



SULTAN QABOOS UNIVERSITY HOSPITAL  
NURSING DIRECTORATE

## 1. PATIENT SAFETY

**Standard Statement:** All patients should be informed where possible of the hazards within their local environment and all efforts should be made to reduce the risks of injury and harm to patients, relatives and staff at all times.

STRUCTURE	PROCESS	OUTCOME
<b>Beds</b> Beds that are adjustable, in full Working order with protective rails available	<ul style="list-style-type: none"><li>All beds/cots will be checked and maintained as part of a Preventive maintenance programmed by appropriate department.</li><li>Nurses will check all beds/cots for hydraulic and brake function prior to admission.</li><li>All beds/cots not considered safe will be removed from use and repaired as soon as possible.</li></ul>	<ul style="list-style-type: none"><li>All hydraulic beds will have working hydraulic mechanisms and brakes and side rails as needed.</li><li>Cot sides should be secure in the upright position</li></ul>
Nurse Cleaner <b>Wet floor signs</b>	<ul style="list-style-type: none"><li>Nurses will ensure the safety measures. Cleaning staff will maintain general hygiene as per contract specifications and policies.</li><li>Cleaners will be informed of all water, waste or chemical spillage immediately and respond within 5 Minutes.</li></ul>	<ul style="list-style-type: none"><li>The ward will have minimum incidences of patient falls resulting from spillage.</li></ul>

STRUCTURE	PROCESS	OUTCOME
<p>Cleaning materials available on the ward</p>	<p>In the absence of a cleaner, the cleaner's supervisor will be called. Nurses will ensure that necessary steps to safeguard the patients.</p>	
<p><b>Policies and procedures:</b>  All wards will have the following policies clearly labeled and accessible at all times:  -Infection Control Policy  -CPR Policy  -Clinical nursing procedure files  -Pressure sore preventing policy  -Fire Policy and individual fire warden evacuation guidelines  -Fall prevention policy  -IV Policy  -Documentation policy  -Adverse drug reaction policy</p>	<ul style="list-style-type: none"> <li>• Nurses will comply with all the enclosed policies</li> <li>• Nurses will bring to Management's attention any problems associated with implementing such policies.</li> <li>• All Head Nurses will undertake continuous monitoring and auditing of staff performance/knowledge in all policies and procedures as stated.</li> </ul>	<ul style="list-style-type: none"> <li>• All policies will be reviewed at least every 3 years or when problems arise.</li> <li>• All staff must achieve high marks in all audits annually.</li> <li>• All staff should have passed Aseptic technique assessment within 6 months of commencing contract.</li> </ul>

STRUCTURE	PROCESS	OUTCOME
<p><b>Training</b></p> <p>Training programmes for the following:</p> <ul style="list-style-type: none"> <li>-BLS</li> <li>-IV Therapy</li> <li>-Fire Safety</li> <li>-Aseptic technique</li> <li>-Lifting, ACLS, PALS courses</li> <li>-Neonatal resuscitation course</li> <li>-In-service training, and/or Orientation programs</li> <li>-Pain Management</li> <li>- Wound Care</li> </ul>	<ul style="list-style-type: none"> <li>• All nurses must undertake BLS and IV therapy courses as per orientation program.</li> <li>• All nurses will receive aseptic technique update and assessment during the orientation program.</li> <li>• All nurses must attend Training/Information session in fire safety.</li> </ul>	<ul style="list-style-type: none"> <li>• All nurses can demonstrate competence to the satisfaction of individual Head Nurses in the areas of: <ul style="list-style-type: none"> <li>-Basic Life Support</li> <li>-IV Therapy</li> <li>-Fire and Safety</li> <li>-Aseptic technique</li> </ul> </li> </ul>
<p><b>Equipment</b></p> <p>Furniture sufficient in number and quality for size of ward</p> <p>Electrical equipment, portable and in working order sufficient number and quality for size of ward.</p> <p>Equipment alarms</p>	<ul style="list-style-type: none"> <li>• Head Nurses will carry out equipment and furniture inventory and audit annually.</li> <li>• All faulty electrical equipment/furniture will be removed from use or warning signs attached in English and Arabic until repaired.</li> <li>• Nurses to ensure that alarm settings are activated and sufficiently auditable and visible to attract attention.</li> <li>• All items will be maintained by appropriate departments as part of a planned preventive maintenance program.</li> </ul>	<ul style="list-style-type: none"> <li>• All furniture and equipment is safe.</li> <li>• All alarms are promptly responded and patients' needs are met.</li> </ul>

