Pediatric Patient Safety

Information to read and review for Nurses, Nursing Students and Licensed Therapy Staff

Learner Outcomes

After you read this slide show, you will be able to:

- Identify ways to keep children safe in the hospital setting
- Provide safe care of a child in the hospital setting

Management of the Environment of care

Key Point: **Prevention** of accidents and injuries is critical!

- Child-proof the environment to the fullest extent possible
- Teach safety to parents and children
- Learn & model safe practices for children and families
- Use High Reliability Organization (HRO) principles!

This module reviews ways to keep children safe in this setting

HRO "CHAMP" acronym

- Communicate Clearly
- Handoff effectively
- Attention to detail
- Mentor each other: 200% accountability
- Practice & Accept a questioning attitude

Ensure Safety as the Highest Priority

- Before performing any procedure or giving a child medication, practice "time out" to check for accuracy.
 (use STAR-Stop, think, act, review...check the "rights")
- When leaving the unit for break, report on & off duty: "Hand Off Effectively" to a covering nurse.
 - Use structured communication during handoffs-
 - **SBAR** (Situation-Background-Assessment-Recommendation).
- Voluntarily report occurrences (an unusual event or incident involving your patient).
 - To identify system problems & prevent future errors.
 - To keep patient safe/ free of adverse consequences.

Ensure Safety as the Highest Priority

- Practice teamwork.
 - Get help with an active infant, toddler or child.
- Include patients and families in activities.
 - Demonstrate safe practices.

Medication Safety

If you will be giving medications-

- Lock medication carts when not in use
- Do not leave medications at bedside
- Check calculations of medications.
 Overdose of meds can be lethal.
- Get help when administering immunizations to infants or small children

Ventilator and Equipment Safety for students and new hires

• Alarms:

- *Students* <u>Do not silence ventilator or pulse oximeter alarms</u> without your instructor, a nurse or respiratory therapist in attendance with you.
- New nurse or RT hires will be validated by preceptors before silencing alarms.
- Ventilators: When moving your patient-Seek help
 - **RT is responsible to unplug and re-plug** the ventilator to wall.
 - RT is responsible to change settings on the ventilator or pulse oximeter
- For difficulty breathing, cyanosis, or decannulation:
 CALL FOR HELP! This is an emergency!

Feeding tube safety

- Nurses must disconnect and reconnect feeding tube before patient is transferred from one level to another (e.g. bed to chair)
- C.N.A. and unlicensed staff may place feed on "hold", but nurse is responsible for the disconnect and reconnect (restart)
- Reconnect tube into correct port (e.g. Jejunostomy vs. Gastrostomy)
- Good communication is essential to prevent inadvertent tube dislodgement

Hazards for small children: Suffocation Hazards

FACT: 60% of infant suffocations occur in the sleeping environment.

CAUSES OF SUFFOCATION:

- Infant face wedged against or buried in a mattress, pillow, infant cushion or other soft bedding.
- Person in the same bed rolled over onto the baby.
- Baby's mouth and/or nose covered by plastic bag or other item in bed.



- Small children and infants are at risk for falls
 - Ensure siderails are up and latched
 - For climbers: Make sure the "bubble top" is latched on the crib
 - Use Seat belts on high chairs/infant seats
 - When side rail is down, never turn your back on the child or walk away

Hazards for small children: Suffocation Hazards

PREVENTION:

- Keep plastic bags out of reach of child!
 - Use pillowcase or plastic box for toys and/or clothes going home.
- Latex balloons are prohibited. Use Mylar balloons instead.
- Remove excess pillows, comforters, stuffed toys from cribs.
- Remove hygiene items, diapers and non-essential items from cribs.
- Use infant sleeper garment or swaddle to keep the infant warm; tuck a light blanket that goes no higher than the chest.
- Follow "Back to sleep" safety for infants under 12 months to prevent SIDS.
- Place infants to sleep in infant crib/bed, not chairs or other soft surfaces.

