T.C. Sağlık Bakanlığı
Türkiye Kamu
Hastaneleri Kurumu

İzmir Kamu Hastaneleri Birliği Güney Sekreterliği
Tıbbi Hizmetler Daire Başkanlığı

The Applications of the Patient and Personal Security

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Patient and Personal Security

- In this presentation, you will learn about the measures and optimisations to prevent any potential harm to patient and personel.

The Regulations About the Patient and Personel Security

- The Regulations of Performance and Quality in Health Sector
- The Regulations of Patient and Personal Security
- The Regulations of Patient Rights
- The Circular of the Application of the Patient Rights
- The Circular of the Personal Security
- The Circular of the Prevention of Mobbing
- The Regulations of the Control of Medical Waste
- The Regulations of the Job Health and Security
- The Guide for Working with Antineaplastic Medicines
- The regulations for the Radiation Security

The Goals of Patient Security

- ✓Providing proper identification
- ✓Providing transfusion security
- ✓Providing information security
- ✓Providing lab security (test security)
- ✓Providing facility security
- ✓Providing patient informatory and receiving patient's approval

- ✓Providing secure surgery
- ✓Providing grug security
- ✓Providing device security
- ✓Providing radiation security
- ✓Infection control and prevention
- ✓The installation of the security logging system
- ✓Providing the prevention of the falls

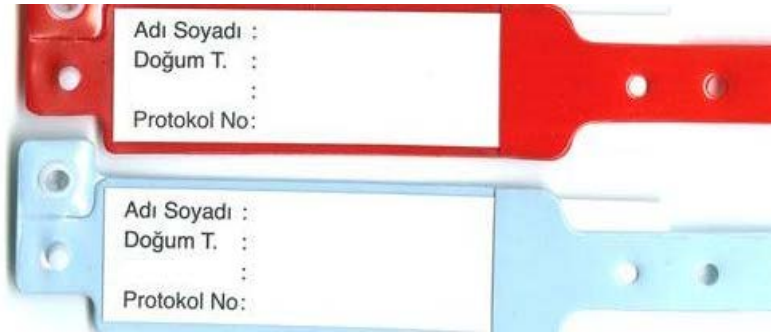
The Goals of Personal Security

- ✓The minimization or removal of the risks after risk analysis
- ✓Personal-oriented health screening on a regular basis
- ✓ Providing the usage of personal protection devices
- ✓ Minimization of the injures caused by sharp equipments
- ✓Infection control and prevention
- ✓Providing facility security
- ✓Providing radioation securtity
- ✓Prevention of fhe violence to the personel
- ✓ Providing ergonomics
- ✓ Ergonominin sağlanması
- ✓Mnimization of noise
- ✓ Providing psychological support
- ✓ Taking precautions for the dangerous substances

Description and Confirmation of the Patient Identification

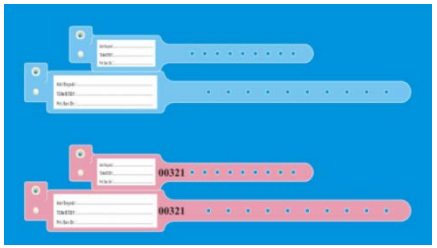
OBJECTIVE;

To provide the proper application to the proper patient for all the operations after the patient checked-in.



Description and Confirmation of the Patient Identification

- ✓ Every checked-in patient has given a white wristband.
- ✓ The red colored identification is used for the allergic patient.
- ✓ The barcoded wristband that is used for patient identification has the information below on it:
  - ✓ Patient full name
  - ✓ Protocol number (with big and bold font)
  - ✓ Birthdate (dd-MM-yyyy)
- ✓ Patient room# and location are not used



The identification that is used for psychiatri clinic patients must be determined by the hospital.

The Usage of the Identifier and Confirmation

- When mother gives birth,
- When the patient has been moved to other clinic,
- When any allergy detected:
- When the identifier is malfunctioned.,

- The identification confirmation of the patients is done by active communication technique.
- A training on the identifier and the confirmation process is offered to the patient, his/her relative and personel.

Transfusion Secuirty

- Objective;
  - ✓ Minimization of the wrong transfusion applications
  - ✓ Providing the security of the patient and the donor.
  - ✓ Providing the personel security.

