

Guidelines on special observation for Senior Nurses on duty

- Special observation for a patient may be indicated due to acute medical, behavioural or emotional needs. Some examples are listed below. This request should be assessed on an individual patient basis as required.
 - Drug-related confusion, Delirium
 - Drug-induced/organic psychosis
 - Disinhibited, impulsive behaviour
 - Disturbed, distressed behaviour
 - Patients who have attempted suicide and have ongoing suicidal ideation and/or intent
 - Patients at risk of harming self or others

- The special observer should receive a handover report regarding the patient from the senior nurse on the ward and from the special observer going off duty to ensure continuity of care.

- The senior nurse or delegated nurse is expected to link in with the special observer regularly throughout the shift.

- Ensure the special observer reads and follows the relevant guidelines- 'Guidelines on special observations for carers/nurses.'

- When a non-nursing staff member is in the special observer role the allocated ward nurse must review and countersign the report sheet for non-nursing staff and file it with the nursing notes. The allocated ward nurse on duty is required to document care in the nursing notes also.

- The patient and their parents/guardian must be given an explanation, by a member of the treating team or the senior nurse on duty, for the reason for special observation and what this will involve.

- The issue of confidentiality should be addressed.

- Patients are expected to be on the ward at all times. All absences from the ward should be planned and agreed with nursing staff/treating teams. If the patient is leaving the ward they must have an appropriate level of supervision. Consideration must be given to the supervision of all vulnerable children.
The senior nurse should ensure that special observer is competent to accompany patient off ward if permitted.

- The treating team who has carried out the assessment must document the request for a special observer for a patient in the clinical notes and inform nursing administration of this request. Discontinuation of the special observation should also be documented.

- Best practice advises that the special observer role should rotate among nursing/care staff every two hours. Arrange breaks to facilitate this rotation where possible. (It would be beneficial for purpose of assessment if a senior nurse or member of regular nursing team can cover special observer's breaks.)