



Phelps Hospital
Northwell Health®



Safe Patient Handling (SPH) Analysis April 28, 2020

By

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OVERVIEW

The Safe Patient Handling (SPH) Committee created a survey with the following questions:

1. Job Title
2. Shift
3. Work Status
4. Which of the tasks/movement do you routinely perform?
5. Other tasks?
6. Which of the tasks/activities do you find most challenging?
7. Explanation why you find challenging
8. Average weight
9. In the past year, how often did you use the pink slip?
10. In the past year, how often did you use the Maxislide?
11. In the past year, how often did you use the Air Tap?
12. In the past year, how often did you use the Steady?
13. In the past year, how often did you use the Standing & Rehabilitation Aid?
14. In the past year, how often did you use the Golvo?
15. In the past year, how often did you use the Maximove?
16. Select the top 3 SPH equipment/devices need more practice or help to operate
17. In the past year, tell us a situation where you could have been more prepared

The survey was distributed to Phelps Hospital employees via HealthStream

ANALYSIS

The following pages represent hospital wide analysis along with detailed unit level analysis for questions 4-7; 9-17.

To better manage the file size the analysis is broken in 3 files:

- Inpatient units
- Ambulatory units
- Support services

NEXT STEPS

Review the detailed analysis and create Hospital Wide and Unit Level education based on the findings.

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HOSPITAL WIDE STATISTICS

Overall Responses = 499; Response Rate = 67.80%

Survey Summary:

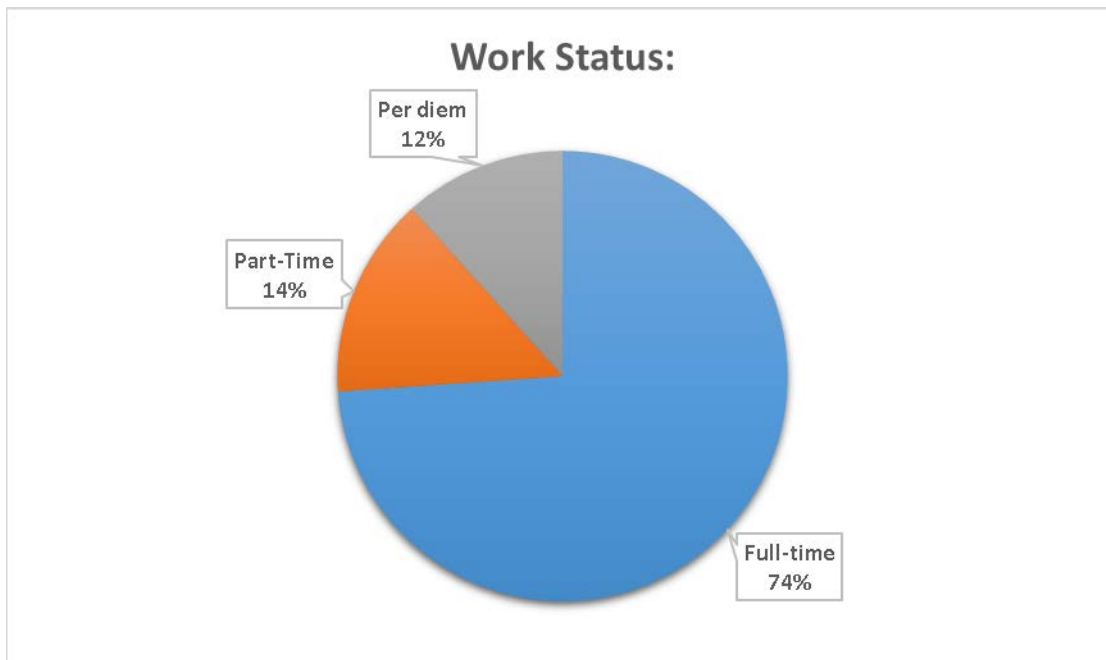
Top Job Title Participants:

Count of RESPONSES Row Labels	Column Labels What is your Job Title?
RN	43.89%
med surg tech	6.64%
mental health worker	2.62%
Physical Therapist	1.75%
tech	1.40%
Occupational Therapist	1.22%
Specialty Tech	1.05%
RESPIRATORY THERAPIST	0.87%
lpn	0.87%
Hospitality Rep	0.87%
...	

