Bedside Safety Attendant (sitter)

Updated November 18, 2020

During the time of COVID-19 outbreak, the use of bedside safety attendants for continuous patient monitoring should be carefully considered, and alternative solutions tried first (except in the cases of a patient assessed to be at high risk for suicide or a patient in a legal hold status requiring an in-person safety attendant).

If a continuous bedside safety attendant is essential in a COVID-19 positive patient or PUI:

- The bedside safety attendant must utilize full PPE including a N95 mask and face shield, gown and gloves.

- Per infection prevention:
  - There are no time limitations for being in the room currently.
  - If an aerosolizing procedure is performed in the room, the N95 does not need to be changed immediately after the procedure. It is fully functional for the remainder of the shift. The face shield should be disinfected using a disinfectant wipe following the procedure and re-donned.
  - If another colleague such as Nurse or Respiratory Therapist will be in the room during the continuous aerosolized procedure, the bedside attendant may step out of the room during the procedure.

- Observation must be from at least 6 feet from the patient.
  - A marker on the floor to identify the 6-foot distance may be helpful

- Develop a means of communication from inside the room for the attendant, that would not require opening the door (i.e., using the call light and responding from the call station by unit staff, phone/communication device, etc.)