

Long-Term Care Survey Alert

Program Development: Develop A Surefire 911 Policy

Know when to let your fingers do the lifesaving.

You'd think that deciding to dial 911 would be simple - but that isn't always the case.

When a resident has clear signs of heart attack or stroke - or loses consciousness - calling 911 is a no-brainer. But facilities have to walk the tightrope of responding appropriately to emergencies without becoming known as the facility that cried wolf too many times. These three strategies should help you stay on the high wire.

1. Consult with the hospital. Meet with the director of emergency services at the hospital and ask for input in developing your protocol.

2. Teach nurses to follow their gut instincts. If the nurse feels the resident has a problem warranting emergency attention, she should activate the emergency system and then review the situation later rather than vice versa. In other words, when in doubt: dial.

3. Do a biannual review of ER transfers from the facility. Invite the ER medical director or nurse to the review to see if the facility is sending patients to the ER who didn't need to go (for example, for pain that could have been managed in the facility).

Source: Shelley Cohen, RN, CEN, Howenwald, TN.