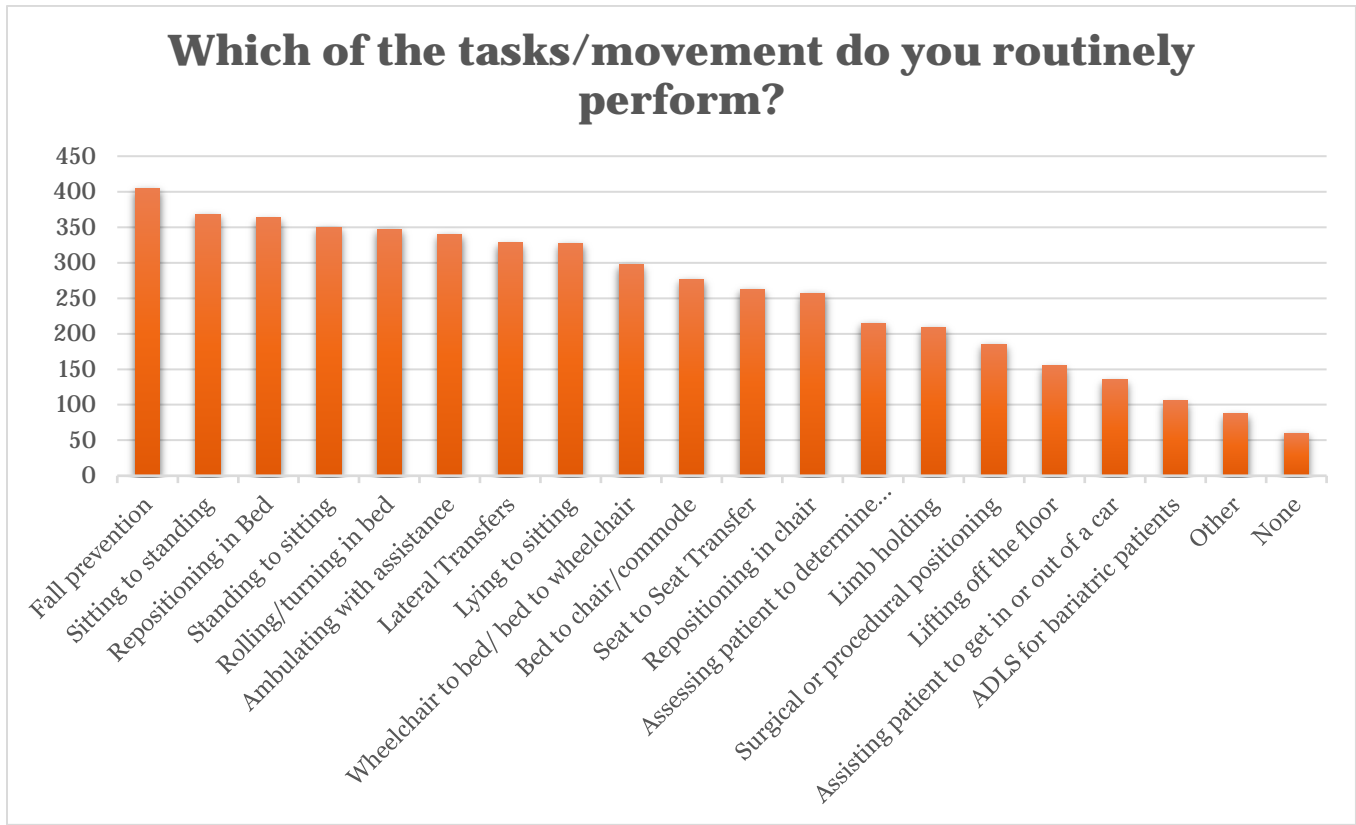
Shift



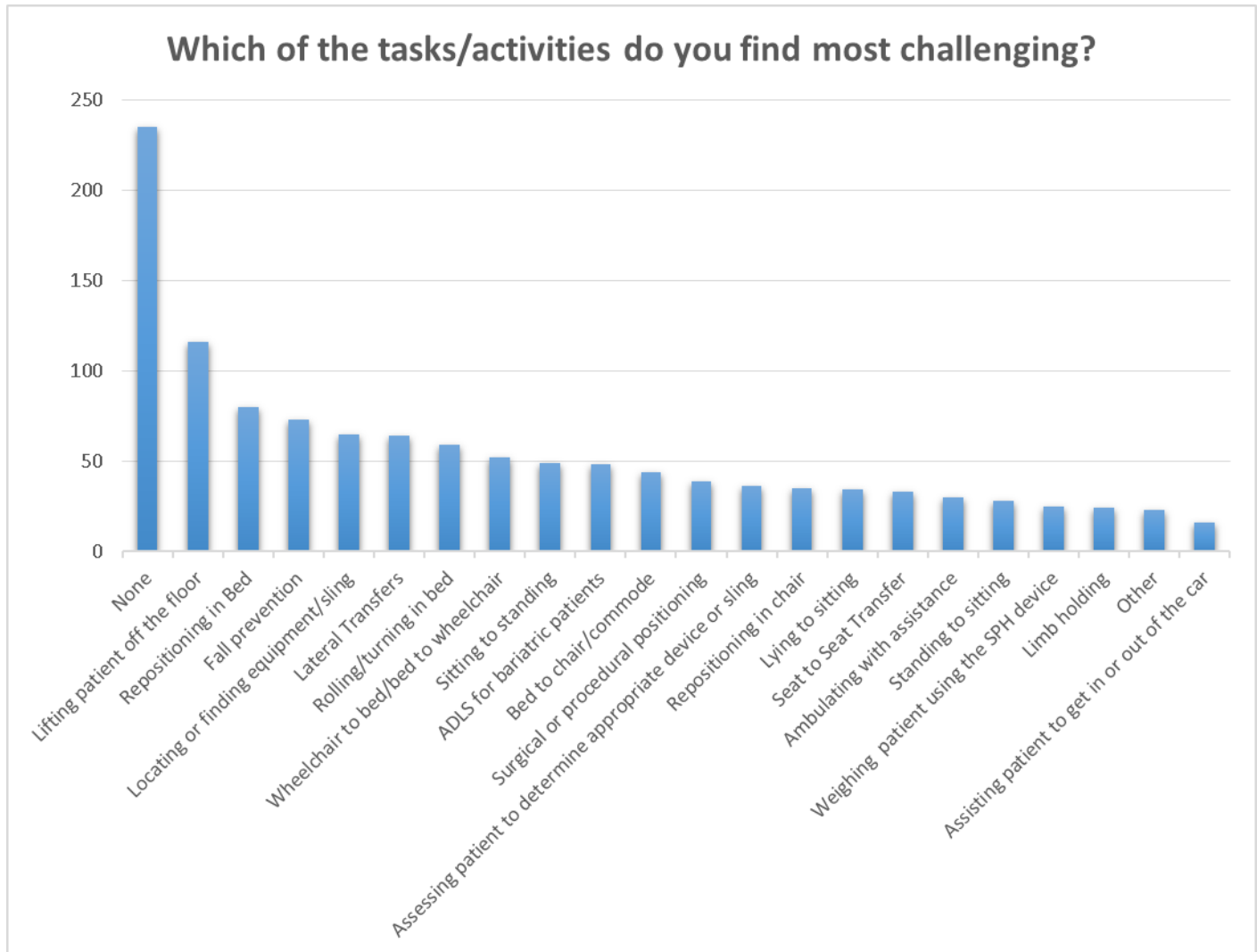
Work status



Tasks Routinely Performed



