Staff Education Training Tips

Introduction

The following section regarding staff education has been developed knowing that you may choose to do all of this, or part of it. We hope that we have made this section comprehensive without being overly burdensome. Make this plan work for you; use what you want and remember the goal is to communicate the changes with color-coded alert wristbands to your staff.

This section was created with the following design objectives in mind:

1. Staff can be easily guided through the changes with color-coded alert wristbands.
2. The instructors are well-equipped to teach about these changes.
3. No new materials have to be created by staff; this should be nearly a “turnkey” education event.
4. Staff can feel confident that all hospitals in this state are hearing the same message and a similar implementation plan. This is important if staff work at more than one hospital.

Who and how will this be done?

This is a decision that needs to be made within your organization. It can be as simple or formal as you desire. Suggestions include staff meetings, formal education sessions, annual competencies – whatever works for your organization. It should be done routinely at new employee orientations so the new staff are quickly brought up to speed on this initiative.
**Key Preparation Before You Start**

Review your section under the “Implementation Work Plan” to be sure you have included all of your stakeholders in this process. Consider all of the stakeholders in your organization when it comes to color-coded wristbands and who is impacted in this system change.

**Thoughts to consider:**

1. While ultimately the nurses are the people who usually band the patient, the health unit clerks are greatly involved in the system process. Include them in the training. They can better assist the nurses when they have this information.

2. Consider the housekeeping staff. They are often present in a patient’s room when a patient is trying to get up or walk to the bathroom. If the housekeeping staff know a yellow wristband means “Fall Risk,” and they see a patient trying to get up, they can call the nursing staff, alert them, and potentially prevent a fall.

3. What about the dietary technicians? A red wristband means there is an allergy – and not just to medicines. Maybe it is a food allergy and the red band will alert them to check for that and note it in the patient’s profile.

4. Don’t make assumptions about the medical staff getting this information. Attendings, intensivists, residents, and interns need to know what these colors mean. Pull them into the process. This promotes safe healthcare for all providing and receiving it.

5. Who else? Take some time to quietly observe the activities of the day at one of the nurses’ stations. Just a 30-minute observation and you will probably “see” and “hear” things that make you remember another stakeholder. Include them in the education process. Once done, you can begin the actual training part.
Getting Started

Most people will use this brochure as the main teaching material. It contains most of the pertinent information staff need to know for this initiative. **We suggest you do not give out the brochure until the end of your training because people may start reading the brochure instead of listening to you.** Pass it out at the end of the meeting, but tell them upfront that there is a brochure with all of the information you are presenting and you will pass it out later.

Here are the main points you want to make during your training session:

1. **Start with a story** – Adults want to know “why” they should do something; simply telling them they need to start doing this “because they do” is not sufficient information to get high levels of compliance. Besides, isn’t that what you would want to know, too? A story gives them information that makes the request relevant – so they want to comply.

This story is true. One panel of the brochure tells the story of when a patient was not coded due to a mix-up in the wristbands. The error was caught in time to quickly code the patient, but by telling this story, most staff will understand how this error could happen to anyone – and they will be on board with this plan. The story goes like this:

In 2005, a hospital in Pennsylvania submitted a report to the Pennsylvania Patient Safety Reporting System (PA-PSRS) describing an event in which clinicians nearly failed to rescue a patient who had a cardiopulmonary arrest because the patient had been incorrectly designated as “DNR” (Do Not Resuscitate). The source of the confusion was that a nurse had incorrectly placed a yellow wristband on the patient. In this hospital, the color yellow signified that the patient should not be resuscitated. In a nearby hospital, in which this nurse also worked, yellow signified “restricted extremity,” meaning that this arm is not to be used for drawing blood or obtaining IV access. Fortunately in this case, another clinician identified the mistake and the patient was resuscitated. However, this “near miss” highlights a potential source of error and an opportunity to improve patient safety by re-evaluating the use of color-coded wristbands.

We want to thank and acknowledge this hospital for its transparency and disclosure of this event. It could have happened anywhere, and it has served as a “wake-up call” to many of us.

