## Chapter 1

## INTRODUCTION TO HOSPITALS AND NURSING CENTERS

## HOSPITALS

#### Hospitals provide:

- Emergency care, surgery, nursing care, x-ray procedures and treatments, and laboratory testing
- Respiratory, physical, occupational, and speech therapies
- Care to people of all ages
- Care for people having babies, surgery, physical and mental health problems, and broken bones
- Care to diagnose and treat medical problems
- Care for persons who are dying

- Hospital patients have:
  - Acute illness (a sudden illness from which the person is expected to recover)
  - Chronic illness (an on-going illness that is slow or gradual in onset)
    - There is no known cure.
  - Terminal illness (an illness or injury from which the person will not likely recover)

- The person's rights and expectations during hospital stays include:
  - High quality care
  - A clean and safe setting
  - Being involved in care
  - Having privacy protected
  - Being prepared to leave the hospital
  - Help understanding the hospital bill and filing insurance claims

## LONG-TERM CARE CENTERS

- Long-term care centers are designed to meet the needs of persons who cannot care for themselves but do not need hospital care.
  - Medical, nursing, dietary, recreational, rehabilitative, and social services are provided.
- Persons in long-term care centers are residents.
  - The center is their temporary or permanent home.

- Long-term care centers meet the needs of:
  - Alert, oriented persons
  - Confused and disoriented persons
  - Persons needing complete care
  - Short-term residents
  - Persons needing respite care
  - Life-long residents
  - Mentally ill persons
  - Terminally ill persons

- Board and care homes provide a room, meals, laundry, and supervision.
  - A safe setting is provided but not 24-hour nursing care.
- Assisted-living residences (ALRs) provide housing, personal care, support services, health care, and social activities in a homelike setting.
  - Mobility is often required.
  - Stable health is required.
  - ALRs must follow state laws and rules.

- Nursing centers (nursing facilities, nursing homes) provide health care services to persons who need regular or continuous care.
  - Licensed nurses are required.
  - Skilled nursing facilities (SNFs) provide complex care for severe health problems.
  - Some nursing centers and hospitals provide subacute care.
- A hospice is an agency or program for persons who are dying.
  - The focus is on comfort, not cure.
- Alzheimer's units (dementia care units) are designed for persons with Alzheimer's disease and other dementias.

# HOSPITAL AND NURSING CENTER ORGANIZATION

- A hospital has a governing body called the board of trustees or board of directors.
  - An administrator manages the agency.
  - Directors or department heads manage certain areas.
- Nursing centers are owned by an individual, a corporation, or a county health department.
  - Each center has an administrator.
  - Department directors report to the administrator.

- The health team involves the many health care workers whose skills and knowledge focus on the person's total care.
  - In nursing centers, it is called the interdisciplinary health care team.
    - The goal is to provide quality care.
    - The person is the focus of care.
    - An RN leads this team.

#### Nursing service

- The director of nursing (DON) is responsible for the entire nursing staff and the care given.
  - The DON is a registered nurse (RN).
- Nurse managers oversee a work shift, a nursing area, or a certain function.
- Nursing areas may have charge nurses for each shift.
- Staff RNs report to the charge nurse.
- LPNs/LVNs report to staff RNs or to the charge nurse.
- You report to the nurse supervising your work.

- Nursing education staff:
  - Plan and present educational programs (in-service programs) that meet federal and state requirements
  - Provide new and changing information
  - Instruct on the use of new equipment
  - Review key policies and procedures on a regular basis
  - Teach and train nursing assistants
  - Conduct new employee orientation programs

## THE NURSING TEAM

#### Registered nurses

- Assess, make nursing diagnoses, plan, implement, and evaluate nursing care
- Develop care plans, provide care, and delegate nursing care and tasks to the nursing team
- Evaluate how the care plans and nursing care affect each person
- Teach persons how to improve health and independence
- Teach the family
- Carry out the doctor's orders or delegate them to other nursing team members