Transfusion Secuirty

- ✓ The request of blood and/or blood product
- ✓ Identification confirmation
- ✓ The control of the cross-comparison test results
- ✓ Monitoring the vital symptoms

✓It covers the required actions on an event of transfusion reaction.

Transfusion Secuirty

- Cross comparison test results and patient information shall be confirmed by two health care staff before transfusion
- Two health care staff shall confirm just before transfusion:

- ✓ The expiration date of the product,
- ✓ Identity of the patient,
- ✓ Type and amount of blood and/or blood product,
- ✓ Planned time of transfusion of the product

The Security of the Transfusion Process

- The first 15 minutes of the transfusion must be observed by the personel.
- The vital symptoms must be monitored every 40 minutes during the transfusion.

Information Security

- The protection of the information from unauthrized access, use, disclose, desctruction and change.

Laboratuvar Güvenliği/Test Güvenliği

- ***Lab security;***

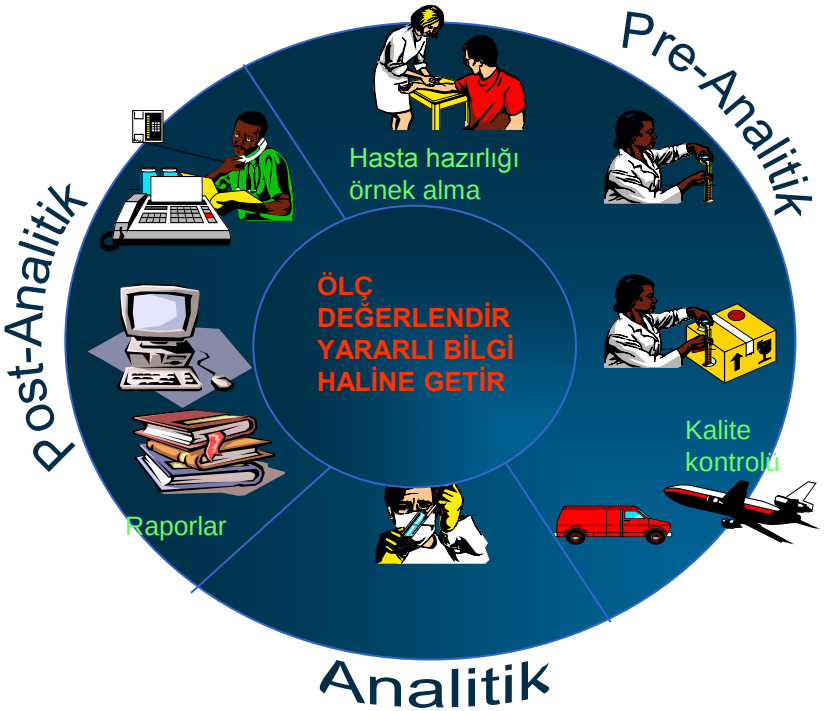
  It is the usage of the rules and procedures during the act of working in order to protect the personel and the work materials.

- ***Test security;***

  It is the process in order to get the proper sample for the tests.

LAB SECURITY / TEST SECURITY

- It is required to create a system in order to provide the test and patient securitry for all the processes: pre-analysis, analysis, post-analysis.



FACILITY SECURITY

- In order to provide a continuous and secure services to patients and personel, it is required to keep the physical, technical and humanistic capacity ready.

Providing the Facility Security

- ✓ The examination of the data gathered from building monitoring.
- ✓ Providing the security of the hospital infrastucture
- ✓ Providing the property and human security in the foundation
- ✓ The practice of emergency and disaster management
- ✓ The practice of medical waste management
- ✓ The maintenance and calibration plans of the medical devices

Providing the Facility Security

Facility security covers:

- ✓ Taking precautions in order to prevent facility oriented falls.

- ✓ The continous and secure service of the internal water, cistern, electrical energy and gas.
- ✓ The periodic control and secure usage of the elevators

- ✓ The periodic control and maintenantce of the air ventilation system
- ✓ The regulations for the medical gas systems and pinched gas containers.
- ✓ The regulations for the dangerous substances

Patient Informatory and Approval

- *Objective;*

  While taking the health service, it is required to take the patient's approval in prder to secure the patient-doctor confidentialilty.

  Taking the patient's approval and the informatory is very important in terms of economical and judicial factors.

Patient Informatory

- ✓ Informatory covers everything from the presentation of the service to the diagnose during the patient's stay in the hospital.
- ✓ In the informatory, it is required to coveer everything that concerns patient's decision directly or indirectly.