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Follow the story with data results – Sharing with staff how hospitals in our state currently use wristbands makes the information more relevant and reinforces to them why they should want to comply and participate in this. Share this information with staff. It is on one of the panels in the brochure, too.

A survey was conducted in July 2008, of Iowa hospitals to evaluate our risk for such an event. The results showed that six different colors and various methods were being used to designate DNR status with patient wristbands.

Our risk was apparent.

We identified the need to standardize the colors being used for Allergies, Fall Risk, and DNR.

Our answer is participation in this project.

The Big Picture – For many individuals, knowing that we are part of a bigger and unique situation fosters pride and, again, reinforces the developing motivation to comply. Tell staff how this state is part of a national effort to work together with the goal of using the same colors. Share this information with them:

This initiative is being adopted by hospitals throughout the nation. This will make it safer for us as clinicians and as patients. Once achieved, it means whether you are traveling on vacation to these states or relocated to work in another state, participating hospitals will be using the following colors:

- RED means ALLERGY ALERT
- YELLOW means FALL RISK
- PURPLE means “DNR”
Introduce the Colors – In the tool kit, you will find three sample wristbands that show the colors being used and demonstrate the text that is pre-printed on the wristbands. These wristbands are from the vendor, The St. John Companies, Inc. If your organization uses a different vendor (check with Materials Management), then you may want to check to see if its bands are available so you can show what you will be using. The colors should be the same since the vendors know the specifications for the colors that are being used. This is the time to show the bands so there is a visual of the information you are going to share. Review with staff the three bands, the colors, and the corresponding meaning. The text box below will walk you through that information.

We are going to discuss the three different color-coded “alert” wristbands that are a part of statewide standardization.

RED means ALLERGY ALERT
YELLOW means FALL RISK
PURPLE means “DNR” or Do Not Resuscitate

Other alert wristbands that your organization uses may be introduced with this information, but are facility-specific, such as “latex allergy” or “restricted extremity,” etc.

FAQs about the colors selected. This is a companion document to the staff brochure. Research about colors and human association with certain colors contributed to the color selection process in this project. This is important for staff to know so they can feel confident with this process. The FAQ document reviews why the colors were selected and why other colors were not selected. At this time, hand out the FAQ sheet to staff and review it with them. Don’t just hand out the FAQs. Make this interactive and ask each person attending to take a question (there are 10) and read the answer out loud. This will make the session more interesting. Also, by having staff read and hear the information, they will “re-engage” in the presentation.

You are two-thirds done at this point. Let staff know this so they mentally relax.

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Seven Risk Reduction Strategies – In addition to the standardization of wristband colors in the state, we recommend seven other risk reduction strategies that should be initiated. These are suggested as a result of sentinel events that have occurred, near miss events, and common sense. This information is also in the staff brochure and can be cut out as a quick reference card and laminated, if you desire. Review these with staff now.

**Color-coded “Alert” Wristbands/ Risk Reduction Strategies**

**Quick Reference Card**

1. Use wristbands with the alert message pre-printed (such as “DNR”).
2. Remove any “social cause” colored wristbands (such as “Live Strong”).
3. Remove wristbands that have been applied from another facility.
4. Initiate banding upon admission, changes in condition, or when information is received during the hospital stay.
5. Educate patients and family members regarding the wristbands.
6. Coordinate chart/white board/care plan/door signage information/stickers with same color coding.
7. Educate staff to verify patient color-coded “alert” wristbands upon assessment, hand-off of care, and facility-to-facility transfer communication.

The following information takes each risk reduction strategy and provides further detail and/or explanation of that strategy.

