



Sitter Orientation

Care of a Suicidal Patient:

Patients who have attempted or have expressed a desire to commit suicide must be taken seriously and protected from harming themselves. This is accomplished through a team approach including the RN, unit staff and 1-to-1 monitoring by you. It is extremely important that you are awake, alert and focused on the patient's safety while caring for them.

Follow the care guidelines below and provide a safe environment for them.

- All patient belongings (cell phones, purses, wallets, clothing, keys, etc.) are to be given to Security on admission. Notify the nurse if any of these items are in the room.
- Visitor belongings must be left with the sitter. Family/visitors may not bring any personal items to patient.
- The patient should **never** be left alone, including when the patient is dressing, bathing or using the bathroom. You must have visual contact with them at all times.
- While sitting, you should have your chair positioned close to the door, but in a position to have full view of the patient.
- The patient must be dressed in either a patient gown or paper scrubs.
- The patient cannot ask you to step out of the room for any reason. If they become agitated, use the call light to get assistance in the room or call 6111 for a:"Security Alert. Security Assistance Requested".
- The patient cannot have private time with visitors, nor should you move yourself away from the patient when visitors are present.
- If the patient asks to go for a walk, another member of the staff should accompany you.
- The patient cannot have anything that has the potential to be used to harm them. This could include items such as knives and forks, sharp objects, pins, plastic bags, glass or metal objects, medications of any kind, strings, cords, or unused restraints.
- Patients on suicide precautions are not to have access to cell phone or room phone.
- You may use the telephone only in an emergency or if there is a delay in response to the call light. You may call:
 - O Unit desk number (enter it here):
 - Security 6111 (if you feel you are in danger or if the patient is attempting to leave/elope)
- You must do a ligature risk assessment and document hourly
- You should have the ability to see the patient's hands at all times.
- Patient should be checked frequently when sleeping, including pulling covers down to check patient.
- Convey attitudes of compassion, empathy and understanding. Do not offer to counsel the patient spiritually or emotionally.
- Allow the patient to talk, but do not offer your judgments or opinions. Do not promise the patient that you will not tell the staff what you have been told.
- Notify the RN of any plans to commit suicide that the patient has shared with you.





- Notify the RN of any strange or unusual behavior.
- Give a complete and thorough report when being relieved for breaks and when leaving.
- Notify the RN if family/friends bring any personal items to patient.
- If an emergency situation should arise, stay with the patient and call for help out the door.

General Guidelines for Sitters: Suicidal and Non-Suicidal Patient

- The patient must be observed at all times and **never left alone**. To keep the patient safe, it is important that you remain awake and alert.
 - Use the call light to summon staff for assistance, break times, needed equipment.
 Do not leave the room.
 - o If the assigned patient leaves the floor for treatments or diagnostic testing, you are **required and expected** to accompany the patient for the duration of the test.
- **Personal** cell phones or pagers **are not** permitted while caring for the patient. Cell phones or pagers may be used **only** during your break. You may bring personal reading material to use when patient is sleeping and all duties are completed. **NO ear buds**
- Eating or drinking in the patient room is not allowed.
- You are expected to communicate with the RN caring for the patient throughout your shift. Pass on any information that may be useful to your relief person.

Communicating with all Sitter Patients:

- The patient's illness (or sometimes their age) may cause them to be confused, uncooperative or even harm themselves. As a result, they may have little control of what they do or say. This is why a Patient Safety Attendant is needed.
- It is important to respect the patients by speaking to them in a calm and friendly tone. Raising your voice may cause the patient to become upset
 - Avoid arguing with the patient
 - o Remain calm
- In certain circumstances, you may be required to take action to prevent a patient from harming themselves prior to the nurse's arrival. An example of this may be holding the patient's hand to prevent them from pulling out a tube or line. If the patient is doing something that may cause harm (e.g. climbing over the bed side rails), attempt to stop these actions by giving brief, clear instructions. Repeat this up to 3 times (over one minute) in a firm yet quiet manner. Be sure that you have the patient's attention. Make eye contact when possible. If the patient persists in this harmful behavior, contact the nurse right away.

Patients at Risk for Falling:

You may be asked to monitor and ensure the safety of a patient who is at risk for falling due to the following:

- A surgical procedure or medical condition that impairs their strength or balance
- Confusion caused by medication, dementia or unfamiliar surroundings





- Poor eyesight
- Medical equipment such as IV pumps, tubes, drains
- Orthopedic devices such as casts or splints

In certain circumstances if the patient becomes agitated or uncontrollable, do not attempt to restrain them. Keep yourself safe; call 6111 for a "Security Alert. Security Assistance Requested". Stay calm and speak clearly so the information can be forwarded quickly and clearly.

On the Unit:

- When arriving on the unit, you will receive handoff from the previous caregiver and
 primary nurse. The care needed for the patient will be discussed at this time. Before
 starting your shift, please verify with the Charge Nurse and the patient's nurse:
 - Your break time and lunch time
 - Special patient needs
 - O Vital sign schedule Patient activity (e.g. up to bathroom with help, bed rest)
 - o Any concerns you have about caring for the patient

Responsibilities for Sitters:

- Keep the patient safe by observing the patient at all times:
 - When the patient is using the toilet or showering, leave the bathroom door open at all times so you can see the patient. If the patient refuses to leave the bathroom door open, contact the nurse. The nurse will then select other care options (e.g. use of a commode or bathing at the bedside).
- Vital signs are generally taken once a shift; if this is required more often, the nurse will advise. Others may note this for you in the patient's chart.
 - This includes temperature, pulse, respirations, blood pressure and pulse oximetry (ox)
 - o Contact the nurse right away if the patient's:
 - o temperature is above 101.5
 - o pulse is above 100 or is below 60
 - o respirations are above 24 or are below 12; blood pressure is above 160/90 or below 90/50
 - o pulse ox is below 93%
- Intake and output (I & O):
 - o Tally any fluids the patient has had.
- Assist the patient during meals. If the patient is coughing after drinking liquids or is having a hard time swallowing or chewing, please let the nurse know right away. If the patient has swallowing precautions, please take note of the precautions posted over the bed and follow these protocols. If you are not sure, clarify with the nurse.
- Bathing is done every morning and as needed. The patient may require more frequent bathing after meals or if incontinent. Please check the patient every hour if they are





incontinent to see if they need to be changed. If so, please carefully clean the area. Report any skin abnormality to the nurse.

- You are expected to **clean up/freshen up the patient once during your shift**. If the patient needs a complete bed bath and you know the patient is going to an early test or to surgery, you may start as early as 5 a.m.
 - o Include oral care when assisting the patient to clean up. If the patient is capable of brushing without assistance, prepare their toothbrush/toothpaste for them and allow them to brush their teeth. If the patient is not able to brush their own teeth, please assist them in cleaning their mouth and oral cavity.
 - o Change linen at least once a day, and more frequently as needed. Straighten linen as often as necessary.
- Assist the patient through range of motion exercises, allowing them to move their arms and/or legs. Help the patient reposition and turn as often as necessary to prevent skin breakdown.
- Please do not attempt to walk the patient to the bathroom by yourself unless you have verified this with the nurse.
- Make sure the patient is turned and repositioned in bed every 2 hours. If you need help to do so, please call a staff member.
- You may be asked to leave if you fail to comply with the above guidelines and your supervisor will be notified.

Talk with the nurse if you have any questions about the above information or feel that you cannot fulfill these outlined duties.