

Professional Correctional Nursing Practice

#### December 2022

I recently read <u>an article</u> in the American Journal of Nursing that discussed a new report on malpractice claims and risks to nursing practice. While this report did not have a breakdown of claims by nursing specialty, I think the information is very pertinent to our practice as correctional nurses. I encourage you to read the article, but I have highlighted a few important points here. The analysis was done by a medical professional liability insurer, Coverys on claims settled (4634) between 2018 and 2021. They found that 18% of the negative events directly involved nurses, including RNs, LPNs, nursing assistants and nursing students. The majority occurred in in-patient settings.

Interestingly, 45% of the claims were related to patient monitoring; 18% were related to medication administration; 14% were related to patient falls and 10% were related to pressure injuries. Contributing factors included lack of cohesion in the medical team; lack of communication between nurses and providers; dysfunctional organizational cultures; inadequate staffing; insufficient workplace design; and distractions during care delivery, like medication preparation and administration. Unfortunately, I think we can agree we have these issues in our workplaces as well.

The Coverys report specifically emphasized the nurse's role in monitoring patients, especially during transitional times of care when close monitoring is very important to the patient's well-being. These include newly admitted patients and patients transferring from one unit to another. In correctional nursing, we also have new admits and patients whose housing unit may change because of an identified medical or mental health condition. Legal actions have been initiated due to nurses not monitoring their patients for foreseeable complications; not identifying what they are seeing; or not reporting these adverse changes to the provider. The article goes on to say that documentation must be specific and comprehensive. It suggests that nurses must be vigilant and attentive in their patient encounters. They must be careful not to let interruptions and distractions occur when they are providing clinical care and medication prep and administration to their patients. Perhaps most importantly, nurses must thoroughly communicate their findings to providers and colleagues.

Although I doubt that these facts were a revelation to anyone, I think it is very important in correctional nursing practice that we remain aware of these areas of potential threat to patient safety and act accordingly.

I wish for you and yours a healthy and happy holiday season!

#### Newsworthy Notes

The American Correctional Nurses Association is wrapping up 2022 activities and continues planning for 2023. If you are interested, they are always looking for volunteers to help on committees. Check out the website!

The ACA Winter Conference is set for January 27-31, 2023 in Orlando, Florida. Preliminary information can be found <u>here.</u>

The NCCHC Virtual Conference is available on its website, in case you were not able to join live in Las Vegas in October.

Remember that you can find our past Newsletters on the CorrectionalNurse.Net website in the Newsletter Archive.

Thanks for all you do, and Be Safe!!

# CorrectionalNurse.Net

This month at **CorrectionalNurse.Net** our professional practice discussion will include impaired nurses and caring in the correctional environment. Our clinical topic concerns finding chronic care

guidelines. As always, announcements for new blog posts will be posted on our FaceBook pages and on Instagram.

Please FOLLOW US and check back often to ensure that you get notification of new posts!

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## **Correctional Nurse Educator**

Our 50% off featured class this month at The Correctional Nurse Educator is Suicide Prevention for the Correctional Nurse. I hope you enjoy it!

Remember that The Correctional Nurse will work with your group to provide accredited continuing education classes at a discounted and affordable cost.

VISIT THE CORRECTIONAL NURSE EDUCATOR NOW

## **Nursing Behind the Wall**

This month at **Nursing Behind the Wall**, you will meet Mr. Howard, a gentleman with foot pain.

VISIT NURSING BEHIND THE WALL NOW

In closing, I appreciate you taking the time to read this newsletter, and I hope that you will find our sites interesting and educational. Our profession of Correctional Nursing is unique and sometimes challenging, but always very important to our patients. The impact we make is farreaching, even if it is not always evident as we care for our patients. I have ALWAYS been proud to say that I am a Correctional Nurse – I hope that you are as well!



## Inspiration



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