Taking Patient's Approval

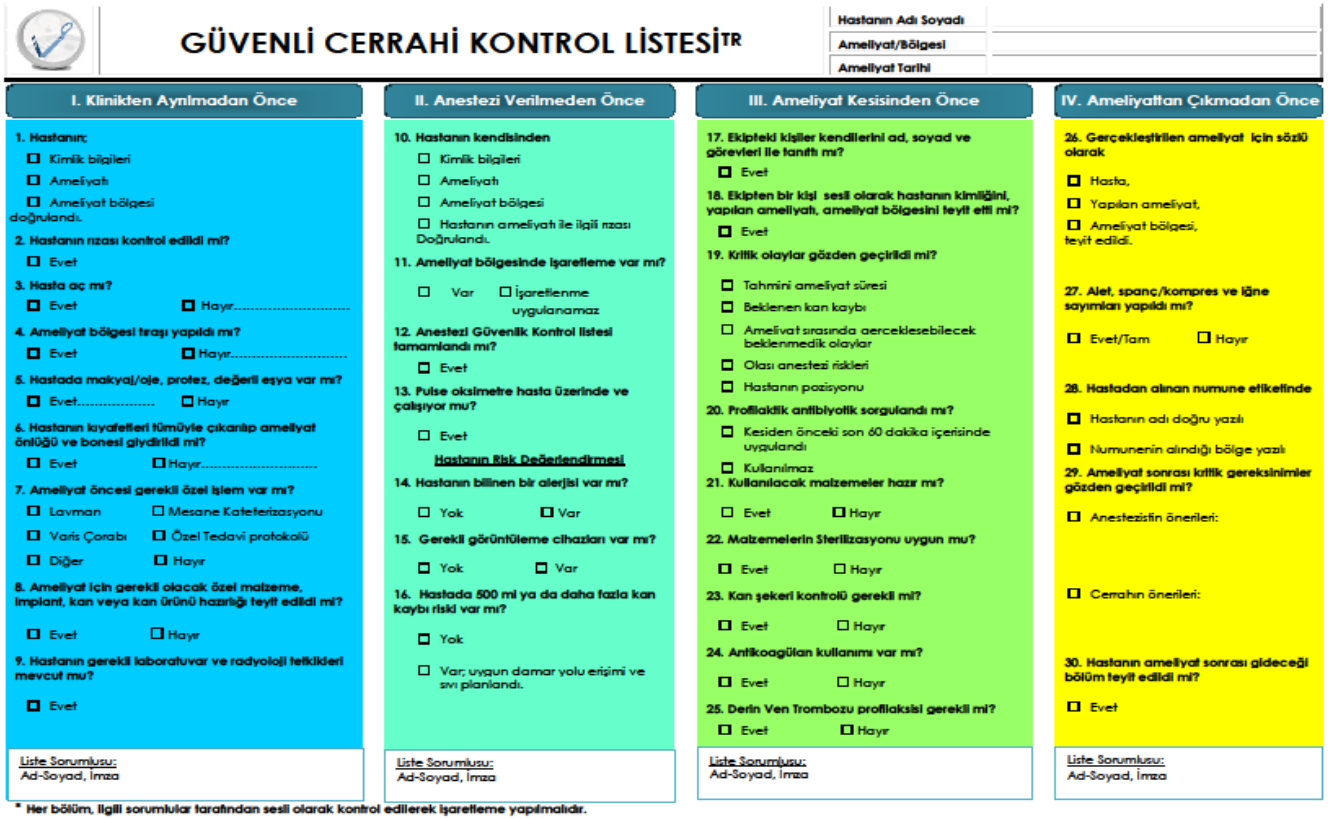
- ✓ For every medical intervention and cure, it is required to take the patient's approval.
- ✓ The responsibility is belong the personal who is going to take care of the patient.
- ✓ The patient's approval form must be maximum of 2 pages.

