The Application of Risk Prevention Nursing in Pediatric Nursing Management

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Abstract: In the field of medical care, children, etc. are groups that need to be focused on, and there are certain special requirements for the care of this group. Effectively evading the risk of pediatric nursing, reducing the occurrence of nursing accidents, and enhancing the safety and comprehensiveness of hospital care are the main purposes of exploring the risk factors of pediatric nursing. In addition, this paper will analyze how to prevent risks in pediatric nursing and study the application of risk prevention nursing in pediatric nursing management.

1. Introduction

With the continuous advancement of society, people pay more and more attention to medical care and nursing. At the same time, the quality requirements of medical staff are becoming more and more rigorous. The technical level and service quality of medical staff have become important when people choose hospitals. Among them, pediatric nursing is a non-negligible part. It not only requires the nursing staff to have a high degree of professional ethics and professional service level quality, but also requires the nursing staff to pay extra attention to the possible risk factors, which is determined by the nature of the patient group. decided. In recent years, disputes in pediatric care have emerged in an endless stream, and many children suffer from misappropriation of risks [1]. Therefore, early detection of risk hazards, safety of care in the first place, and effective improvement of the quality of care are the ideological qualities that every medical staff must possess, and it is also a standard that needs to be realized in pediatric nursing.

2. Pediatric nursing risk status

In the nursing work of pediatrics, the risk of nursing is still a very important situation so far. In the clinical process, the risk of nursing is mainly concentrated on the accidental injury caused by children's active movement, and the illness caused by the delay in the observation of the disease is aggravated or appears. Complications, as well as the risk of care due to drug problems during actual care work. In the pediatric nursing work, most of the risks can be avoided or reduced, but due to the problems of the nursing staff, there are still many nursing risks, which cause the child to have an accident during the treatment and harm the health of the child [2].

3. Risk factors in pediatric nursing management

3.1 The nature of the nurse-patient relationship poses a risk.

The most obvious difference between paediatric care and adult care is that the health care provider is faced with more emotions than the children and their families. Since the nurses' care is generally open, some of the daily care procedures may cause the child to cry and make noise. If the family does not understand or feel dissatisfied with the situation, it is easy to form a medical dispute. In addition, the pressure on pediatric nursing staff is very large [1]. In addition to the need to face the more vulnerable body of the child and maintain a high degree of care and patience, it is also necessary to face anxious families and children with unknown conditions. Family members explain the condition of the child and may face cumbersome questions and answers at any time. Therefore, if the psychological quality is not too hard, the emotions of the pediatric nursing staff are extremely susceptible to the irritability of the surrounding environment, and the nursing dispute is easy to occur.
3.2 Improper communication leads to nursing disputes.

Mutual trust between nurses and patients is the basis of medical care work. In pediatric nursing, it shows mutual understanding and tolerance between nursing staff and family members, that is, nursing staff should understand the family members' faces. The uneasiness of the child's situation, a certain explanation for the family members of the child who lacks medical knowledge, and answer as much as possible when facing the family members of the child, do not give due to the subjective belief that the problem or the request lacks practical significance. Reason. At the same time, the family members of the children should also consider the nature of the work of the nursing staff, try not to disturb the normal nursing work, and trust the decision of the medical staff [2]. A large part of the nursing disputes is due to the lack of timely and effective communication between the nurses and patients. If both parties cannot rationally treat pediatric nursing, and the dispute arises because one of them does not understand, the nursing dispute will become more and more troublesome.

3.3 The risk factors for improper documentation of nursing documents.

The leakage of nursing documents when writing nursing documents is an important risk factor for causing nursing accidents and leading to nursing disputes. The specific conditions are as follows:

1) Ignore the objective situation of the child. In the admission registration of the child, in addition to recording the condition of the child provided by the family member, the nursing staff should conduct a preliminary observation of the child. Many medical staff did not carefully ask the specific situation of the children when they did the data registration, and even ignored the words of the family members of the children. They took the admission assessment too seriously and did not pay much attention to the individual differences between different children until the care appeared [3]. In the accident, the errors and omissions in the records were discovered, which made it easy to cause nursing disputes.

2) The nursing process record is incomplete. If the nursing staff does not get a complete and detailed record of the child's daily care, it will be difficult to reflect the changes in the child's body and bring trouble to the next step of nursing decision. For example, if the nursing staff only records the treatment plan issued by the doctor, and there is no follow-up record work, it will be difficult for the doctor to judge whether the child has effect or effect after the treatment [3]. If the doctor's treatment procedure is wrong due to the cause, the nursing dispute, Medical disputes will follow. Therefore, the integrity of the nursing process record cannot be ignored.