Hazards for small children: Furniture/ Heavy Item Tip-over

FACT:

8,000 to 10,000 Emergency Department visits annually are related to furniture tipping over (mostly children). *

Serious injuries or death occur as a result of climbing on furniture: e.g. shelves, bookcases, dressers, TV stands, etc.

• <u>See U.S. Consumer Product Safety Commission</u> website for more information

Hazards for small children: Furniture/ Heavy Item Tip-over

PREVENTION:

- Heavy items: Keep on lower shelves and in drawers
 - TVs, equipment or toys within reach might encourage climbing behavior
- Tie up loose cords (can lead to hazardous situations):
 - Pulled cords (attached to a heavy appliance) can cause head injury or death.
 - Hanging blind cords are potential strangulation hazards.

Hazards for small children: Entrapment

FACT:

Children, especially toddlers, look for places to hide when playing

Hazardous hiding places include:

- Hospital beds and cribs
- Under equipment
- Electrical beds can pose a serious risk if controls are activated and child becomes entrapped under the bed
 - Limbs pinched or caught in hospital equipment
- Toddlers and Preschoolers should not be allowed to play with bed controls

Hazards for small children: Entrapment

PREVENTION:

- Leave beds in lowest position when not performing care
- Lock out the bed controls to prevent small children from activating bed movement
- Minimize storage of toys under beds to discourage children from climbing under bed
- Mattresses should fit bed frame snugly. Report mis-sized bedding to charge nurse, unit or shift manager

Hazards for small children: Toys & Choking

FACT: Choking is a leading cause of death in infants and small children

PREVENTION:

- Choose age-appropriate toys
 - Look for choking hazard safety labels
- Inspect toys regularly for damage:
 - Small, loose pieces
 - Sharp edges
- Dispose of unsafe toys
- Use small parts tester

Remember:

Toys smaller than the inside diameter of a toilet tissue tube are too small

Choking Hazards

- Choice of food for small children:
 - Chop or cut food into small bite sized pieces for toddlers and small children.
 - Avoid choking hazards such as hotdogs, popcorn, chips, whole grapes, hard candies, etc.
 - Follow the child's menu set up with the dietician.
- Dispose of choking hazards such as small caps & equipment pieces

Nosocomial Infection Prevention

FACT: Microbes can live for days, weeks and even months on surfaces

INFECTION PREVENTION:

- Don't share soft, fluffy toys between patients
- Clean hospital toys between patients and after use
 - Clean with antimicrobial wipes, mild soap and water, or dishwasher are all acceptable methods.
- Supervise children at play.
 - Pay particular attention when older children are playing with or around infants

Transportation Safety

Out Passes

- Prior to pass with parent/guardian:
 - Staff will verbally confirm use of a car seat, seat belt or other approved devices/ vehicles specific to the child's needs
 - HSC does not loan car seats

Transportation Safety

FACT: Connecticut law requires proper seat belt restraints and car seats for children.

- Children who are transported to and from the hospital will use appropriate transport safety devices.
- Upon discharge, staff escorting parents will verify car seat placement in the vehicle and document accordingly.

Electricity and Children

- Do not allow children to play with or chew on electrical cords
- Don't allow children to put items into electrical outlets

Visitors

- Parents/Guardians submit an approved Visitor List for Pedi patients
- The unit is a locked unit. Do not allow people that you do not know onto the unit.
- People on the Visitor List may visit the unit.
- Ask visitors to sign in and out at the Front Desk.

Dr. Amber

- If an unauthorized person were to abduct a child from the Pediatric Unit:
 - Notify charge nurse or unit manager STAT!
 - Call 299, Dr. Amber
 - Follow hospital policy for procedure
 - Search unit for missing child

More HRO Safety Principles

- Mentor each other; cross-check each other and coach teammates.
 - Speak up for safety "I have a concern"
- Questioning attitude if you are unsure:
 - Validate and verify
 - Stop the line "I need clarity"

Congratulations!

- You have completed this module
- We look forward to meeting you on the Pediatric Unit!