#### <u>Dedicated Nursing Associates & DNA</u> <u>Safety Committee Meeting Agenda – Key Risk</u>

Date of Meeting: 7/26/2021 Time of Meeting: 10:00 AM

**Location of Meeting:** Suite 202 Conference Room or Teleconference. Conference Line: 267-

930-4000, Participant Code: 450-366-173

1. Roll Call

- 2. Review agenda for this meeting.
- 3. Review and approve last month's meeting minutes.
- 4. Review of workplace accidents that have occurred since the last meeting; discuss contributing cause, root cause, and corrective actions.
- 5. Review the status of old business and the committee's suggested corrective actions.
  - Article on "Recommendations for Turning Patients With Orthopedic Impairments"
- 6. New Business
  - o Article on "7 Tips Nurses Should Know About Safe Patient Handling "
  - Discuss workers comp issues and go over ones that are consistently happening.
  - $\circ \quad \textbf{Discuss status/progress of Committee Goals}$
  - Next Member to come up with next topics for discussion
- 7. Recommendations to management

#### <u>Dedicated Nursing Associates & DNA</u> <u>Safety Committee Agenda</u>

Meeting Date: 7/26/2021		Time meeting started:	10:00 AM
Meeting Chairperson: Danielle Reilly			
<u>I</u>	Present		Absent

Agenda for today's meeting was reviewed by all members: \_\_\_\_Yes \_\_No
Previous meeting minutes from (6/2021) were read and approved: \_\_Yes \_\_No

# Review of Accidents/Incidents Since the Last Meeting (employee, non-employee, vehicle accidents, near misses, property, & other)

Date	Injury Causation (Description)	Assignment /Facility	Injured Body Part (Body Part, Left/Right, Lower/Upper)	Follow Up (Communication, Contact Facility, Treatment, Education, etc.)	Recommended Corrective Action	Is Claim Ongoing? Current Outcome
7/5/21	CG was asked to help resident to go to the bathroom. Resident was a 2 person assist so the CG asked another nurse for assistance. The CG and nurse proceeded to lift resident and transfer them to the toilet. The CG has a bad R. shoulder, is pending surgery, and wasn't using R. side, so all of the resident weight was on the L. Side. As the CG lifted resident, CG felt a pull in shoulder.	Per Diem  Baldwin Health Center  Nursing Home	L Shoulder	Education Emailed: Safe Patient Handling and Safe Wheelchair Transfers Acknowledgement Received 7/22/2021	Reach out to CG and inquire about if she still has restrictions from her "bad R shoulder".  Docotr's release that she does not have restrictions from past injury.	Closed Full Duty 7/21/2021
7/9/21	The IW gave a shot to the resident, the IW placed the cap back on the needle. The IW then while holding the needle in their hand went to remove their gloves. While removing the gloves the cap must have come loose when removing their gloves. The dirty needle stuck the palm of IW's L. middle palm.	Contract  Baptist Homes Society  Nursing Home	L Middle Palm	Education Emailed: Proper Sharps Disposal FDA & Safe Handling & Disposal of Needles and Syringes  Acknowledgment Received 7/22/2021	No additional recommended corrective action.	Closed Fully Duty 7/9/2021

