The Role of the Patient Safety Companion

Last Update: June 2016
Purpose

The purpose of this learning is to define the responsibilities of the Patient Safety Companion (PSC) and to bring understanding to the role they serve in caring for MSHA patients.

Objectives

Team members participating in this module will be able to clearly define the responsibilities of the PSC. Participants will successfully identify the actions taken by the PSC or other team member filling the role of PSC in maintaining patient safety.
What is a PSC?

A Patient Safety Companion is a qualified team member that is provided through the MSHA HealthPro Staffing Department.

All Patient Safety Companions are required to complete a separate course instructing them on the basics of patient care. The PSC training course focuses on safety and activities of daily living (ADL) management.

The PSC is required to attend the HELP Course (Human Empowerment and Learning Principles) which teaches communication and de-escalation techniques.
PSC Assignments

PSCs are assigned to accompany patients that need constant 1:1 supervision.

Patients that require the services of a PSC include:
- patients under suicide precautions
- patients whose condition necessitates the use of 3- or 4-point restraints
- any patient requiring the utilization of violent restraints.
Care for the Patient under Suicide Precautions

Patients considered to be actively at risk for suicide will be placed on suicide precautions.

Patients actively at risk include:

- patients admitted for treatment due to suicide attempt
- hospitalize(d) patients who express suicidal intention
- patients who present signs and symptoms associated with suicidal behavior
Care for the Patient under Suicide Precautions

Patients on suicide precautions are not allowed to have any articles that could be used to inflict harm, including:

- sharps of any kind: razors, glass objects, make-up bottles, mirrors, nail files, metal hair clips, pointed makeup applicators
- items that can be used as ties
- chemical agents
- any medications, including over-the-counter (OTC) drugs
- plastic eating utensils may be ordered if deemed appropriate.
What if a PSC is unavailable?

Many times, an actual PSC may not be available; another team member may be delegated this task.

The shift leader, nurse manager, or house supervisor may designate a team member to provide the services of a PSC instead of their normal work assignment.

Other times, team members in different positions are cross trained to work as a PSC.

When an MSHA team member is not available to serve in the PSC role, external agency sitter personnel may also be utilized.
It is very important that the role of the Patient Safety Companion is clear so that the care of the patient is carefully coordinated.
PSC Responsibilities

The PSC, external agency employee, or other assigned team member will report to the RN in charge on the assigned unit.

The nurse manager, shift leader, or RN in charge of the patient will review the specifics of the assignment, including break and meal times.

Agency staff will only be assigned those tasks that are within the scope of their training.

Most agency staff members are not allowed to provide any patient care and are only there to monitor the patient.
Hospital Staff Responsibilities

The MSHA Team Member patient care staff (RNs, LPNs, PCPs, CNAs, Nurse Intern 1-4) assigned to the patient are responsible for completing all charting, administering all medications, transcribing all orders and performing all treatments other than basic ADL’s.

**PSCs can assist in the patient’s activities of daily living.**
The PSC is responsible for the patient’s bath, linen changes, ambulation if needed, feeding if necessary, and any other activities of daily living.

**PSCs may not monitor vital signs.**
PSCs and external agency staff do not document in the patient’s medical record – except on the PSC Observation Log ([Click for a sample](link)). It is the responsibility of the hospital patient care team members to document all other patient information.
Guidelines for the PSC
The patient should be within 10 feet of you at all times.

You must **ALWAYS** have a clear view of him or her.

If the patient is ambulatory and needs to go to the restroom, provide them privacy but **ALWAYS** leave the door cracked so that you maintain view of the patient at all times.

**DO NOT LEAVE THE PATIENT UNATTENDED FOR ANY REASON.**
Guidelines for the PSC

If the patient is transported to another department for tests (e.g., for an x-ray or other test), you must accompany the patient as far as permitted for their safety.

Team members are not allowed to have food or drink in patient rooms.

Do not use the patient’s bathroom. This is a violation of OSHA regulations and of MSHA policy.

Notify the RN in charge when you need to take a break.
Avoid any activities that may distract you from monitoring the safety of the patient (homework, working with a computer, video games, etc.)

Do not use your cell phone in the patient’s room. If you need to make a phone call or complete a text message, please do so during your break.

Do not take the patient out to smoke. This is against policy and is a liability. If the patient asks you to take them out to smoke, politely tell the patient that you can not – and inform the nurse of the request.
Maintain a professional relationship with the patient.

Please be cautious about information you share with patients. Do not share personal information such as your telephone number, etc.

If your patient has a question related to their care, notify the nurse in charge of the patient.

Do not visit the patient during non-work hours. If the patient of family asks you to sit with them again, inform them that this is coordinated through the Central Staffing Office.
Guidelines for the PSC

Even if a family member tells you that they will watch the patient, **you are not allowed to leave unless another team member (or another PSC) relieves you.**

Notify the nurse of any changes you notice in the patient.

Remain awake and alert at all times for the safety of the patient.

At the end of the assigned shift, the PSC or agency staff member will give a report to the nurse in charge regarding care given and current patient status.
Almost finished....

Please close this window and return to TEDS to complete the test for this course.