

The Study on Nursing Risk Management of Patients in Psychiatric Department

Haiying Long* and Hanying Tong

The Psychiatric Hospital of Hanzhong City, Hanzhong, Shaanxi 723003, China

ABSTRACT Because of the specificity of the occupation, the complexity and unpredictability of the disease and the limitation of medical technology, risks in nursing profession are everywhere. The psychiatric nursing is especially a high-risk profession. Nurses face psychopaths for 24 hours and the nursing risks are running through the steps and processes of nursing operations, dispositions and rescues all the time. Patients may make accidents at any time such as injuring themselves, hurting others, smashing objects, escaping and even conducting suicide. Once accident happens, it will bring different degrees of influences to patients and their relatives and even to the society. Hospitals and nurses will undertake economic, legal and personal risks at the same time.

KEYWORDS

Psychiatric nursing
Psychiatric department
Nursing risk

1. Introduction

With the constant strengthening of national legal senses, the current major subject for nursing management of Psychiatric Department is to timely realize and effectively deal with all kinds of risks in nursing services and to reduce occurrences of medical disputes and emergencies. This paper investigates 56 psychiatric nurses who have more than 5 years' seniority in the form of questionnaire, to count risk factors and seek countermeasures in order to effectively avoid occurrences of nursing risks and provide qualified and safe nursing services to patients. Now it is reported as follows.

2. Risk factors

2.1. Risks caused by patient factors

(1) Important factors causing psychiatric nursing risks include the lack of self-consciousness of psychiatric patients who deny their diseases and are uncooperative when receiving treatments, and the complexity, changeableness and uncertainty of psychotic symptoms. For example, psychiatric patients under the control of illusion may be

violent and impulsive, hurt others, hurt themselves, smash objects, escape and so on. Psychiatric patients also have other physical diseases such as hypertension, heart disease, diabetes and so on. Adverse reactions of psychotropic drugs will cause such accidents as dysphagia, choking and falling down because of postural hypotension, all of which bring great risks to nursing services [1].

2.2. Risks caused by management factors

Management factors mainly refer to the following two aspects. Firstly, sound nursing systems of all kinds are not established, so regulations and rules are imperfect. Secondly, there are existing systems which are not strictly executed and carefully checked and implemented. Nurses do not follow the existing systems or replace them with experiences, making the systems exist in name only. Nursing human resources are unreasonably allocated and so on. Duties are unclear including unclear duties between doctors and nurses, nurses and nursing assistants, nurses and patients, nurses and relatives, etc.

2.3. Risks caused by nurse factors

Nurse factors mainly refer to younger nurses, who are featured by large fluidity, inadequate working experience and weak cooperation competence. Nurses fail to timely discover the changes of patients' conditions for their poor sense of responsibility, carelessness and casual observations to patients' conditions. Or they discover the changes of patients' conditions but they fail to report and deal with them in time for the one-sided thinking which results in risks. Careless executions of operation procedures, wrong

Copyright © 2015 Haiying Long and Hanying Tong
doi: 10.18686/jn.v3i1.5

Received: September 7, 2014; Accepted: November 12, 2014; Published online: December 21, 2014

This is an open-access article distributed under the terms of the Creative Commons Attribution Unported License (<http://creativecommons.org/licenses/by-nc/4.0/>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

*Corresponding author: The Psychiatric Hospital of Hanzhong City, Hanzhong, Shaanxi 723003, China. E-mail: long_hy121@sina.com

ways of performing and handling doctors' instructions or relaxed executions of the "three inspections and seven checks" will cause liability risks.

2.4. Risks caused by wrong management of medical facilities and environment

Adverse consequences are caused when nurses use bad equipment and materials with fluke mind or in the situation that no quality problem is found, or caused by defects in environmental management. Due to the irrational structures of wards, visiting relatives, friends or other staff can give dangerous objects to the patients easily which brings considerable risks to nursing management works [2].