7/13/21	IW and nurse's aide were picking up a resident off the floor who had fallen. Both the IW and Nurse's aide used the arm and arm method. While lifting, the residents leg became dead weight. That's when IW felt a sharp pain in her Lower back.	Contract  Manor Care Greentree  Nursing Home	L Lower Back	Education Emailed: How To Help Elderly Get Up From Floor After a Fall	If patient falls, employee should never manually lift them. Education outlines using a lift or using sheet to lift patient.	Closed Signed Refusal of Treatment 7/15/2021
7/14/21	Patient's colostomy bags were being changed and IW was holding patient's hands to keep him from striking anyone for approx.15 min. Due to the amount pain patient was in, patient gripped IW's hands really tight and would not let go. Once released IW's R hand was throbbing, turned red and immediately started swelling.	Contract  Colonel Robert State Veterans Home  Assisted Living Facility	R Hand	Education Emailed: The Art of De- Escalation in Managing Aggressive Patients Acknowledgement Received 7/14/2021	If possible, facility to use mitts on patient in pain to prevent escalation/striking etc.	Closed Full Duty Release 7/15/2021
7/14/21	IW and another aide were changing a geriatric resident. Aide rolled resident on to their side. IW went to remove brief from under resident. Resident was still partially laying on brief. IW pulled on brief. Brief ripped and caregiver flew back into hoyer lift and immediately felt a shooting pain.	Contract Wesbury United Methodist Retirement Community Retirement Home	L Side of Arm, Shoulder, Neck & Back	Education Emailed: Preventing Back Injuries in Health Care Settings  Acknowledgement Received 7/22/2021	IW should not have pulled brief – if IW pulled so hard as to fall backwards, they could have actually caused laceration to the skin. They should have repositioned the patient before continuing to try to remove brief.	Open Restrictions next follow up 8/5/2021

7/16/21	The IW was caring for a patient with dementia. The patient was laying in bed while the IW was performing care the patient kicked the IW in the face. The patient was known to act combative but had been unaware of possible kicking.	Contract  Baldwin Health Center  Nursing Home	Nose & L Eye	Emailed Education: Combative Patient	If IW already knew the patient was combative, the IW should not have put themselves in direct path of patient's limbs.	On Going  Must Follow Up w/ ophthalmolo gy
7/18/21	The IW was putting a resident in a sit to stand w/ another aide who was securing the resident to the bed. The IW leaned across to fasten the belt to machine and heard a crack and pain.	Contract  Autumn Care of Statesville Saber  Nursing Home	Right Side & Ribs	HR Dept to reach out to Heidi for education recommendations	If you have two aides/employees working with patient, why is IW reaching across patient, as opposed to having other employee fasten belt on other side.	On Going  Restrictions Follow Up 7/29/2021
7/21/21	The IW was moving a resident in a Hoyer lift from the bed to their electric wheelchair. The resident was placed in the chair, the IW bent down to adjust their leg when the chair began to move forward. The residents chair knocked the IW over and the wheels ran over their legs and stayed on top of them. The other aide in the room made several attempts to power the chair back on before being able to reverse and move it off their legs.	Powell Place Retirement Community	R & L Lower Leg	HR Dept to reach out to Heidi for education recommendations	Never put a patient in a powered-on wheelchair. Powered wheelchair should be tumed off. If the wheelchair is powered on, you also risk the patient falling out of the chair.	Closed Full Duty Release 7/23/2021

## **Status / Progress of Uncompleted Old Business**

Old Business Item:	<u>Updates:</u>
Recommendations for Turning Patients with Orthopedic Impairments	Uploaded to DNA Website

## New Business (Round Table Discussion)

Committee Member Name:	Topic / Hazard Identified:	Responsibility Assigned To Whom & Action To Be Taken:
Group	Discuss new incidents	
	Article on: "7 Tips Nurses Should Know About Safe Patient Handling "	
Group	Update on Goals	

## **Status/Progress on Committee Goals**

Goal:	Updates/Action to be taken:	

#### **Other Reports or Guest Speakers**

Guest Name:	Topic Discussed / Presented to the Group	

Meeting Adjourned:	10:20 AM 7/26/2021	
Next Meeting:	8/2021	
Meeting Minutes Completed By: Ashton Hammer		

- A copy of these minutes & the agenda should be distributed to all company employees or posted where all employees have access to them.
- <u>These meeting minutes should be attached to the corresponding agenda and sign-in sheet, and kept on file with your safety committee records.</u>
- Please be certain that the date of the sign-in sheet, agenda, and minutes are all the same for each meeting.
- o You must maintain these records for at least FIVE years.