Name of Policy:	Private Duty Nurses				
Policy Number:	3364-110-06-03				
Department:	Nursing Service	MEDICAL CENTER			
Approving Officer:	AVP Patient Care Services/Chief Nursing Officer (CNO)				
Responsible Agent:	AVP Patient Care Services/Chief Nursing Officer (CNO)	Effective Date: 3.15.2021			
Scope:	The University of Toledo Medical Center (UTMC)	Initial Effective Date: June, 1979			
New policy proposal Minor/technical revision of existing policy Major revision of existing policy X Reaffirmation of existing policy					

(A) Policy Statement

Private duty nurses may be requested by a physician, patient, or family member.

(B) Purpose of Policy

To provide nursing care, on an individual basis, as prescribed by the physician.

(C) Procedure

- 1. The patient or family must make their own arrangements to provide special duty nurses. They also must assume responsibility for payment. A professional nursing agency recognized by UTMC must be used. The Staffing Coordinator or House Supervisor, can provide the names and phone numbers of approved agencies.
- 2. Private duty nurses are not permitted to practice nursing in any of the critical care units. Private duty nurses will only perform those functions for which they are licensed and show evidence of competency. The charge nurse or designee retains responsibility for the care of the patient; therefore, they should make appropriate inquiries throughout the shift and receive a report at the end of the shift.
- 3. Unlicensed assistive personnel (aides) employed by families are limited to providing basic comfort measures, grooming, hygiene, feeding, and toileting, as supervised by a unit Registered Nurse (RN). They may also provide one-to-one monitoring of patients which would decrease restraint use and enhance the patient's safety.
- 4. Private duty nurses must report to the Nursing Office prior to reporting to the unit to have current licensure and BLS status verified. Prior to initial work the private duty nurse must complete all applicable parts of the agency nurse orientation.

Approved by:	Review/Revision Date:		
		1980	1/1993
		1981	1995
/s/		1982	8/1999
Monecca Smith, MSN, RN	Date	1/1983	3/2001
AVP Patient Care Services/Chief Nursing Officer		7/1984	2004
č		1985	10/2007
Review: Policy & Standard Committee, 10/2011, 4/15, 4/18,		1986	6/22/2010
3/2021		1987	10/28/2011
Revision Completed By:		1988	4.24.15
Nancy Gauger, MSN, RN & Andy Fox, BSN, RN		1989	4.15.18
Policy was revised due to: compliance with new standards.			3.15.2021
		Next Review Date:	3/2024

EMERGENCY PROCEDURES SUMMARY SHEET

FOR PRIVATE DUTY NURSES

CODE RED: Fire

When you hear a **CODE RED** announced, report to the charge nurse on your floor, and ask for further instructions. When a fire is directly in or adjacent to your area, do the following:

- **R: RESCUE/REMOVE** your patient from the fire area if it does not jeopardize your own life.
- A: Sound the ALARM by calling the emergency number 77.
- C: CONFINE the fire by closing any doors near the fire as it will slow down the spread of the fire.
- **E: EXTINGUISH** the fire with the nearest extinguisher, or **EVACUATE** the area following instructions from UTMC Police or Toledo Fire Department Personnel.

<u>CODE GRAY</u>: Severe Weather/Tornado

<u>Tornado Watch/information</u>: During a CODE GRAY Watch, you need to ask the charge nurse on the floor for the latest information on the severe weather bulletin. A tornado 'watch' is announced to alert staff that potential weather exists and that there is a need to initiate further safety procedures if the tornado threat increases.

Tornado Warning: Tornado sighted within 10-mile radius of UTMC. During a **CODE GRAY Warning,** if your patient is ambulatory, take him/her to the ground floor of whatever building you are in, or seek shelter in a interior hallway. If your patient is bedridden, turn the bed away from the windows, draw curtains and shades, pack pillows around your patient's head, and you should seek shelter inside the bathroom of the patient's room and wait there until the UTMC operator has announced the ALL CLEAR.

<u>CODE BLACK</u>: Bomb Threat: If you hear a Code Black announced please see the charge nurse for further instructions and information.

UNIT COMPETENCY ORIENTATION CHECKLIST FOR PRIVATE DUTY NURSES

Name_____

The Private Duty Nurse will complete this checklist with the charge nurse or designee before caring for a patient.

	Unit	Date
Tour of unit		
Introduction to staff		
Identify resource person		
Competency tested for Electronic Medical Documentation		
Supply location and charge system		
Role of Charge Nurse		
Clarification of duties – RN, LPN, NA		
Location of reference materials		
Any unit specific policies that may apply		
Patient care routines		
Stairwell & Exits		
Fire Extinguisher/Hose/Alarms		
Code Cart – location		
Defibrillator – location		
Nurse call device		
How to call a RRT		
Competent with patient specific equipment		

Private Duty Nurse Signature:

Preceptor Signature:

Comments:

Return the Orientation Checklist and Emergency Procedures Summary Sheet (signed) to the Nursing Office at the end of your first shift. It will be kept on file in the Nursing Office.

Policy 3364-110-06-03 attachment