Secure Surgical Applications

- **10 Main Objectives:**
  1. Right patient, right side
  2. Preventing the harm of anestesia
  3. Preventing the loss of respiration
  4. Preventing excessive hypovolemia
  5. Preventing the allergic reactions
  6. Preventing the infection of the surgical area
  7. Preventing the sponge in the surgical area
  8. Securing the patology samples
  9. Maintaining the team spirit in the sutgery
  10. Providing the correct logging

• 3 Steps for the Secure Surgical Operation

a) Pre surgery
b) Surgery
c) Post surgery



GÜVENLİ CERRAHİ KONTROL LİSTESİ[TR]

Hastanın Adı Soyadı
Ameliyat/Bölgesi
Ameliyat Tarihi

I. Klinikten Ayrılmadan Önce

1. Hastanın;
☐ Kimlik bilgileri
☐ Ameliyatı
☐ Ameliyat bölgesi
doğrulandı.
2. Hastanın rızası kontrol edildi mi?
☐ Evet
3. Hasta aç mı?
☐ Evet ☐ Hayır.....
4. Ameliyat bölgesi traşı yapıldı mı?
☐ Evet ☐ Hayır.....
5. Hastada makyaj/oje, protez, değerli eşya var mı?
☐ Evet..... ☐ Hayır
6. Hastanın kıyafetleri tümüyle çıkarılıp ameliyat önlüğü ve bonesi giydirildi mi?
☐ Evet ☐ Hayır.....
7. Ameliyat öncesi gerekli özel işlem var mı?
☐ Lavman ☐ Mesane Kateterizasyonu
☐ Varis Çorabı ☐ Özel Tedavi protokolü
☐ Diğer ☐ Hayır
8. Ameliyat için gerekli olacak özel malzeme, implant, kan veya kan ürünü hazırlığı teyit edildi mi?
☐ Evet ☐ Hayır
9. Hastanın gerekli laboratuvar ve radyoloji tetkikleri mevcut mu?
☐ Evet

Liste Sorumlusu:
Ad-Soyad, İmza

II. Anestezi Verilmeden Önce

10. Hastanın kendisinden
☐ Kimlik bilgileri
☐ Ameliyatı
☐ Ameliyat bölgesi
☐ Hastanın ameliyatı ile ilgili rızası
Doğrulandı.
11. Ameliyat bölgesinde işaretleme var mı?
☐ Var ☐ İşaretlenme uygulanamaz
12. Anestezi Güvenlik Kontrol listesi tamamlandı mı?
☐ Evet
13. Pulse oksimetre hasta üzerinde ve çalışıyor mu?
☐ Evet
Hastanın Risk Değerlendirmesi
14. Hastanın bilinen bir alerjisi var mı?
☐ Yok ☐ Var
15. Gerekli görüntüleme cihazları var mı?
☐ Yok ☐ Var
16. Hastada 500 ml ya da daha fazla kan kaybı riski var mı?
☐ Yok
☐ Var; uygun damar yolu erişimi ve sıvı planlandı.

Liste Sorumlusu:
Ad-Soyad, İmza

III. Ameliyat Kesisinden Önce

17. Ekipteki kişiler kendilerini ad, soyad ve görevleri ile tanıttı mı?
☐ Evet
18. Ekipten bir kişi sesli olarak hastanın kimliğini, yapılan ameliyatı, ameliyat bölgesini teyit etti mi?
☐ Evet
19. Kritik olaylar gözden geçirildi mi?
☐ Tahmini ameliyat süresi
☐ Beklenen kan kaybı
☐ Ameliyat sırasında aerceklesebilecek beklenmedik olaylar
☐ Olası anestezi riskleri
☐ Hastanın pozisyonu
20. Profilaktik antibiyotik sorgulandı mı?
☐ Kesiden önceki son 60 dakika içerisinde uygulandı
☐ Kullanılmaz
21. Kullanılacak malzemeler hazır mı?
☐ Evet ☐ Hayır
22. Malzemelerin Sterilizasyonu uygun mu?
☐ Evet ☐ Hayır
23. Kan şekeri kontrolü gerekli mi?
☐ Evet ☐ Hayır
24. Antikoagülan kullanımı var mı?
☐ Evet ☐ Hayır
25. Derin Ven Trombozu profilaksisi gerekli mi?
☐ Evet ☐ Hayır

