized older adults. GRNs are the foundation of system-wide improvement to achieve positive outcomes for hospitalized older adults. The NICHE program, available to hospitals throughout North America, offers evidence-based, interdisciplinary approaches to promote improved care for the hospitalized older adult.

Evaluation/Results A post program survey was conducted to evaluate the success of the new sitter policy. Survey results showed increased staff knowledge and problem-solving skills and more appropriate sitter usage. As a result of the program and wiser use of sitters, the district health authority realized a 30% cost savings.

For more information

1. Capezuti E & Brush B. (2008). Nursing Observation: Essential or Substitutable? *Geriatric Nursing*, 29 (5):350-351.
2. Tzeng H & Yin C (2007). International perspectives: using family visitors, sitters, or volunteers to prevent inpatient falls. *J Nurs Adm*, 37, 329-34.

NICHE-related resources

1. GRN curriculum: Depression, Delirium, and Dementia. Geriatric Resource Nurse Training Program. Available at <http://www.nicheprogram.org/courses/114>.
2. Tullman D, FleTcher K, & Foreman M. (2011). Delirium. In Boltz M, Capezuti E, Fulmer T, Zwicker D (eds) Evidence-Based Geriatric Nursing Protocols for Best Practice (4th ed), Springer Publishing Company: New York.)

About NICHE

NICHE is a national organization designed to help health care professionals in hospitals improve the care of older adults. NICHE hospitals seek to create an environment where older adult patients receive care that results in better outcomes. This climate of success encourages patients and their families to seek NICHE designated hospitals for their medical needs. The NICHE Network now numbers nearly 300 hospitals throughout North America.

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