

# Patient Care Attendant Worksheet

- This patient requires a patient care attendant today because he or she is at risk for:
    - Suicide Risk
    - Potential for Violence
    - Elopement Risk
    - Disorientation
    - Other \_\_\_\_\_
  - Your patient's medical team is concerned with this patient's safety. We ask that you pay special attention to \_\_\_\_\_
  - Your patient is also at risk for:
    - Aspiration (food going into lungs while swallowing) - do NOT offer food or drinks.
    - Falls- do NOT allow to walk without nurse, care partner, or physical therapy.
  - Your breaks will be at:
    - 15 min \_\_: \_\_ - \_\_: \_\_
    - 30 min \_\_: \_\_ - \_\_: \_\_
    - 15 min \_\_: \_\_ - \_\_: \_\_
  - Report any change to RN throughout shift.
  - Important phone #s:
    - RN \_\_\_\_\_
    - CP \_\_\_\_\_
  - At the end of your shift, please report off to oncoming constant observer as to what worked well for your patient and what did not.
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## *Expectations of a 1:1 Observer*

*Minimum standards listed below. All care directed by RN.*

### Before beginning your shift

- Receive report from RN and PCA– review the worksheet and share what works well for the patient and what might be a trigger.
- Discuss your responsibilities and patient needs for the shift.
- Identify if patient is a fall or swallowing risk.
- Establish mode of communication/RN phone number.
- Position yourself where you can best fulfill your duties, preferably in the room with patient between patient and door. The patient should be in full view at all times.
- Send any personal items to storage.
- Plan breaks and meals with RN or care partner.

### Safe Environment

- Never let patient out of your eyesight unless you are in danger. Immediately call for help if you are in danger.
- When in the room, keep a clear path to the door for yourself. Do not allow yourself to be cornered. If you ever feel at risk, then leave the room and call for help.
- Do not attempt to physically restrain patient yourself. Call for help.
- Verify the following belongings have been removed and secured:*
  - Street clothes*
  - Cell phones*
  - Computers*
  - Belongings*
  - Ties, cords, necklaces*
  - Sharp Objects*
- Before a new admission enters the room, verify all hazards have been removed (straps, cords, sharp objects, suffocation risks, ingestion risks).
- Never leave patient alone in the bathroom, especially shower.
- Never allow the door to be closed between you and the patient.
- You are still on duty when visitors are present unless you are dismissed by the primary RN.
- Notify the Nurse when visitors arrive and ask them to report to the nurse. (Floor staff may need to search belongings if present)
- When visitors are present, please observe their interactions and immediately report to RN any items given to the patient or any conversations or behaviors that occur while visitors are present.

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- Do not allow visitors to bring any personal items into the patient's room unless approved by primary RN.

## Meals

- Ensure no sharp objects come with tray. Count disposable flatware entering and exiting patient rooms and remove knife unless approved by primary RN.
- Set patient up to eat, preferably in chair if appropriate.
- Assist with feeding/promote fluids if no swallowing precautions.

## Hygiene

- Change linen on unoccupied beds.
- Assist patient to wash hands before and after meals and toileting.

## Activity

- Remind Patient to turn frequently in bed if they are able to.
- Walk in room if not on fall precautions.
- Patient may not leave the unit to smoke.
- TV on only when patient requests (check with RN).
- Assist nursing staff in repositioning patient.

## Please **Never**

- Let the patient out of your sight.
- Use of your personal cell phone while on duty.
- Give patients details about yourself- please keep the topic on the patient or something that interests the patient.
- Use the internet, computer, cell phone, or headphones.
- Eat or drink in the patient care areas.
- Use the patient's bathroom.
- Sleep.
- Reinforce delusional states.
- Engage in unnecessary power struggles or arguments with patients.
- Offer any therapeutic advice to a patient beyond which simply reinforces treatment plan established by the healthcare team.
- Accept or offer money or gifts.
- Take patient's laundry home to wash.

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YOU CAN BE THE DIFFERENCE MAKING A PATIENTS STAY AT MULTICARE A BETTER EXPERIENCE

Helpful Information About My Patient	
Preferred Name	
Primary Language	
Pets	
Family	
Games I like	
Music I like	
Food I like	
Books or Magazines I like	
Favorite Hobbies or Interest	
What I Need to Walk	
Other	

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**Talk-** talk about favorite foods, pets, family (if not upsetting), vacations, city of origin, childhood, school (if not upsetting), hobbies or interests (if none now, were there in the past), favorite TV shows or movies—you can even grab a familiar object and ask your patient to tell you about it or help you make up a story about an object.

**Games-** cards, board games, especially \_\_\_\_\_, if your patient would like to play video games with you, check first with the primary nurse and ensure the patient does not have access to social media or the internet using the video game system- try mad libs, mazes or joke books with kids.

**Music-** please select or assist your patient to select music with appropriate language--- for elderly, try easy listening or big band music, possibly old gospel or culturally appropriate music.

**Read** –your patient may prefer a specific book , if they cannot or do not want to choose, try a book that is timeless and appropriate for all ages, such as Charlotte’s Web, Dr. Seuss, The Bridge Across the Water, Where the Red Fern Grows, Olivia books, Curious George, picture books, etc... Also articles in magazines may be appropriate and pictures may help you start a conversation.

**Watch TV-** or a movie and discuss what is on the program- avoid crime shows, courtroom programs or talk shows that have adult content.

**Snacks or meals-** offer appropriate meals or snacks as long as the patient is not on swallowing precautions.

**Arts and Crafts-** coloring or simple crafts that do not require scissors or sharp objects.

**Walk-** take your patient for a walk around the unit if appropriate, clear with the primary nurse first and use all assistive devices the patient requires for ambulation. Be aware of patient’s fall risk.

**Hygiene/Toileting-** Encourage and assist your patient to take a shower or get cleaned up. Do NOT let them go in the bathroom alone with door closed; give privacy but still oversee and stay with your patient. Ensure your patient performs some hygiene, including basic washing, linen, and oral hygiene. Assist as needed to ensure this is completed. If your patient is resistant, give him or her choices on when they would like to perform hygiene and to what extent.

**Activities** – Sometimes busy hands help with agitation. Try folding towels, washcloths, sorting laundry or items that are safe for patient to handle. If your patient cannot move self, ensure turning occurs every 2 hours and assist the RN with skin assessments daily.

**Sleep** – Please encourage your patient to stay awake during the day. A nap in the afternoon is great but more than an hour or two will interfere with night sleeping. Night sleeping is necessary for clear thought and mood regulation during the day.

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