Liste Sorumlusu:
Ad-Soyad, İmza

IV. Ameliyattan Çıkmadan Önce

26. Gerçekleştirilen ameliyat için sözlü olarak
☐ Hasta,
☐ Yapılan ameliyat,
☐ Ameliyat bölgesi,
teyit edildi.
27. Alet, spanç/kompres ve iğne sayımları yapıldı mı?
☐ Evet/Tam ☐ Hayır
28. Hastadan alınan numune etiketinde
☐ Hastanın adı doğru yazılı
☐ Numunenin alındığı bölge yazılı
29. Ameliyat sonrası kritik gereksinimler gözden geçirildi mi?
☐ Anestezistin önerileri:
☐ Cerrahın önerileri:
30. Hastanın ameliyat sonrası gideceği bölüm teyit edildi mi?
☐ Evet

Liste Sorumlusu:
Ad-Soyad, İmza

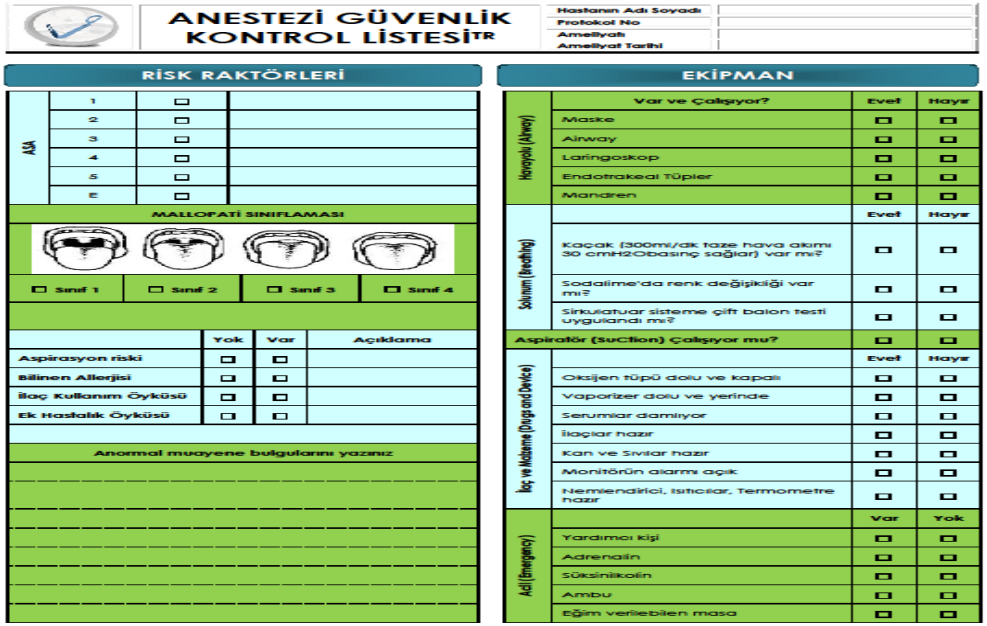
* Her bölüm, ilgili sorumlular tarafından sesli olarak kontrol edilerek işaretleme yapılmalıdır.

Pre-surgery

- The List for the Anestesia Security Control

It provides the things below:

- Pre-anestesia examination
- The control of the anestesia device
- The control of the anaesthetic drugs and substances



ANESTEZİ GÜVENLİK KONTROL LİSTESİ[TR]

Hastanın Adı Soyadı
Protokol No
Ameliyatı
Ameliyat Tarihi

RİSK RAKTÖRLERİ

ASA

1	☐	
2	☐	
3	☐	
4	☐	
5	☐	
E	☐	

MALLOPATİ SINIFLAMASI

☐ Sınıf 1 ☐ Sınıf 2 ☐ Sınıf 3 ☐ Sınıf 4

	Yok	Var	Açıklama
Aspirasyon riski	☐	☐	
Bilinen Allerjisi	☐	☐	
İlaç Kullanım Öyküsü	☐	☐	
Ek Hastalık Öyküsü	☐	☐	

Anormal muayene bulgularını yazınız

EKİPMAN

	Var ve Çalışıyor?	Evet	Hayır
Havayolu (Airway)	Maske	☐	☐
	Airway	☐	☐
	Laringoskop	☐	☐
	Endotrakeal Tüpler	☐	☐
	Mandren	☐	☐
Solunum (Breathing)		Evet	Hayır
	Kaçak (300ml/dk taze hava akımı 30 cmH2O basınç sağlar) var mı?	☐	☐
	Sodalime'da renk değişikliği var mı?	☐	☐
	Sirkulatuar sisteme çift balon testi uygulandı mı?	☐	☐
Aspiratör (Suction) Çalışıyor mu?		☐	☐
İlaç ve Uygulama (Drugs and Device)		Evet	Hayır
	Oksijen tüpü dolu ve kapalı	☐	☐
	Vaporizer dolu ve yerinde	☐	☐
	Serumlar damlıyor	☐	☐
	İlaçlar hazır	☐	☐
	Kan ve Sıvılar hazır	☐	☐
	Monitörün alarmı açık	☐	☐
	Nemlendirici, Isıtıcılar, Termometre hazır	☐	☐
Acil (Emergency)		Var	Yok
	Yardımcı kişi	☐	☐
	Adrenalin	☐	☐
	Süksinilkolin	☐	☐
	Ambu	☐	☐
	Eğim verilebilen masa	☐	☐