3) The nursing documents are not standardized. If the nursing staff does not fill in the nursing process seriously, the written text is unclear, or the treatment of the person in charge of the care is too rash, and it is difficult to guarantee the objectivity and authenticity of the recorded documents because of the fact that they have others to sign on behalf of others [4].

4) Nursing staff lack professionalism. In the face of a large number of children and a surge in workload, some nursing staff with lower professional ethics will have neglected the care system and operating procedures, blindly operating, in order to solve the problem as soon as possible, rather than suffering The safety of children is in the first place. The specific performance is not serious when analyzing the situation of the child. If you look at it a few times, you will not be able to observe the changes of the child's condition. You can't find the problem of the child in time; the spirit is scattered, and the doctor's advice is not careful enough. These conditions can cause serious consequences and even capture the lives of children [4]. Nursing staff's simplified operation, lack of professionalism and other professional literacy are a major cause of nursing disputes.

4. Causes of the formation of nursing risks

The common risk factors in pediatrics are the risk of care caused by accidental injuries, delays in the disease and drug use. The main reasons for these risks are as follows:

4.1 Risk of care due to unexpected factors.

In the clinical process, because the child is young, very active, and has a strong curiosity, the main
reason for the formation of nursing risk is that the child is exposed to a dangerous place, such as a falling bed. There are two reasons for the risk of falling into the window: falling, scalding, sharp cuts, etc. There are two main reasons for this risk of care. One is that the child is active, and the other is that the care of the nursing staff is not timely [5]. Because of their young age and lack of risk awareness, the caregiver's incompetence during the nursing process can easily lead to accidental risk.

4.2 The condition is delayed.

The risk of care caused by the delay of the disease is mainly due to the child's inability to clearly express his or her own feelings or the lack of relevant clinical experience of the nursing staff, so that it cannot timely grasp the condition of the child, causing the child's illness to delay and the risk of care. In the clinic, many cases occur very shortly, such as aspiration or ingestion after vomiting, which can cause respiratory and cardiac arrest in a few minutes. In this case, most of the children themselves cannot indicate feeling, and if the nursing staff did not find it in time, or did not contact the doctor in time, it would easily cause the child to die and cause nursing risks.

4.3 Drug use problems.

There are two main reasons for the risk of care caused by drug use problems [5]:
1) The child is allergic to antibiotics and drugs. Many of the drugs used in the treatment are used for the first time. Therefore, the types of allergic drugs are not clear. In the process of using drugs, it is easy to cause drug allergy and harm to children and form a risk of care.
2) In the course of clinical treatment, the children's drugs are basically arranged by the nursing staff. In the treatment, if the drug configuration is too early, it may lead to pollution or drug efficacy, and cannot achieve the purpose of treatment, or even injury to the child's body; at the same time, in the process of receiving treatment, the drug use calculation error, the excessive or insufficient drug used for the child will affect the health of the child, the child can not withstand the drug overdose it is very dangerous, and insufficient dose may result in failure to treat in time, or treatment is ineffective, delaying the treatment of the child.

5. Application of risk prevention nursing in nursing management

Pediatric children are young, have rapid changes in their condition, and the special nature of pediatric work, and there are many medical disputes. There are weak links in nursing management. Therefore, in the pediatric nursing management, safety awareness should be strengthened, risk awareness education should be emphasized, and pediatric nursing work should be safer, faster and more effective, and the occurrence of medical care accidents should be minimized [6]. Medical risk management refers to the systematic and systematic elimination or reduction of medical risks and economic losses. Through the analysis of medical risks, the prevention of medical risks is taken as much as possible to reduce the occurrence of medical risks. Nursing risks are always in the process of nursing operation, nursing rescue, etc. Sometimes even extremely simple or seemingly insignificant clinical activities are extremely risky. Once a nursing defect or accident occurs, it will bring pain to children and their families, especially for this special group of pediatrics, it is more effective to avoid nursing risks, prevent and reduce nursing disputes, provide high quality and safe nursing services for children, and must implement effective nursing risk management [1].

5.1 Flexible scheduling.

Because the sick children need to be cared for at all times, the hospital should be reasonable and effective in the arrangement of treatment work care. The scheduling of nursing staff should be carried out in flexible scheduling, so that both the care of the children and the reasonable rest of the medical staff should be taken into consideration to avoid medical accidents and disputes caused by improper working schedules [6].