Tasks/Activities Most Challenging

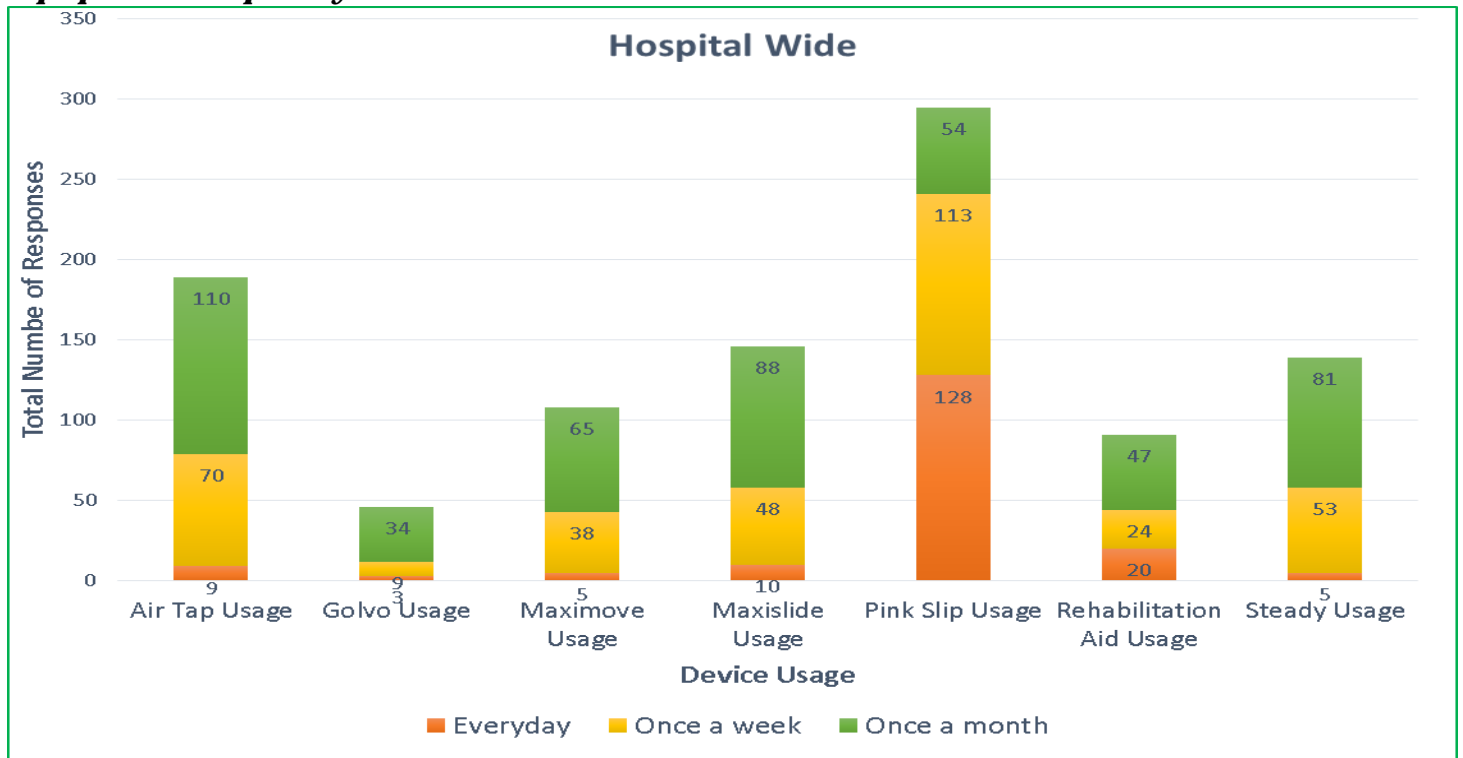


top 5:

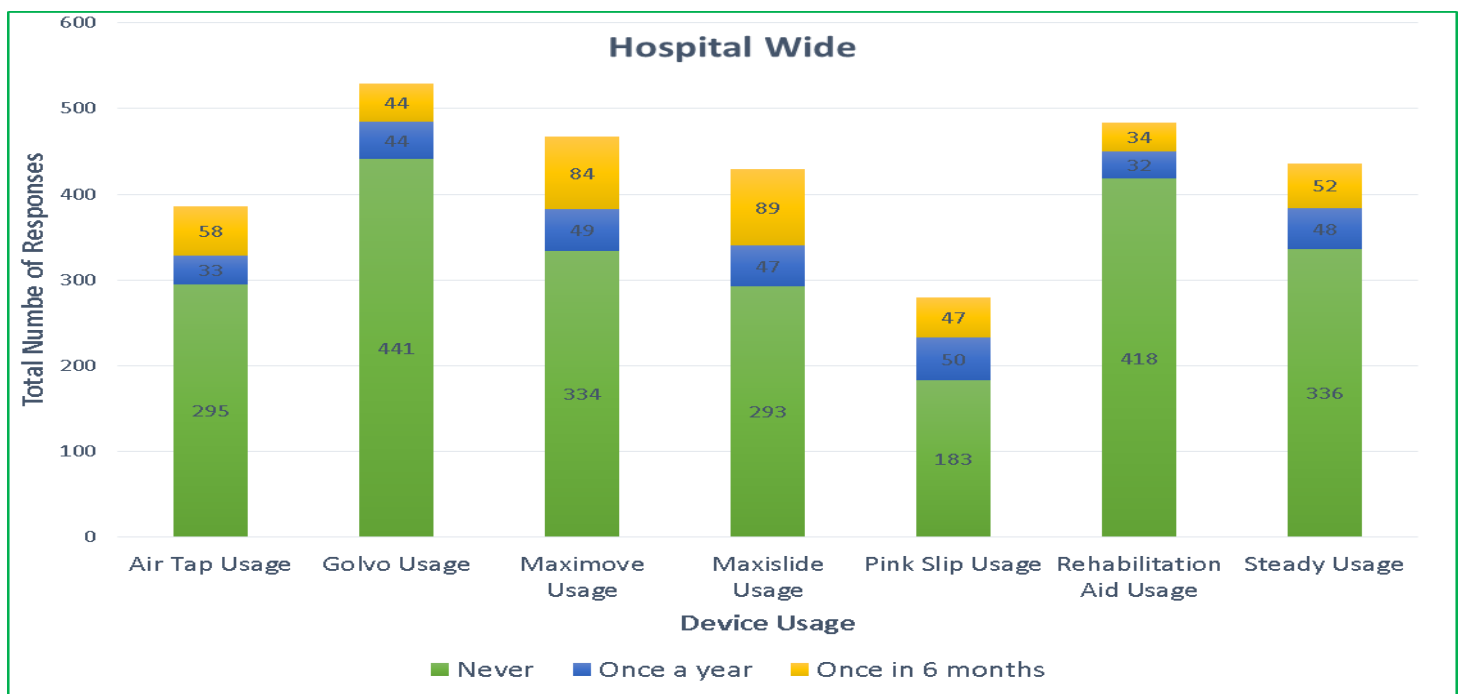
1. Lifting patient off the floor
2. Repositioning in Bed
3. Fall prevention
4. Locating or finding equipment/sling
5. Lateral Transfers

