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Hospitals often struggle with the need to provide close watch over a potentially dangerous patient without relying on skilled nurses or security officers who are needed elsewhere. Some hospit solution.

A patient watch is not the same as a sitter program in which a healthcare attendant is assigned to watch over a patient who is elderly, disabled, or otherwise impaired. The sitter is effective for patients who may be at risk of falling or other nonviolent risks, but they are not appropriate for patients who are potentially dangerous, explains e

i, vice president of vertical markets for Allied Universal, a security and facility services company based in Conshohocken, PA.

Rather than a healthcare attendant, a patient watch involves a security officer posted with a patient for the purpose of protecting that patient and others, Bukowski explains. For a patient watch to be appropriate, the patients must be identified according to state laws as a threat to themselves or others and placed in an involuntary patient status by the appropriate authority. Otherwise, directing a security officer to watch a patient could be construed as coercion or even false imprisonment, Bukowski cautions.

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Under some conditions, such as when a patient is suicidal, there must be a one-on-one patient watch with a qualified staff member monitoring the patient at all times, Bukowski explains.

In other situations, it is permissible to direct a staff member to watch more than one

clock. Pulling existing officers from their duties to do so would mean leaving other needs unfulfilled throughout the facility.

CNAs and other clinical staff to do this just because