5.2 Strengthen the management of nursing staff.

In view of the risk of care caused by accidental factors, the management of nursing staff can be
strengthened during work, especially for nursing staff with weak sense of responsibility, weak safety awareness, poor business ability and low qualifications, and to cultivate safety awareness of nursing staff. Improve the responsibility system in nursing work, manage according to the responsibility-to-person system, and issue notices, warnings and expulsions in the event of nursing risks, and encourage the nursing staff to strengthen their sense of responsibility and do a good job of care from both subjective and objective aspects [7].

5.3 Regularly implement nursing studies.

Because children can't express their feelings well in many cases, in the clinical process, the nursing staff can be trained on relevant clinical symptoms to help the nursing staff learn the clinical manifestations of various diseases and complications so that they can be used in children [8]. When an abnormal situation occurs, the diagnosis can be made in time to rescue and improve the treatment rate of the child.

5.4 Improve the management of safe medications.

In the work, the nursing staff's medication safety learning is strengthened, the medication administration time and dosage are improved, and the medication management of the nursing staff is strengthened in the actual work to ensure timely and accurate administration in the treatment [7]. At the same time, the children's files are established at work, and the various medical history and allergic drugs of the children are recorded to facilitate the selective medication in the next treatment.

5.5 Strengthen risk monitoring and risk prevention.

Strengthen risk monitoring in the work, pay attention to the various clinical manifestations and life characteristics of children in real time. Once the child is found to have complications or abnormalities, rescue treatment can be carried out in time. In the process of children's treatment, try to avoid the use of antibiotics. In the case of antibiotics, 40% of the antibiotics should be used in strict accordance with the international standard. At the same time, the children should be treated according to the condition, and the complications may occur in the child's condition [9]. The disease strengthens the focus, and the treatment and care location is chosen in a place that is convenient for rescue.

5.6 Strengthen safety education for patients' families.

Family members are the first caregivers of sick children, and strengthening the safety education of family members can effectively reduce the possibility of risk. Because the sick children are highly compliant and active, they have a strong curiosity about the world. They are easy to walk around during hospitalization, and there are collisions, scratches, and falls on medical devices. Strengthening the safety education for family members can enable family members to respond to emergencies in a timely manner, reasonably resolve emergencies, and minimize injuries [8].

5.7 Strictly implement the three-check and seven-pair system.

In the actual treatment process, the most exposed to the child is the treatment equipment and items. The usual safety risks are the lack of hygiene of the treatment equipment and the damage of the treatment process, the unqualified quality of the products, etc., resulting in delays in treatment and physical damage to the child [6]. The three-check and seven-pair system is mainly aimed at the system of treatment equipment and articles, and stipulates relevant policies to ensure the personal safety of children.

5.8 Psychological intervention for sick family members.

The family members of the sick are the closest to the child, and the emotions of the family can easily infect the child. If family members are depressed, disappointment, helplessness, and anxiety will affect the treatment of children and cause certain risks of care [9]. At this time, we should strengthen the psychological intervention of the family members of the patients in a timely manner, effectively communicate and communicate with the families of the affected families, enhance the confidence of the family members, obtain the support of the family members, and indirectly cheer for
the children.

5.9 Psychological intervention for sick children.

A sick child is often a lively and active "little angel" before he becomes ill. Once he is sick, he lives in an unfamiliar hospital. When he sees a strange medical staff, he often has a huge psychological gap. At the same time, he is treated. Early children often have strong psychological expectations. They think that the treatment time is not long and they can be discharged in a few days. However, with the passage of time, the changes in the condition, the children's psychological disappointment and anxiety have a variety of negative emotions [7]. At the time, health care workers should strengthen communication with the children, calm down the child's bad mood, and enable them to continue to cooperate with the treatment to enhance the confidence of treatment.

5.10 Nursing staff improve their professionalism.

In the course of treatment, the medical staff has more contact with the child, and most of the treatment methods such as vein injection are performed by medical personnel. The operation of medical staff is also a common risk of care [9]. Therefore, improving the professional quality of nursing staff and reducing medical accidents is one of the main ways to reduce risks. For example, intravenous infusion is a common clinical nursing measure. In order to alleviate the pain and psychological pressure caused by repeated puncture, the nursing staff should improve their venous puncture success rate to achieve a success and alleviate everyone's anxiety.

6. Summary

Introducing risk-preventing nursing in the nursing process plays an important role in strengthening the health education and psychological care of children and improving the quality of care of children. At the same time, family members are also satisfied with the nursing work of the hospital, alleviating the contradiction between doctors and patients, improved the hospital's reputation. Based on the above-mentioned nursing risks, it is known that to achieve risk-preventive care, it is necessary to effectively improve the professionalism and comprehensive level of health care workers, and improve the quality of paediatric care and satisfaction of nursing. Really promote the use of risk prevention care.

References