- Clinical nurse specialists or nurse practitioners
  - Have limited diagnosing and prescribing functions
- Licensed practical nurses and licensed vocational nurses
  - Are supervised by RNs, licensed doctors, and licensed dentists
  - Have fewer responsibilities and functions than RNs do
  - Need little supervision when the person's condition is stable and care is simple
  - Assist RNs in caring for acutely ill persons and with complex procedures

#### Nursing assistants

- A nursing assistant has passed a nursing assistant training and competency evaluation program.
- Nursing assistants perform delegated nursing tasks under the supervision of a licensed nurse.

## NURSING CARE PATTERNS

- The pattern used depends on how many persons need care, the staff, and the cost.
  - Functional nursing focuses on tasks and jobs.
  - Team nursing involves a team of nursing staff led by an RN.
  - Primary nursing involves total care.
  - Case management is like primary nursing.
  - Patient-focused care involves moving services from departments to the bedside.

## PAYING FOR HEALTH CARE

- Private insurance is bought by individuals and families.
- Group insurance is bought by groups or organizations for individuals.
- Medicare is a federal health insurance program for persons 65 years of age or older and some younger people with certain disabilities.
  - Part A pays for some hospital, SNF, hospice, and home care costs.
  - Part B helps pay for doctors' services, out-patient hospital care, physical and occupational therapists, some home care, and many other services.

- Medicaid is a health care payment program sponsored by the federal government and operated by the states.
- Prospective payment systems limit the amount paid by insurers, Medicare, and Medicaid.
  - The amount paid for services is determined before giving care.
  - Diagnosis-related groups (DRGs) are for hospital costs.
  - Resource utilization groups (RUGs) are for SNF payments.
  - Case mix groups (CMGs) are used for rehabilitation centers.

- Managed care deals with health care delivery and payment.
  - Insurers contract with doctors and hospitals for reduced rates or discounts.
  - Managed care limits:
    - The choice of where to go for health care
    - The care that doctors provide

## THE OMNIBUS BUDGET RECONCILIATION ACT OF 1987 (OBRA)

- OBRA is a federal law that requires:
  - Nursing centers to provide care in a manner and in a setting that maintains or improves each person's quality of life, health, and safety
  - Nursing assistant training and competency evaluation
  - Promoting and protecting resident rights
- Residents have rights:
  - As United States citizens
  - Relating to their everyday lives and care in a nursing center

- Nursing centers must protect and promote resident rights.
- If a resident is not competent (not able) to exercise his or her rights, a responsible party or legal representative does so for the person.
- Nursing centers must inform residents of their rights:
  - Orally and in writing
  - Before or during admission to the center
  - In the language the person uses and understands
- Resident rights are posted throughout the center.

#### These rights are protected. The right:

- To information
- To refuse treatment
- To privacy and confidentiality
- To personal choice
- To voice disputes and grievances
- Not to work
- To take part in resident and family groups
- To care and security of personal items
- To freedom from abuse, mistreatment, and neglect
- To freedom from restraint
- To quality of life

#### MEETING STANDARDS

- Standards are set by the federal and state governments and accrediting agencies.
- A survey team will:
  - Review policies, procedures, and medical records
  - Interview staff, patients and residents, and families
  - Observe how care is given
  - Observe if dignity and privacy are promoted
  - Check for cleanliness and safety
  - Make sure the staff meets state requirements

- If problems (deficiencies) are found:
  - The agency is given time to correct the problem.
  - The agency can be fined for uncorrected or serious deficiencies.
  - The agency can lose its license, certification, or accreditation.

#### Your role involves:

- Providing quality care
- Protecting the person's rights
- Providing for the person's and your own safety
- Helping keep the agency clean and safe
- Conducting yourself in a professional manner
- Having good work ethics
- Following agency policies and procedures
- Answering questions honestly and completely