

# 5 Health and safety issues in accident & emergency

## Background

**Name:** Patricia McGaughey

**Safety representative:** Six years

**Job-title:** Patient flow co-ordinator. (Previously a staff nurse in A&E)

**Employer:** Antrim Area hospital

**Setting/speciality:** A&E, Acute NHS hospital, Northern Ireland



**“I previously worked in A&E and was working there part-time until recently. The RCN Northern Ireland Board encouraged me to consider the role. A&E is such a busy place and safety issues can either become forgotten or people aren’t aware of them. I thought it would be good for nurses to have someone there who can advise.**

## Providing information in A&E

I devised a booklet that covers many issues. I added small rhymes and cartoon style pictures to get people’s attention about the issues.

The booklet covers things like:

- bells – colour coding
- the danger of keeping scissors in top pocket
- fire equipment/exits
- personal alarms – nurses are encouraged to make sure that they carry one in the pocket at all times
- safe disposal of waste
- infection control issues.

They are now giving the booklets to all new staff, as part of the induction pack. They are used in A&E, and by the

infection control team. The booklets have been such a success that other departments are looking at producing their own version.

## Other issues

- lone workers – I advise, and then refer to someone more experienced to consider legal side
- workplace inspections (in A&E)
- trailing leads – ensured that there are adequate power points for all equipment to prevent stretching electric cables and leads
- worked with the fire officer of my trust to make improvements.

## Support

The trust is very good and been very supportive. They see H&S as very important and respect that there is a need for H&S representatives.

I like being a safety representative. I know my limitations – if I’m not sure I seek advice from the RCN Northern Ireland HQ. They are very good. They involve you even when they have taken a case on and they let you know what happens and the outcome.

## Being a safety representative

People in my department have become more aware of health and safety and in my role now I give advice to all staff, not just colleagues who are RCN members. People come to me who are not in any union, asking for help with issues. They are quite amazed about the range of things safety representatives can cover, and the importance of some of them. I put new literature in staff areas, noticeboards, and encourage others to consider the role.

Time is one of the biggest challenges. Although I can get time off for courses and conferences, I don't have any agreed time. I'm the only one in our trust, which covers four hospitals. We need more safety representatives. Out of the three RCN roles, I think it is the more enjoyable one. The training is very good. Being a safety representative helps you to meet with other people.

I'm happy to give something back. I've had the training and I want to be able to flag up simple everyday issues. If you can bring them to the fore, they can make a real difference.

The way I see it being a safety representative helps to make RCN membership worthwhile for people. Members will be aware that the safety representatives (as with the stewards and learning representatives) are there to support and advise them and no issue is too trivial for us to deal with."

## Becoming a RCN safety representative

If you are interested in becoming a safety representative you can find further information on the RCN website [www.rcn.org.uk/support/becoming\\_activist/how\\_to\\_become\\_a\\_representative](http://www.rcn.org.uk/support/becoming_activist/how_to_become_a_representative)