Equipment Frequency

Equipment Frequently Used:

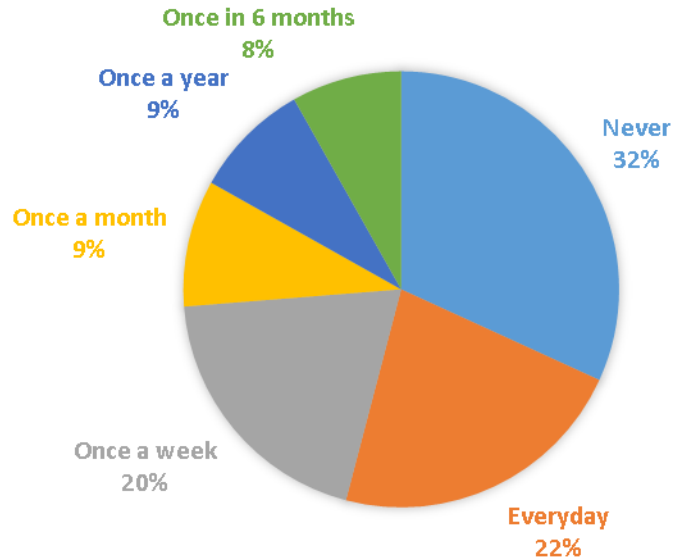


Equipment Less Frequently Used:

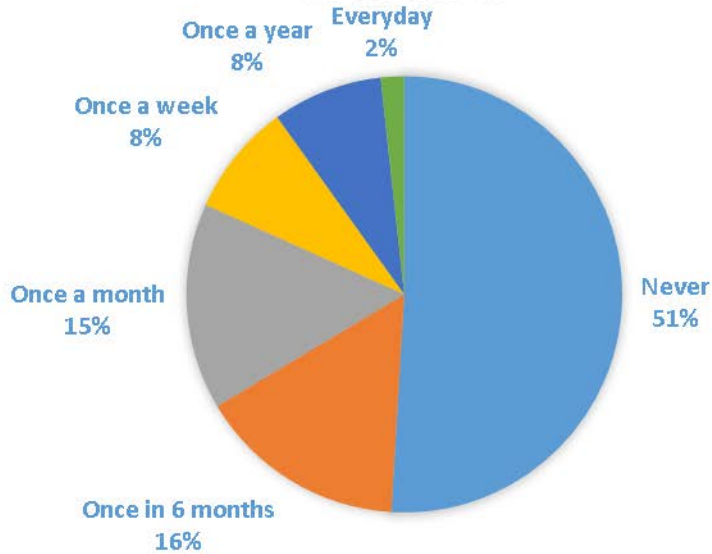


Equipment Frequency Breakdown by Device

IN THE PAST YEAR, HOW OFTEN DID YOU USE THE PINK SLIP?

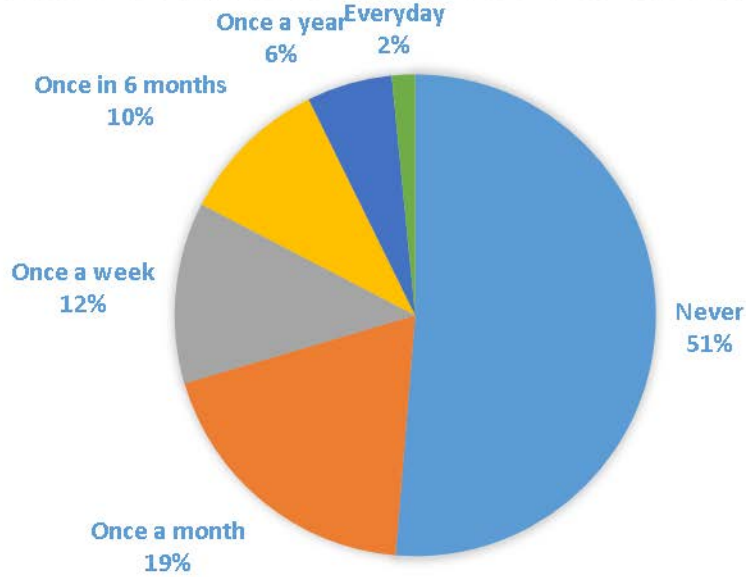


IN THE PAST YEAR, HOW OFTEN DID YOU USE THE MAXISLIDE?



