Manitoba
Health, Healthy Living and Seniors

Manitoba Health, Healthy Living & Seniors (MHHLS) supports reporting and learning from patient safety events. The focus of a patient safety review is to closely look at the health care system that surrounds and interacts with those giving and receiving care. The goal is to identify risks to patient safety and recommend the most effective ways to minimize risk and improve the delivery of healthcare.

Patient Safety Learning Advisory

Summary:

An ambulatory PCH resident was kicked in the mid-section by a co-resident who was sitting restrained in a wheelchair by a front opening, side release seat belt. The resident in the wheelchair was known to become agitated and aggressive.

The ambulatory resident fell backwards and fractured their left hip.

The incident is believed to have occurred with minimal provocation; both residents have dementia.

Keywords:

Aggression, long term care, resident to resident aggression, dementia

Device Name *(if applicable)*: **n/a**

Drug/Name/Fluid Name: (*if applicable*): **n/a**

Type of Analysis: single event

Topic: Patient Protection

Findings of the Review:

Distraction techniques such as a regular walking schedule may help reduce the tendency for agitation and aggression to escalate.

Following lunch, clearing of the dining room seems to be a very busy time. The area just outside the dining room becomes congested at a time when minimal staff is present.

Residents with dementia may benefit from greater one on one time with a volunteer or companion visitor. Additional events, such as musical entertainment and activity groups, scheduled on the unit may also allow for distraction.

Residents with dementia have specific needs and activity requirements. Staff working on this unit would benefit from training and the development of skills to manage working in a high risk environment associated with managing multiple residents with dementia.

Recommendations for Improvement:

Develop a regular walking schedule for residents that are able to ambulate with assistance from staff.

Discuss with Housekeeping alternate times for the cleaning of the dining room to help reduce the level of congestion created outside the dining room post meals.

Discuss with Executive Leadership the feasibility of removing the centre nursing desk. The space is not currently utilized by staff and creates a bottle neck for residents following meal time. The opening of this space may make it easier for residents to ambulate safely.

Use volunteers services to a greater extent. This could allow for more one on one time for residents, group activities or events on the unit during the week, evenings and weekends.

Determine the number of staff currently certified in Non-violent Crisis Intervention and who have received PIECES training. Promote and facilitate staff attendance at PIECES and Nonviolent Crisis Intervention training when available. This should enhance the staffs' understanding of the Alzheimer's and dementia disease processes.

Explore the feasibility of incorporating education specific to dementia and Alzheimer's disease into the site specific orientation process.

Date Posted: **November 2014**