1. Use wristbands that are pre-printed with text that tells what the band means.
   a. This can reinforce the color-coding system for new clinicians, help caregivers interpret the meaning of the band in dim light, and also help those who may be color-blind.
   b. Eliminates the chance of confusing colors with alert messages.
2. Remove any “social cause” (such as Live Strong, Cancer, etc.) colored wristbands.
   a. Be sure this is addressed in your hospital policy.
   b. If that can’t be done, you can cover the band with a bandage or medical tape, but removal altogether is best.
3. Remove wristbands that have been applied from another facility.
   a. This should be done when patients are processed to enter the facility and/or during patient admission.
   b. Including the patient and family safeguards the hospital, healthcare professionals, and patient from potential errors.
   c. Use the patient/family education brochure located in the tool kit.
4. Initiate banding upon admission, changes in condition, or when information is received during hospital stay.
5. Educate patients and family members regarding the purpose and meaning of the wristbands.
   a. Including the patient and family safeguards the hospital, healthcare professionals, and patient from potential errors.
   b. Remind patients and families that color-coding provides another opportunity to prevent errors.
6. Coordinate chart/white board/care plan/door signage information/stickers with the same color coding – red for allergies, yellow for fall risk, and purple for DNR status.
7. Educate staff to verify patient color-coded “alert” wristbands upon assessment, hand-off of care, and facility-to-facility transfer communication.

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Additional points to make:

8. When possible, limit the use of colored wristbands for other categories of care, e.g. MRSA, special needs, etc.

9. Remember, the wristband is a tool to communicate an alert status.
   a. Educate staff to utilize the patient medical record information (physician order for DNR) as an additional resource for verification processes for allergies, fall risk, and advance directives.

10. If your facility uses pediatric wristbands that correspond to the Broselow color-coding system for pediatric resuscitation, take steps to reduce any confusion between these Broselow colors and the colors on the wristbands used elsewhere in the facility.
Teaching Patients - The patient education brochure is a companion document to the staff brochure. We know that how we say something is just as important as what we say. Patients and their loved ones are scared, vulnerable, and unfamiliar with hospital ways. We need to communicate to them in a respectful and simple way without being condescending. The following text was written to serve as a “script” for staff so all could be delivering the same information to patients and families. By having a consistent message, we reinforce the information – this helps patients and families retain the information. Another benefit of having a consistent message is patients and families experience a sense of confidence in the healthcare system since we are all echoing each other. The text box below is taken directly from the staff brochure. This is the time to mention to staff there is a patient/family brochure that can be handed out (if your unit intends to do that). Tell staff you will hand out the brochure to them when you are done presenting the material so they can see what the patients will have.

**SCRIPT for any staff person talking to a patient or family**

**What is a color-coded “alert” wristband?**

Color-coded alert wristbands are used in hospitals to quickly communicate a certain healthcare status, condition, or “alert” that a patient may have. This is done so every staff member can provide the best care possible.

**What do the colors mean?**

There are three different color-coded “alert” wristbands that we are going to discuss because they are the ones most commonly used.

**RED means ALLERGY ALERT**

If a patient has an allergy to anything - food, medicine, dust, grass, pet hair, ANYTHING - tell us. It may not seem important to you, but it could be very important in the care he/she receives.

**YELLOW means FALL RISK**

We want to prevent falls at all times. Nurses review patients throughout their stay to determine if they need extra attention in order to prevent a fall. Sometimes a person may become weakened during his/her illness or following surgery. When a patient has this color-coded alert wristband, the nurse is saying this person needs to be assisted when walking or he/she may fall.

**PURPLE means “DNR” or Do Not Resuscitate**

Some patients have expressed an end-of-life wish and we want to honor it.

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And finally…. Review with staff the points listed below. These are the items that are listed on the competency so it is important to clarify that staff have a good understanding of these items. You should emphasize, “this is what would impact your tasks every day…” and review those points. This is a good time to hand out your organization’s P&P. Be sure your policy covers the areas listed below as they are also a part of the competency. If your policy does not address an item on the competency, then you should remove it from the form.

- Color Code – what do the three colors mean?
- Who can apply the wristband to the patient?
- When does the application of the color-coded wristband(s) occur?
- Policy requiring patients to remove the “social cause” bands.
- Patient education and how to communicate (script) the information with patients/families.
- Need for re-application of band.
- Communication regarding wristbands during transfers and other reports.
- Patient refusal to comply with policy.
- Discharge instructions for home and/or facility transfer.