Equipment Frequency Breakdown by Device - continued

IN THE PAST YEAR, HOW OFTEN DID YOU USE THE AIR TAP?

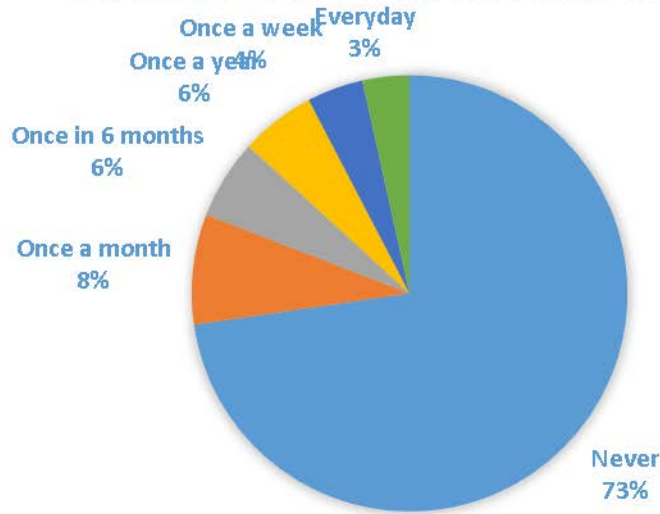


IN THE PAST YEAR, HOW OFTEN DID YOU USE STEDY?

