



HEALTH HOLDING

HAFER ALBATIN HEALTH  
CLUSTER  
MATERNITY AND  
CHILDREN HOSPITAL

<b>Department:</b>	Provision of Care		
<b>Document:</b>	Multidisciplinary Policy and Procedure		
<b>Title:</b>	Care of Vulnerable, Dependent Patients		
<b>Applies To:</b>	All Healthcare Provider		
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## 1. PURPOSE:

- 1.1 To establish guidelines for the care of vulnerable patients by preventing potential exposure of unintentional or thoughtless acts that may result to injury or harm to the patient.
- 1.2 To provide support and guidance to all staff in regards to the management of patients who are or potentially could be at risk.
- 1.3 To ensure respect for the right of vulnerable patient to privacy and dignity, independent choice and fulfilment are upheld and promoted by all staff.

## 2. DEFINITIONS:

### 2.1 Vulnerable Patient is:

- 2.1.1 Patient who needs special care because of frailty, physical disability, sensory impairment or mental health difficulty, and who is unable to take care to protect him/her from significant harm, or exploitation, or at risk for abuse includes but is not limited to:
  - 2.1.1.1 Neonate (0 – 28 days)
  - 2.1.1.2 Pediatric patients (29 days – 14 years old)
  - 2.1.1.3 Comatose
  - 2.1.1.4 Immunocompromised
  - 2.1.1.5 Patients in acute or chronic pain
  - 2.1.1.6 Emotionally disturbed patient
  - 2.1.1.7 Suspected airborne/ communicable disease
  - 2.1.1.8 Suspected drug/ alcohol user
  - 2.1.1.9 Suspected case of abuse/ neglect
  - 2.1.1.10 Patient in labor
  - 2.1.1.11 Terminally ill patients

## 3. POLICY:

- 3.1 It is the policy of Maternity and Children Hospital, Hafer Al Batin to ensure that care for vulnerable, dependent patient is provided in a manner that preserves patient autonomy, dignity and rights.

## 4. PROCEDURE:

### 4.1 Care of Vulnerable patient:

- 4.1.1 Within the hospital all vulnerable elderly and children will be given all necessary care needed with consideration
- 4.1.2 If the patient's condition demands further care which is not available in our hospital patient will be transferred to the other hospital/facilities.
- 4.1.3 While transferring the patient, a staff nurse will be accompany the patient along with the care giver

- 4.1.4 If the patient's condition is critical, will be escorted by a doctor and a nurse while transferring them from hospital to hospital.
- 4.1.5 Staff taking care of high risk patient's, must have adequate training and skills
- 4.1.6 The identified vulnerable patient will be under close monitoring at all times during their hospitalization to minimize risk of health care services.
- 4.1.7 All the health care providers maintain a safe environment related but not limited to equipment, wheelchair, bed rails, mobility needs, fall precautions
- 4.1.8 All health care provider will encourage family involvement and support in care delivery, education and decision as appropriate.
- 4.1.9 Special consent consideration will be taken when needed for each individual case following the hospital approve consenting policies
- 4.1.10 Once the patient is stabilized with the disease process, they will be fit for the discharge.
- 4.1.11 The discharge patient will be discharged with follow up advise
- 4.1.12 All documentation required for the term to work and communicate effectively in the care of high risk patient must be maintained as per hospital documentation policy.

4.2 Assessment of vulnerable elderly:

- 4.2.1 Neurological status and level of consciousness
- 4.2.2 Physiological and mental status.
- 4.2.3 Ability to meet activities of daily living
- 4.2.4 General physical assessment
- 4.2.5 Assessment of suspected nutritional and functional risk.
- 4.2.6 Assessment for the risk of fall injury.

4.3 Assessment of vulnerable young children

- 4.3.1 General condition.
- 4.3.2 Medical or surgical condition.
- 4.3.3 Assessment for suspected abuse or maltreatment.

4.4 Infection Control Guidelines:

- 4.4.1 Observe standard precaution in caring for all vulnerable patients.
- 4.4.2 Hand washing should be performed before or after contact with patients, before or after doing aseptic procedure, after contact with blood and body fluids, after touching patient surroundings and after removing gloves.
- 4.4.3 Transmission – based isolation precaution will be utilized as needed while instituting safety measures, the patient should be watched closely if put in isolation room.
- 4.4.4 Soiled linen should be handled and discarded immediately in appropriate bags.
- 4.4.5 Disposable sharp items and used syringes must be discarded in appropriate sharp containers.

4.5 Safety and Security Guidelines

- 4.5.1 Use patient identification using two identifiers (4 names for the Saudi and complete name for the Non – Saudi and Medical Record Number) before providing treatment and procedures, when administering medication, taking blood sample and transfusing blood and blood product.
- 4.5.2 Explain thoroughly any procedure to be done and the possible outcome of care before obtaining an informed consent.
- 4.5.3 Ensure that bed rails are always raised up.
- 4.5.4 Identify patient at risk for fall and plan appropriate care and apply precautionary and preventive measures.
- 4.5.5 Restraints shall be applied only if there is a clear physician's order.
- 4.5.6 In a medical emergency department restraint can be applied prior to physicians written order..
- 4.5.7 The order must be obtained within 12 hours of the restraint application

- 4.5.8 Verbal and telephone order will be taken following the verification "Repeat back" and "read back" process, respectively.
- 4.5.9 Conduct regular preventive maintenance of equipment and testing of alarm systems.
- 4.5.10 Handrails must be available in showers and bath.

4.6 Ethical Guidelines

- 4.6.1 Maintain privacy at all times.
- 4.6.2 Ensure confidentiality by allowing only authorized healthcare provider to have access to the patient medical records.
- 4.6.3 All admitted patient and their family are informed about their treatment option and expected outcome.
- 4.6.4 All patients shall be cared for in accordance to the hospital policy and procedures.

**5. MATERIALS AND EQUIPMENT:**

N/A

**6. RESPONSIBILITIES:**

- 6.1 Physician
- 6.2 Nurse

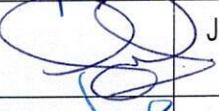
**7. APPENDICES:**

N/A

**8. REFERENCES:**

- 8.1 KAAH Infection Control P&P, 2013
- 8.2 Restraints: Nursing Responsibility P&P, 2013
- 8.3 KAAH Ethical Guidelines, 2013
- 8.4 Sandwell and West Birmingham Hospital NHS.
- 8.5 KAAH APP for Vulnerable, Dependent Patients, 2011

**9. APPROVALS:**

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