Drug Security

- Drug security covers all the actions in order to prevent unexpected harm to patient and personel.

Drug Security

➢ Objectives;

It covers:

- The management of the drugs that came with the patient
- The management of the drugs that the patient will be using during his/her stay in the hospital
- The management of the drugs that the patient will be using after her/his stay in the hospital
- The management of the drugs with high risks
- The management of the drugs with the green and red prescription.
- The management of the mistakes from the usage of the drugs.
- The management of the unexpected risks from the drug usage.
- The management of the smart usage of the drugs
- The management of the storage policy for the drugs

makes a addictive of these drugs
Have been using for 28 years. Did not do any addictive.

The Security of the Medical Devices

- The inventory of the medical devices must be kept on department-basis.
- The plans of the calibration and maintenance of the medicel devices must be kept.
- The calibration tags must be used on the devices thas has already been calibrated.

Radiation Security

- The Fundamentals of the Radiation Security

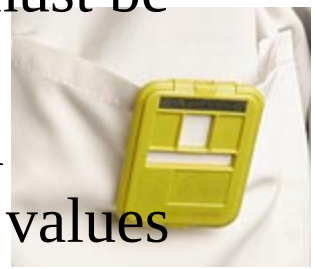
- ***Necessity:*** No radiation operation should be allowed that does not provide pure benefit.
- ***Effectiveness:*** The dosages must be kept as lowe as possible.
- ***Personal dosage limits:*** The yearly dosage limits are determined by the international standards and regulations in order to prevent any damage to patient's health.

The Methods to Minimize the Radiation Dosages that the Patients and Personel are Exposed To

- Patients

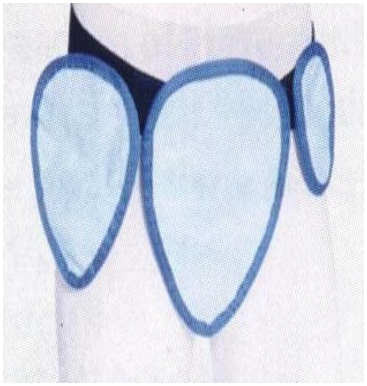
The Measures In Order to Protect the Personal from Radiation

- **Radiation protecters must be used.**
  - ✓ The facilities should keep the radiation protecters in different sizes for different personel.
- **Dosimeter should be followed up**
  - ✓ The dosage after dosimeter monitoring period must be measured
  - ✓ Total yearly radiation dosage must be measured
  - ✓ The radiation dosages must compared to yearly values determined by the health regulations.



- **The consultations of the personal must be done.**
  - ✓ Hemogram: Once in 6 months
  - ✓ Peripheral smear: Once in 6 months
  - ✓ Dermatological consultation: Once in a year

The Equipments for the Personal Protection



- **Gonad Protective**

Troid Protective

Lead Glasses

Lead Gloves

The Prevention of the Falls

- The patient must be exemined for the fall risk
- The precautions must be taken for the patients that holds the higher fall risk

- The Quality Management Department must bu notified when a patient falls down.

  – The practices in order to prevent future situations must be started immediately.

How to monitor the ratio of the fallen patient?

Indicator cards must be prepared	**Monitoring mus be done according to the indicator card**	**The periodic analyses must be done for the indicator cards**	**Preventive activities must be started when needed**

Risk Assessment

- Risk assessment must be done in order to keep the personel security and health on a higher level.
- It must be intented that harms caused by the service presentation must be minimized.