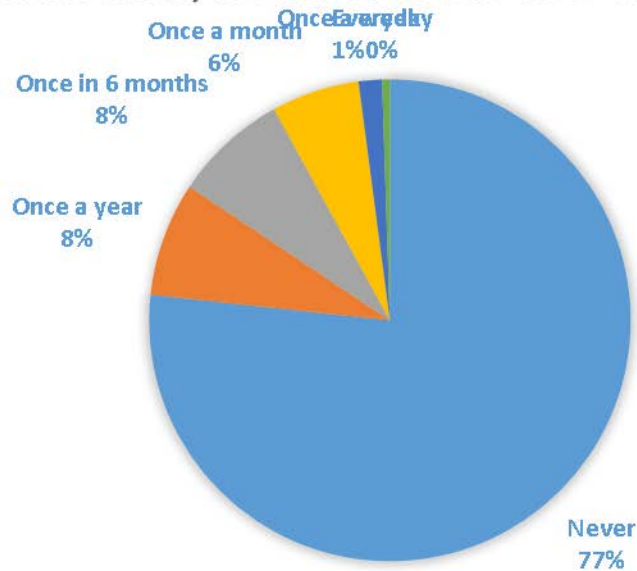


Equipment Frequency Breakdown by Device - continued

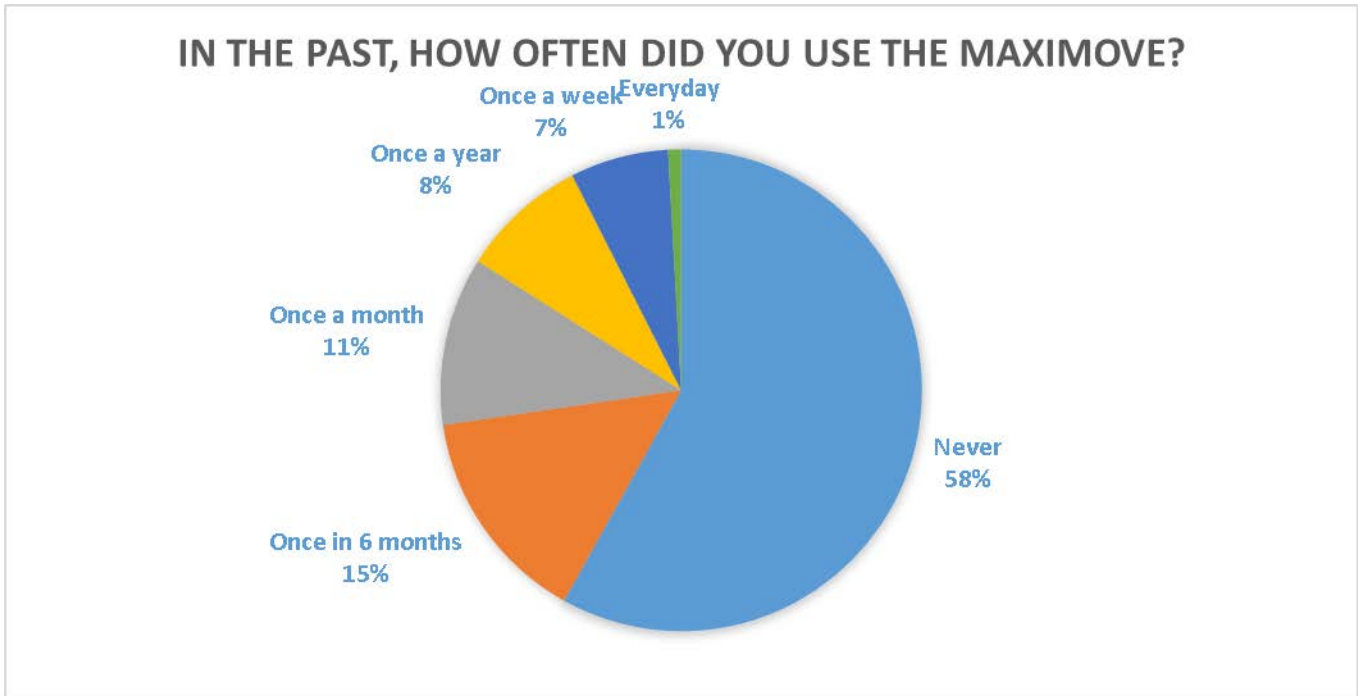
IN THE PAST YEAR, HOW OFTEN DID YOU USE THE STANDING AND REHABILITATION AID?



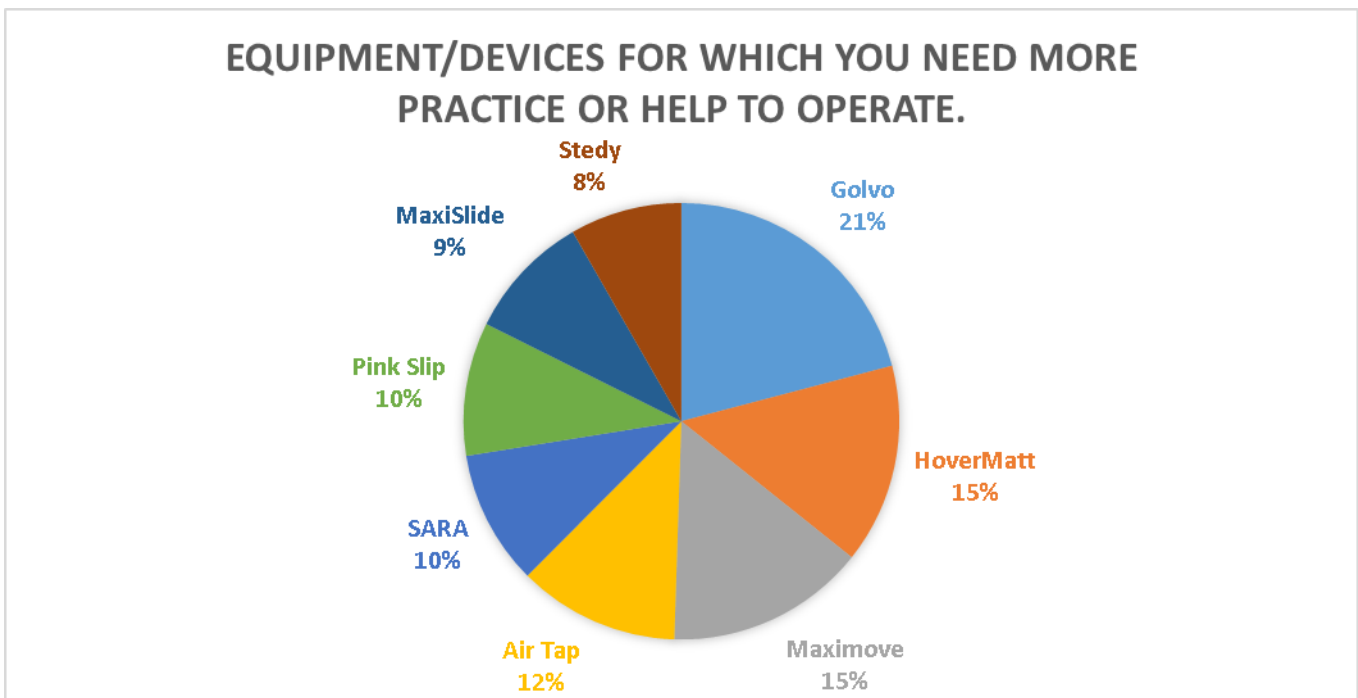
IN THE PAST YEAR, HOW OFTEN DID YOU USE THE GOLVO?