If you use the last copy of any of the implementation materials, you may go to [www.ihconline.org](http://www.ihconline.org). Click on the “Toolkit” header at the top of the page. Select Wristband Toolkit. Find the file that contains the document you need.

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Staff Education – The Tools

1. Poster announcing the training session dates/times

(Document Provided)

The following poster was created to announce the sessions and the initiative. Post them in the staff lounge, communication boards, employee locker room, staff bathrooms – any place where staff will see them.

If you use the last copy of any of the implementation materials, you may go to www.ihconline.org. Click on the “Toolkit” header at the top of the page. Select Wristband Toolkit. Find the file that contains the document you need.

“Patient safety is sound clinical practice”
Join us on the following dates for the training session about Color-coded “Alert” Wristband Standardization.

Day / Date / Time: __________________________________________________________
Location: ________________________________________________________________

Day / Date / Time: __________________________________________________________
Location: ________________________________________________________________

Day / Date / Time: __________________________________________________________
Location: ________________________________________________________________

Questions? Contact: ____________________________________________ ext: __________

“Patient safety is sound clinical practice”
Join us on the following dates for the training session about Color-coded “Alert” Wristband Standardization.

Day / Date / Time: ____________________________________________________________

Location: _________________________________________________________________

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Day / Date / Time: ____________________________________________________________

Location: _________________________________________________________________

Questions? Contact: ________________________________________________________ ext: ____________
Staff Education – The Tools continued

2. Staff Sign-In Sheet (Document Provided)

- Use this form so there is a record of all staff who attended the training session.
- Make copies so you don’t use the last one.
- If you use the last copy of any of the implementation materials, you may go to www.ihconline.org. Click on the “Toolkit” header at the top of the page. Select Wristband Toolkit. Find the file that contains the document you need.
- Keep this sign-in sheet with your staff session/training folder. JCAHO or other regulatory agencies may ask you for it. This is especially important if you are making this a mandatory participation session.

Sample — Completed Staff Sign-In Sheet
Staff Sign-In Sheet

Date: ____________________  Unit/Dept/Location _________________________________

Educator: __________________________________________________________________

Topic:  **Color-coded “Alert” Wristbands**

Objective:  

1. To inform staff of the new process and colors of the Allergy, Fall Risk, and DNR wristbands.

2. Staff to demonstrate understanding of information through feedback of information.

Name/Title: __________________________________________________________________ Shift: _______________

Name/Title: __________________________________________________________________ Shift: _______________

Name/Title: __________________________________________________________________ Shift: _______________

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Name/Title: __________________________________________________________________ Shift: _______________
Staff Education – The Tools continued

3. Staff competency checklist (Document Provided)

We recognize that some organizations will opt to use this form and some will not. Should you decide to use a competency checklist in your process, we hope this form will provide the documentation you need. This form also serves as a great checklist for the trainer so all of the important elements in the training are remembered and taught.

If you do not use this as a staff form, consider using it as your form to help you remember every element you should be reviewing with staff about the changes with the color-coded wristbands.

If you use the last copy of any of the implementation materials, you may go to www.ihconline.org. Click on the “Toolkit” header at the top of the page. Select Wristband Toolkit. Find the file that contains the document you need.
# Staff Competency Checklist

**Purpose:** These are the standards of the technical competencies necessary for performance and/or clinical practice.

To meet competency standards, the employee must demonstrate proficiency in performing the technical procedures safely as evidenced by department-specific criteria.

### Methods to Use:

- A. Demonstration
- B. Direct Observation/Checklist
- C. Video/PowerPoint Review
- D. Skills Lab
- E. Self Study/Test
- F. Data Management
- G. Other

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<tr>
<th>Patient Color-coded “Alert” Wristband Process</th>
<th>Date</th>
<th>Method Used</th>
<th>Supervisor’s Initials</th>
<th>Comments</th>
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Employee Name: ____________________________  Job Title: ____________________________

IHC wishes to acknowledge the Pennsylvania Color of Safety Task Force, which developed the initial form that is the basis for this document.