3. Management strategies to psychiatric nursing risks

3.1. Evaluating as soon as possible to identify high-risk patients

The risk evaluation of "four precautions" of psychiatric patients is successional and it runs through the whole duration of hospital stay. The risks of patients should be evaluated according to their subjective and objective materials. Firstly, insiders or relatives provide information about patients' conditions before or after they are attacked by the disease when they are admitted to the hospital. Secondly, for high-risk patients, doctors will give special instructions to prevent risks, such as nursing for suicide prevention. Thirdly, the conditions of patients are observed in the whole duration of hospital stay. Generally, primary nurses will evaluate risk factors such as suicide, self-injury, hurting other people, smashing objects and leaving hospitals without permission when psychiatric patients are admitted to the hospital and evaluate the changes of patients' conditions at any time in the duration of hospital stay. If patients have ideas above-mentioned or act like that one more time in one to seven days, nurses will set up patrol tracking table, patrol every 30 minutes, guarantee there is always a nurse on duty and do relevant prevention nursing well.

3.2. Improving all rules and regulations and strengthening management of nursing safety

Improve all rules and regulations, emergency plans, operating instructions, strengthen the legal education to nurses and conscientiously safeguard the right of life and health of patients. Educate nurses with classical cases and organize nurses to carefully study and implement core systems (checking system, shift relief system, rating system), post duties and working procedures. Emphasize the sense of safety of ward of head nurses and put safety management on the first place of quality controls. Nurses are required to strictly carry out the nursing systems and nursing routines of psychiatry, improve rules and regulations, perfect and refine safety management systems such as night ward inspection registration system, shift relief system, storage system of dangerous objects, system inhibiting patients from entering outside hallways without railings, working

system of nurses in the entertainment therapy room, and assessment system of "ten rules contracting" that nurse must know. All these regulations made from bloody lessons must be strictly carried out in working procedures and duties. The primary tasks of nurses are to understand the conditions of patients and guarantee the safety of patients.

3.3. Strengthening the sense of risk management of nurses and paying attention to humanistic care

Organize nurses to learn relevant legal knowledge, professional morality, post duties and rules and regulations frequently, strengthen their sense of risks, enhance safety management and practice prevention-oriented safety management ideas. Nurses are required to know fairly well the new coming patients, patients of "five precautions", old and sick patients and patients having physical complications arrange these patients in intensive care units, strengthen patrols and inspections, closely observe their changes of conditions and strengthen the management of dangerous objects such as keys. Nurses should make a comprehensive inspection to patients' sickbeds, objects, doors and windows once a week and a small examination every day.

Every nurse should be in place and have specific divisions of work in important links of having meals, taking showers and delivering medicines, so as to guarantee every patient to take medicines. Special nurses are arranged to take care of the old and weak patients or patients who are easy to be choked by food. These patients have fixed seats. For them, steamed buns should be shred into peaces and bones and fish bones should be removed. There should be special nurses to assist seriously ill patients to take showers. When delivering medicines and giving medical treatments, nurses should strictly follow the system of "three inspections and seven checks". Meeting of safety management should be held every week to analyze safety hazard existing in ward and some typical cases to share experience and lessons. At the same time, pay attention to humanistic care to nurses, adjust their bad feelings, concern about their work and life, and attach great importance to the principle of fairness and impartiality. Find and make full use of advantages of every nurse to make them positive and creative and increase the sense of ownership of nurses, making them provide services for patients more positively and actively.

3.4. Strengthening the training of professional knowledge and operating skills of nurses and improving their overall qualities

New nurse should have pre-job training for three months. After passing examinations, they will be assigned to endemic areas coached by senior nurses and after one year they can be on duty alone. Professional nurses will have training of three medical basics including basic theories, basic knowledge, basic skills, and professional and operat-

ing skills of psychiatry according to their seniority and they must pass the examinations. Nurses should learn characteristics of psychotic symptoms, and skills and methods on how to contact with patients, communicate with them and protect and restrain them, study how to prevent patients from conducting suicide and hurting others, as well as know the measures on self-protection and professional prevention, the effects and adverse consequences of medicines, operating procedures of all psychiatric emergency plans, the standard writing of nursing documents so as to improve their abilities to correctly identify and effectively withstand nursing risks.

The problem of nurse attendants is another one worth considering. Nurse attendants sometimes make mistakes and cause accidents when they work in wards because of different levels of education and overall qualities and large fluidity. Therefore, it is very significant to strengthen the education of risk awareness and professional training of nursing attendants. So the Nursing Department of our hospital organizes training of post duties, rules and regulations, professional knowledge and relevant operating skills for nursing attendants for many times. In clinical working, head nurses and nurses strengthen the education, supervision and management of nursing attendants which improves the risk awareness and professional abilities of nursing attendants and reduces coefficients of nursing risks [3].

