**Teaching Summary Assignment**

**Misuse of Bed/Chair Alarms Teaching Paper**

**NUR 402-Nurse as Educator**

**Purpose of Assignment**

The purpose of the assignment is to provide the student the opportunity to summarize in detail the development, implementation, and evaluation of an instructional intervention for a specific patient population or professional group.

**Student Approach to Assignment**

I approached this assignment recognizing the challenge of educating staff on the importance of using bed and chair alarms correctly. Working on a unit with the highest fall rate warranted re-education on bed and chair alarms. There have been many staff changes on our unit as well. Giving the staff members a refresher course as to why the bed and chair alarms are important would help to remind staff to take time to double check alarms, decrease the overall fall rate and keep the patient safe while hospitalized.

**Reason for Inclusion of this Assignment in the Portfolio**

The reason for including this paper in my portfolio is because my unit has the highest fall rate in the entire hospital. Patient safety is a priority and needs to be addressed. There have been many patients that included additional injuries to patients, setbacks treatments plan and overall family disappointment. Not to give excuses, re-educating staff members on the proper use of bed and chair alarms could help decrease the overall fall rate and not cause a delay in the patient’s treatment plan. Being able to teach others was something that I have always wanted to do.

**Curriculum Outcomes**

**Critical Thinking**

* ***Uses nursing and other appropriate theories and models to guide professional practice:***I referred to the Scope and Standards of Practice for Neuroscience Nurses by the American Nurse Association for this teaching project. I followed the education plan under the Standards of Professional Performance for Neuroscience Nursing standard 12 Education and standard 14 which was quality of practice (2019, pp 51-53). These standards were crucial in my teaching this topic and are imperative to nurses as nursing is lifelong learning.
* ***Uses decision making skills in making clinical or professional judgments:*** When I realized that my unit had the highest fall rate in the entire hospital, I spoke with my unit manager about reasoning for the increase falls. Outside of staffing issues that are beyond my control, I suggested that I re-educate the staff members on the importance of using bed and chair alarms correctly.
* ***Revises actions and goals based on evidence rather than conjecture:*** A teaching seminar was devised which incorporated return demonstrations as well as questions and answers. The survey provided structure for me to be able to teach my co-workers the importance of keeping the patient safe.
* ***Engages in creative problem solving:***  I formulated a survey that I had my team members participate in anonymously. This survey focused on learning styles of my peers. Through the need of my survey and meeting with my unit manager, the reasons for increase falls on the unit was identified. It was suggested that some teaching was needed regarding alarm usage and its importance. My teaching project included return demonstration as well as questions and answers about alarms, how and why to use them.

**Nursing Practice**

* ***Applies appropriate knowledge of major health problems to guide nursing practice:*** Once brought to our attention, I sought to find reasons for the increase fall rates. Many team members were feeling as if they were being blamed for such an increase from management.I wanted to help management understand why this was happening while re-educating my team members on bed and chair alarms.This was demonstrated by obtaining data information from HCHAPS scores, patient, and family complaints and Rcares that must be done when there is a fall on the unit.
* ***Performs therapeutic interventions that incorporate principles of quality management and proper safety techniques:*** Therapeutic interventions included teaching team members about bed and chair alarms, finding out how they learned so they would participate in the learning activity. Return demonstration was also included and each member present had to show that they understood what was needed for bed and chair alarms and how to use them for several types of patients and situations.
* **Establishes and /or utilizes outcome measures to evaluate the effectiveness of care:**  Evaluating effectiveness of care was done through return demonstration. Each team member present had to show that they understood the use of bed and chair alarms by being checked off. The unit saw a decrease in falls in the next 30 days after the teaching ended.

**Communication**

* ***Uses therapeutic communication within the nurse-patient relationship:***  Therapeutic communication was displayed when having to address “patients” on the use of bed and chair alarms. Realizing that some of the reasons nurses gave for not using alarms was because the patient or families did not think it was necessary to do so. During the teaching session role playing was necessary as actual patients were not involved. Each team member practice how to speak with patients and family members about alarm usage, patients that has altered mental status, patients that were combative, patients from diverse cultures and patients who were just noncompliant.
* ***Adapts communication methods to patients with special needs:*** This includes speaking with another family member for a patient with altered mental status, using an interpreter phone for patients and families who did not speak or understand English, and simply asking the patient what they thought needed to happen to keep them safe.

