

2023 Patient Safety Summit

How to Protect Your Nursing License

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Objectives

- 1) Identify the preventative steps to take to prevent a board complaint**
- 2) Explain the first steps to take if you receive a board complaint**
- 3) Define how the board process works and how to make it work to your benefit**

I. Practice Pointers to Protect your License

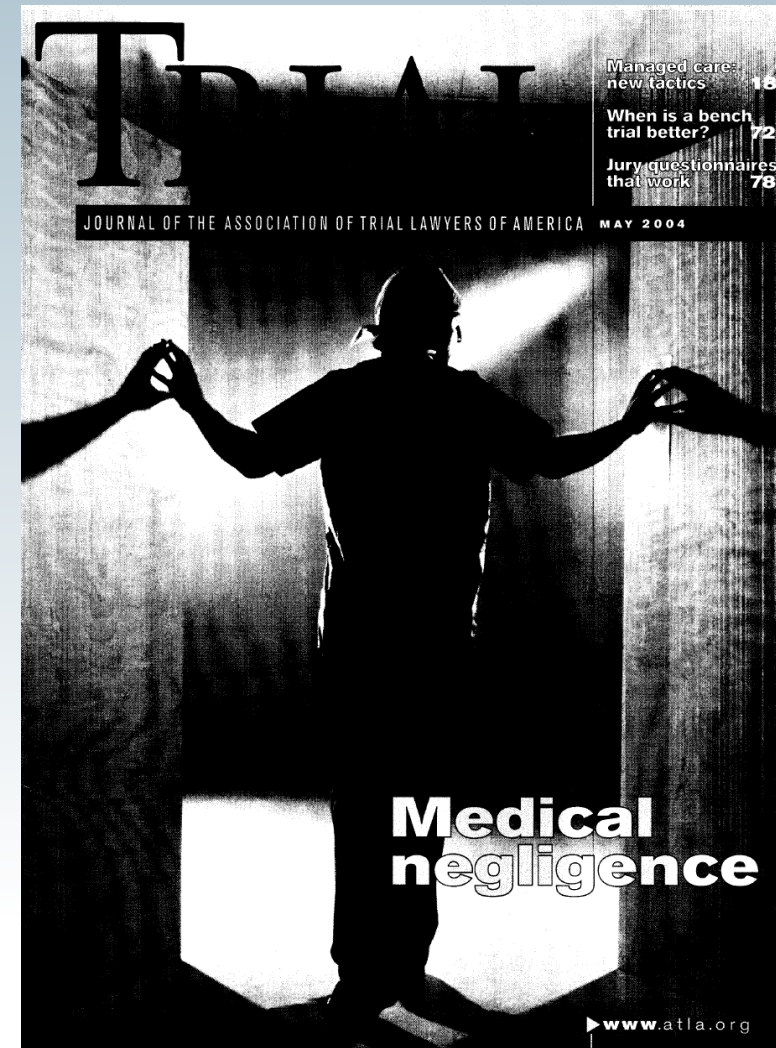
What Can Be Done to Avoid This Process

- Communicate, Communicate, Communicate
- Listen to Patients and Staff
- Complete, Legible Documentation
 - Do not let the chart entice the attorney
- Acknowledge Problems When They Occur

What Can Be Done to Avoid This Process

Virtually every nurse, nurse manager, and physician will agree that medical records are a fundamental means of communication among health care professionals and are required to protect the patient's welfare.

They will also agree that it is important for one health care provider to review the records made by others.



Documentation

- ✓ Accuracy
- ✓ Timeliness
- ✓ Make sure your entries are complete
- ✓ Date and sign entries
- ✓ The chart is not a scratch pad
- ✓ Do not let mistakes follow mistakes
- ✓ If your handwriting is unreadable – print
- ✓ Late entries
- ✓ Record cancellations and changes in appointments

Documentation

- ✓ Document consents
- ✓ Inform patient of adverse events and document it
- ✓ If contentious or non-compliant patient – document details of behavior (be objective - not subjective)
- ✓ Be consistent in your method of documentation
- ✓ Document any issues where chain of command is involved.
- ✓ Avoid opinions about the patient or any type of subjective documentation that is not related to the diagnosis

Documentation

- ✓ If there are errors, make sure your correction of the error is clearly written and initialed
- ✓ Time your correction if necessary
- ✓ Spoliation
- ✓ Assume all chart entries are going to be trial exhibits

Recommendations for a Chain of Command Situation

- ❖ Exercise a collaborative mentality to providing healthcare
- ❖ Before calling a physician
- ❖ Gather all the information you need
- ❖ Provide that your assessment of the patient is thorough
- ❖ Organize your thoughts

Recommendations for a Chain of Command Situation

- ❖ Know what you want when you call the physician
- ❖ Ask the physician if he or she needs more information
- ❖ State directly if you think it is an emergency situation
- ❖ State directly if you want the physician to see and examine the patient

II.

Legal Implications Regarding Patient Falls

Charting is Critical When You Have a Patient Fall

- ❖ In fall-related lawsuits, usually you will find that the patient was reviewed for fall precautions and was given a fall risk assessment.
- ❖ However, many times you will never see that an actual prevention was documented. It would be incredibly helpful in defending a lawsuit if the nurse charted when a prevention was used. For example, chart that the bed alarm was on, that the patient was rounded on, placement of the patient closer to a nurse's station, or the use of a sitter.

Charting is Critical When You Have a Patient Fall

- ❖ Additionally, there is usually inadequate post-fall assessments.
- ❖ Nursing assessments tend to say “no complaints voiced,” “awake, alert, and oriented.”
- ❖ That is not a sufficient assessment. That is an observation, not an assessment.
- ❖ If you want to prevent litigation, nurses need to document the actual strategies in place to prevent a fall and a post-fall assessment.

Charting is Critical When You Have a Patient Fall

- ❖ This is a critical element that is almost always forgotten.
- ❖ Following a patient's fall, the nurse needs to document an assessment of the vital signs, level of consciousness, neuro checks, and functional status pre- and post-fall.
- ❖ If significant changes in the patient's condition occur, consider further diagnostic tests.
- ❖ Further diagnostic tests may include films, CT's, or even a transfer to a higher level of care for further evaluation. If the patient is anti-coagulated, there should be a hospital-wide standard algorithm for post-falls that mandates CT, for example.

Charting is Critical When You Have a Patient Fall

- ❖ These steps speak volumes and may avoid a lawsuit.
- ❖ An incident report, calling the doctor and the family, along with putting the patient back to bed are not considered fall prevention or post-procedure assessments.
- ❖ To legally defend the nurses and the hospital, we must say we have a fall program in place. This will include a complete fall assessment, plan, intervention, evaluation, and a post-fall procedure for nurses.

Preventative Steps

- ❖ Documentation
- ❖ Policies & Procedures
- ❖ Fall precautions consistent?
- ❖ Inform management of Board complaint
- ❖ Make sure 1st response is detailed and shows your concern
- ❖ Any discussions with Patient who made complaint?
- ❖ My Promise: Even though a Board complaint is STRESSFUL... you will be a **BETTER** Healthcare Provider **AFTER** going through the process.

Thank You

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