3.5. Executing hierarchical management

It means the Director of the Nursing Department takes the major charge of supervising the work of head nurses, and head nurses are responsible for checking nurses' execution of the specific work. Potential safety hazards in wards should be discovered timely, working conferences of nursing safety should be held every month and prevention-oriented safety management ideas should be practiced.

3.6. Basing on core system

Nursing security system, rating system, checking system, shift relief system, eyre system and restraint protecting system, etc. are all involved in every aspect of work in wards. If nurses can comprehensively master and faithfully implement them in work, nursing risk factors will be reduced to the bottom and safety coefficients will be greatly improved.

3.7. Implementing human-based management with the idea of "happy management"

The primary purposes of the idea of "happy management" are to encourage nurses to pursue joys of working and successful experience, promote harmonious development of personalities and arouse nurses' interest in work to improve the working efficiency. The essence of "happy management" is to start from emotional needs, working needs and personality needs to promote nurses' love for work and stimulate mental activities of nurses to make them enjoy their work, strive for the development in the happi-

ness and for happiness in the course of development. The core of "happy management" is to stimulate nurses' senses of responsibility and ownership to positively participate in management activities, gradually achieve self-value and acquire satisfactions needed for self-actualization. In nature, the "happy management" is a management idea and pattern with the fundamental purpose to promote the freedom and comprehensive development of people.

3.8. Rationally allocating nursing human resources

Guarantee the number of staff on night shifts and sufficient rest of them, put all work in places and improve service qualities. Reinforce the management of newly graduated, practicing and probationary period nurses, do the pre-job training work well, regulate nurses' behaviors and make regular inspection to the operation of nursing techniques and the writing of nursing documents. Strengthen supervision and management on vacations, two-day weekends, busy working time and fatigue time. Strengthen the training of "three basics" and penetrate the "three basics" training into daily works.

4. Discussion

The former closed-off management to psychopaths is neither humane nor works well. At present, apart from special patients (such as senile dementia patients, etc.), open-typed ward has already become the mainstream management style in quite a lot of large specialized hospital. At the same time, patients' safety management also faces new tasks and we hope to solve problems with methods of strengthening hospital management, standardizing medical treatment schemes, and reinforcing the communication with patients and their relatives. In clinical practice, through psychiatric inspections, we know that many patients need psychological nursing treatments and interventions. However, most of the patients do not shift into Psychiatric Department for professional treatments and they only accept treatments in other departments. Literature reports that all people may have psychonosema. Organic psychosis, psychonosema, anxiety disorder and depressive disorder and other body diseases are most common in psychiatric patients for clinical treatment. Opinions of scholars at home and abroad on researches in this field are almost the same. Nurses shall consider patients' emotional changes during the psychiatric patients' hospitalization period which is of great importance. We shall make proper adjustment according to patients' mood changes during our nursing period.

All factors affecting the recovery of patients including patient factors, nurse factors, hospital environment, equipment factors and organization and management factors may become risk factors in nursing services. The nursing objects of Psychiatric Department are psychiatric patients. Because of the specificity of the disease, all kinds of accidents may happen at any time. But through effective risk management, risk events of nursing can be reduced or

even avoided. In terms of management of nurses, the most important thing is to strengthen system management. Conducting risk education of nurses and strengthening the implementation of risk management can not only improve the knowledge of nurses to risk management and make nurses more active and positive in self-study and mastering risk handling plans but also improve nurses' abilities to withstand risks and effectively reduce the occurrences of nursing risks.

The nursing risk management is a part of the hospital risk management. Nursing risk management can achieve good results only on the basis of the overall establishment of hospital risk management. Especially in Psychiatric Department, the real reason of some risk accidents occurring in nursing work does not exist in nurses themselves but in other departments, such as work faults in the logistical support system. Therefore, psychiatric nursing risk management must develop with hospital risk management

synchronously and harmoniously. Only in this way can the hospital achieve better development.

Conflicts of interest

These authors have no conflicts of interest to declare.

Authors' contributions

These authors contributed equally to this work.

References

1. Miao W. Research progress on nursing risk management. *Chinese Journal of Nursing*. 2007;9(9):831.
2. Mao C, Jin W, Kang J. Generation factors and countermeasures on nurse-patient conflicts of psychiatry. *Nursing Practice and Research*. 2007;4(2):128–131.
3. Ge W. Risk management of ward nursing of psychiatry. *Journal of Clinical Medicine in Practice*. 2014;18(4):107–108.