

2013

Sitter Observation

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Recommended Citation

Kilgard, Lisa and Schuler, Elizabeth, "Sitter Observation" (2013). *Nursing Posters*. 22.
https://digitalcommons.centracare.com/nursing_posters/22

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Sitter Observation

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Purpose

To implement a practice change at St. Cloud Hospital which reduces one to one observation in medical and behavioral patients as compared to current routine practice of one to one sitter use as a common intervention used.

To maintain patient safety.

Reduce financial impact of Sitter Observation use.



Literature Review

Hospitals nation wide have successfully reduced costs from one to one sitter usage.

Fall rates have not increased with reduction of one to one sitters.

Lack of facility criteria for Sitter Observers prolong the use of the sitter.

Use of a sitter evaluation tool.
Family to play a major role.
Frequent observation is a common trend.

Education should be provided for staff.
Staff are to be attentive to the patient.
No reading newspaper, no sitting at the door, must be interacting with the patient.

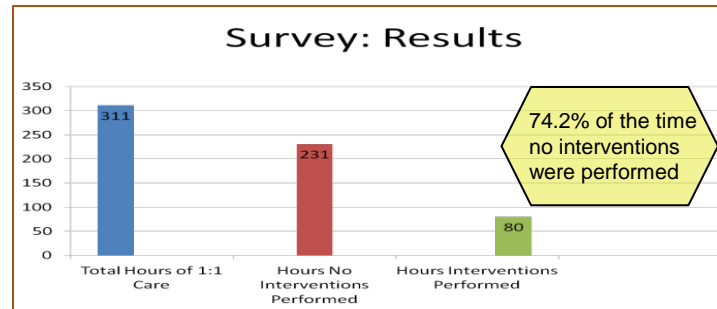
Level E: Theory-based evidence from expert opinion or multiple case reports.

What We Learned

Staff are not performing constant interventions for patients with one to one sitters, indicating patient may not require *constant* observation. Alternatives to one to one sitters are under utilized or in some cases not attempted.

Pre-Measures

Evidence Based Practice: Results for Sitter Observation use



Survey: Overview

The purpose was to collect data which accurately reflects the way one to one sitters are being utilized.

The survey was conducted on 10 different inpatient care areas.

The survey was completed over a two week time period.

During the course of the survey 13 patients were assigned one to one sitters.

Financial Impact

One to one sitter use for the calendar year 2012 indicates that:

23.85 FTEs were used for one to one sitters

48,868 hours were Used for one to one sitters

Total Cost of \$711,765

These cost do not include overtime or differential pay.

The survey will be repeated in September of 2013. We will continue to monitor hours used and cost of sitter observers through Resource Management.

Changes

Policy Changes

•Frequent observation will be utilized prior to initiating a Sitter Observer.

Verbiage Changes

•One to One Sitter will now be called Sitter Observation.

•Staff will utilize the newly developed area on the AID flow sheet to document frequent observation and sitter observation interventions.



Practice Change

Clear documentation must be present showing that multiple interventions have been trialed and found ineffective before placing a sitter. Ongoing documentation must show continued need for sitter.

Staffing and work flow must remain flexible and creative.

Teamwork will be of extreme importance.

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