STRUCTURE	PROCESS	OUTCOME
<p><b>Health and Safety Policies</b></p> <p>Sharp injury policy            Chemical spillage policy            Drugs policy            Disposal of hazardous waste policy            Incident reporting policy            Attendants policy            Restrains policy</p>	<p>All Health and Safety policies are available</p> <p>Staff will be oriented to policies and will comply with it promptly.</p>	<p>No patients or staff will come to harm as a result of noncompliance with health and safety policies.</p>
<p><b>CPR Trolley Fully equipped and functioning</b></p>	<p>CPR trolley is checked in accordance with CPR policy.</p> <p>Problems, omissions on CPR trolley are reported to nursing representative on CPR committee.</p>	<p>CPR Trolley is functional at all times and problems or omissions do not contribute towards a patient morbidity/mortality.</p>

STRUCTURE	PROCESS	OUTCOME
<p><b>Reporting mechanism</b></p> <p>Incident reporting Clear reporting mechanism and documentation</p>	<ul style="list-style-type: none"> <li>• Nursing staff should all be aware of incident reporting policies.</li> <li>• All incidents as detailed in the policy to be notified to Head Nurse or Nursing Supervisor within one hour and remedial action taken.</li> <li>• All incidents to be reported to Department of Nursing services by the next working day.</li> <li>• All incidents regarding safety of patients to be investigated by Department of nursing representative and appropriate action taken.</li> </ul>	<ul style="list-style-type: none"> <li>• Incidents involving patient safety will be minimized and the corrective action taken will be documented and if needed a policy change instituted.</li> </ul>
<p><b>Fall Risk</b></p> <p>Falls Assessment Patient attendant to be with all patients perceived to be at risk</p>	<ul style="list-style-type: none"> <li>• All patients admitted to have a Falls Assessment completed.</li> <li>• Patients at risk will be included in Falls protocol.</li> <li>• Family of patient at risk will be requested to provide an attendant for the patient. Attendant will be given an attendant information sheet. Then will be instructed in safety precautions for the patient and will explain potential hazards to the patient and how to avoid injury.</li> </ul>	<ul style="list-style-type: none"> <li>• Patient's incidents from self injury will be minimized and attendants will be well informed of potential hazards.</li> </ul>

STRUCTURE	PROCESS	OUTCOME
<p><b>Information</b></p> <p>Orientation for patients Admission information sheet for patients</p>	<p>All patients will be orientated to physical Environment.</p> <p>Patients will be advised of potential hazards that exist in each ward on admission.</p>	
<p><b>Restraints</b></p> <p>Physical restraints</p> <p>Policy on physical restraints</p>	<ul style="list-style-type: none"> <li>• Restraints and the use of restraints are only used as a last resort and with agreement of patients' family where appropriate.</li> <li>• Restraints are used as directed in the <i>Restraints</i> policy</li> </ul>	<ul style="list-style-type: none"> <li>• Restraints used safely and patient's dignity maintained.</li> </ul>
<p><b>Patient lifting</b></p> <p>Lifting training course Patient lifting/moving devices (sling hoist, PAT slide)</p>	<ul style="list-style-type: none"> <li>• Key staff trained in correct lifting techniques (link lifters).</li> <li>• All staff receive training in lifting techniques used on the ward (by linklifters).</li> <li>• Lifting aids used when appropriate</li> <li>• Annual audit of lifting technique should be done by all wards.</li> </ul>	<ul style="list-style-type: none"> <li>• No nurse will sustain back injury due to faulty lifting technique.</li> <li>• Patient comfort and safety is not compromised by poor lifting technique or equipment use.</li> </ul>

STRUCTURE	PROCESS	OUTCOME
<p><b>Lighting</b></p> <p>Bed side lights Night lights Patient call bell</p>	<ul style="list-style-type: none"> <li>• All patients are shown use of bed side lights and call bell on admission.</li> <li>• All bedside lights should be checked when patient is admitted.</li> <li>• All faulty lights should be reported as soon as possible.</li> <li>• Patient should not be placed in bed where lights are faulty.</li> </ul>	<ul style="list-style-type: none"> <li>• Poor/faulty lighting does not contribute to patient injury.</li> </ul>