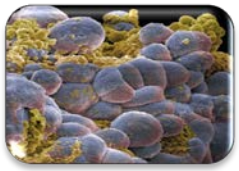
Risk Assessment

Minimal risk assessment:

Radiation

Noise control

Hazardous material

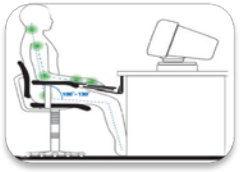


Carcinogenic maternal

Medical wast

infection

Allergen



Ergonomics

icommunication

violence

- In must be department-oriented.
- Any precautions must be made in order to main the personel security.
- The situations that the personel was exposed must be logged.

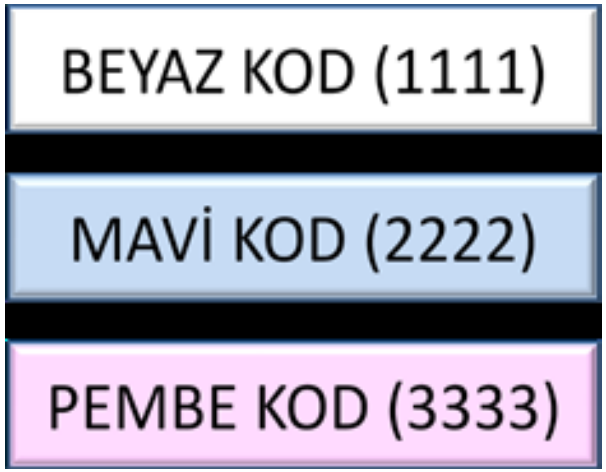
The Stages of Risk Assessment

- ✓ Current situation must be detected
- ✓ Hazards must be determined
- ✓ Risks must be identified
- ✓ Precautions in order to minimize the risks must be taken
- ✓ The continuity of the precautions must be maintained
- ✓ The update of the risk assessment must be made

The Applications of the Color Codes

- It is the creation of the emergency situation system in order to detect the risks that are envisioned in the health foundations, precautions in order to minimize that risks and provide the risk management.

The color codes that are used in our country.



Blue Code

- It is the emergency situation management tool in order to interfere with the patient, patient's relative, and all hospital personal.
- It is the only code that is international.

Blue Code

Pink Code

- It is the emergency situation management tool for any case that contains the new-born evasion.

White Code

- It is the emergency situation management tool for any case that contains violence to any hospital personel.

The Management of the Codes

- ✓ The notification system most be installed
- ✓ Moderators must be identified
- ✓ The organizations and trainings must be scheduled about the codes.
- ✓ The actions must be taken in order to modify the codes.
- ✓ The logs must be keps about the code applications.
- ✓ Practices intented to code applications must be schuduled periodically.

The Health Screening of the Personal

- The health screening of the personal must be made perodically.
- The health screening programme must be prepared.
- The risks identified on a department and program basis must be prepared towards the opinioons of the MDs.
- The results of the screenings must be examined by the specialists.
- The personal must be notified about the results.
- The information security about the screenings must be maintained.

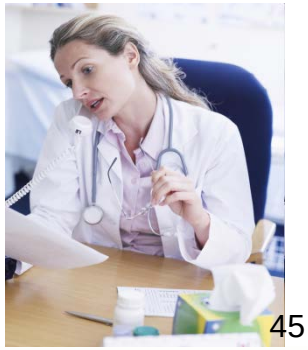
Personal Protection Devices

- The personal protection devices must be used by the personel.
- The personal protection devices must be used on a department basis must be identified.
- The personal protection devices must be reachable at the working areas.
- The training must be scheduled on how to use the personal protection devices.

The Communication Security Among the Personel

➢ Objective:

- Giving and receiving instructions during the patient care and cure period
- The operations related to the critical test values
- Providing the security among the personel
- The management of the special signs and abbreviations



The Secure Transfer of the Patients

- It covers:

- ✓ The transfer of the patients to the departments
- ✓ The transfer of the patients out of the hospital
- ✓ The transfer of the patients in the emergency service
- ✓ The transfer of the patients with the special needs
- ✓ The transfer of the new-born, surgery, intensive care, dialiysis and psychiatri patients
- ✓ The important points that must be paid attention during the tranfer of the patients
- ✓ The usages and availability of the devices that will be used during the transger
- ✓ The identification of the personel that are responsible for the transfer

Patient Privacy

- ***Patient privacy,*** is a private information that the patient wants to keep between the personal and herself/hisself.
- This privacy contains the information about the sickness of the patient as well as his/her physical and mental privacy.

THANK YOU!