**Teaching**

* ***Provides teaching to patients and/or professionals about health care procedures and technologies in preparation for and following nursing or medical intervention:*** In the three years that I have been at Riverside, there has been a change in equipment used with and for patients; this includes bed and chair alarms. My teaching project focused on teaching team members how to effectively use the alarms and why they are used.
* ***Provides relevant and sensitive health education information and counseling to patients, and families:*** Educating the patients and families on use of bed and chair alarms was just as important as re-educating the staff. Information from surveys and HCHAPS scores were shared with patient and families who wanted to be noncompliant with bed and chair alarm usage. This was not always helpful as patients and families wanted to do what they wanted regardless of outcomes.

**Research**

* **Evaluates research that focuses on the efficacy and effectiveness of nursing interventions:** Surveys sent out by the hospitals, Rcares and HCHAPS are data used for research and scores the hospital and units on things such as safety, attentiveness, response times etc.
* **Shares research finding with colleagues:** Surveys, HCHAPS scores and Rcares were shared with team members involved in teaching. Discussion of this data prompted other conversation about how to keep patients safe outside of using bed and chair alarms.

**Leadership**

* ***Assumes a leadership role within one’s scope of practice as a designer, manager, and coordinator of health care to meet the needs of populations:*** I wanted to be able to train my team members how to use bed and chair alarms so that we all could keep the patients safe. Regardless of if any of my patients have fallen, we are all responsible for the safety of the patients on the floor and more accountability is needed. My manager made me the liaison for the nurses and gave me the ability to help assist when any changes necessary. She also allowed me to participate in a safety coach class so that I could be a teacher throughout the hospital when it comes to using equipment needed to keep patients safe, which included bed and chair alarms.
* ***Articulates the values of the profession and the role of the nurse as member of the interdisciplinary health care team:*** Making patient safety a priority is something every staff member should want to do. Physicians and family members rely on nursing staff to keep patients safe. Nursing staff work with physical and occupational therapy on ways to ambulate patients to and from the bathrooms and using bed and chair alarms when needed.
* ***Delegates and supervises the nursing care given by others while retaining accountability for the quality of care provided:*** This was demonstrated by becoming a preceptor and having orientees. Accountability demonstrated through delegation to certified nursing assistants (CNAs) of certain task such as making sure bed and chair alarms are on patients that are considered a high fall risk.

**Professionalism**

* ***Demonstrates accountability for one’s own professional practice as well as limits to one’s own scope of practice:*** I learned to reevaluate myself when it came to my contribution to the increase in patient falls. As stated earlier, although not having experienced a fall with a patient, I still needed to ask myself what I could have done in keeping a patient from falling. This teaching project opened team members eyes as well as my own to “our part” in the increased fall rate and what we could all do to assist in that number decreasing.
* ***Advocates for professional standards of practice using organizational and political processes:*** Education is lifelong in nursing. When teaching this class, I referred to the Scope and Standards of Practice for Neuroscience Nurses by the American Nurse Association.

**Culture**

* ***Articulates an understanding of how human behavior is affected by culture, race, religion, gender, lifestyle, and age:*** With this teaching project I produced a survey that allowed me to understand how each person learned, how the understood things and what influenced their learning. This helped me understand the generational differences as well as gender differences in learning.
* ***Integrates knowledge of cultural diversity in performing nursing interventions:*** The survey that was created allowed me to understand how different generations and genders learned. This also allowed me to “customize” how to role play with the nursing interventions.

**What has changed through my teaching project?**

Since the teaching project more awareness has brought to the team members about falls regardless of who is responsible for the patient. There has been a decrease in patient falls on the unit. Most the falls now happen with an alarm on and staff responsiveness, but things just happen. Rcares show that staff members had necessary things in placed to prevent the fall even though it happened. This has increased morale on the unit as well. We no longer have the highest fall rates in the hospital.