Equipment Frequency Breakdown by Device - continued



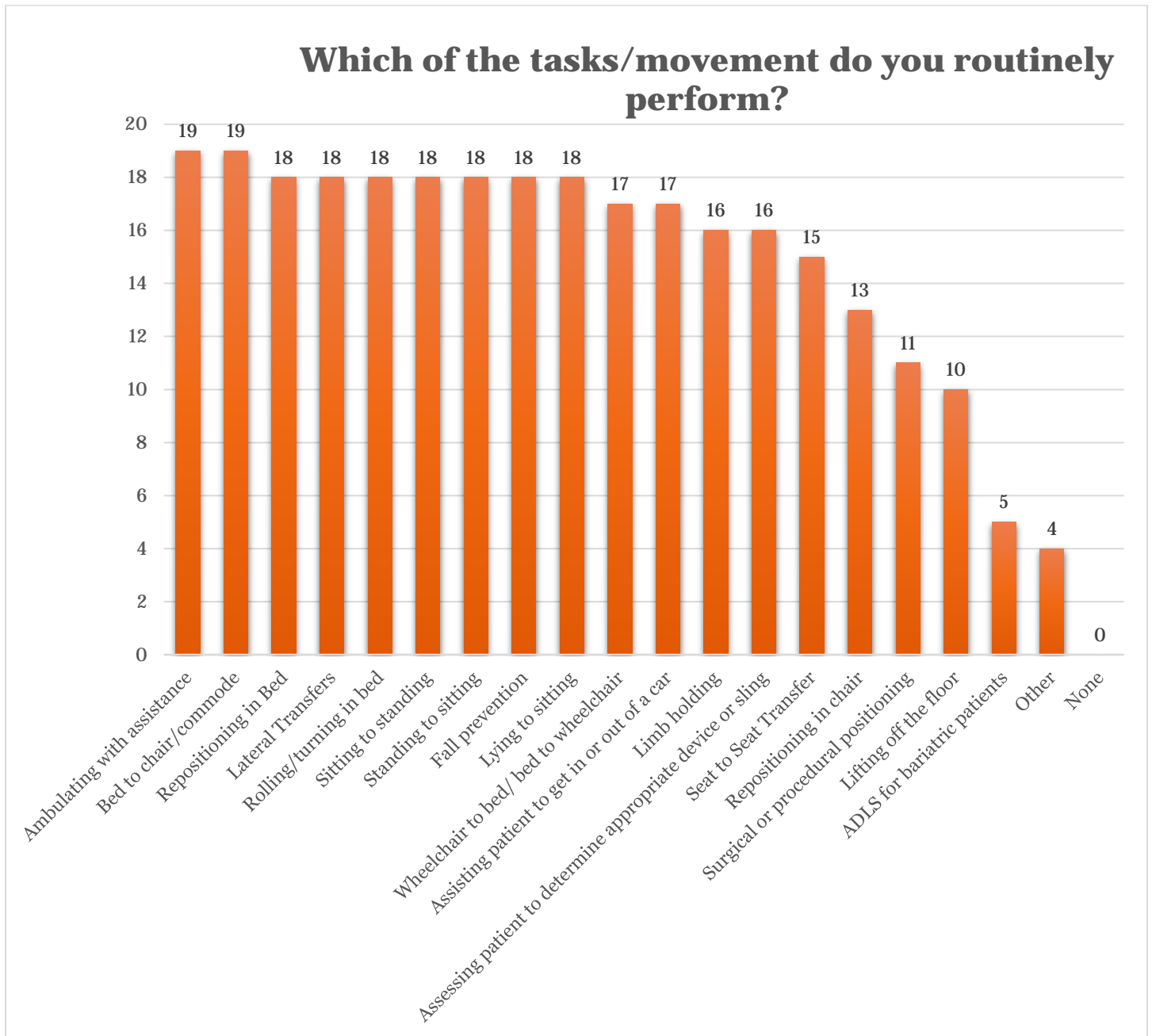
Equipment/Devices Need More Practice or Help



EMERGENCY DEPARTMENT

Response Count = 20; Response Rate = 36.36%

Tasks Routinely Performed

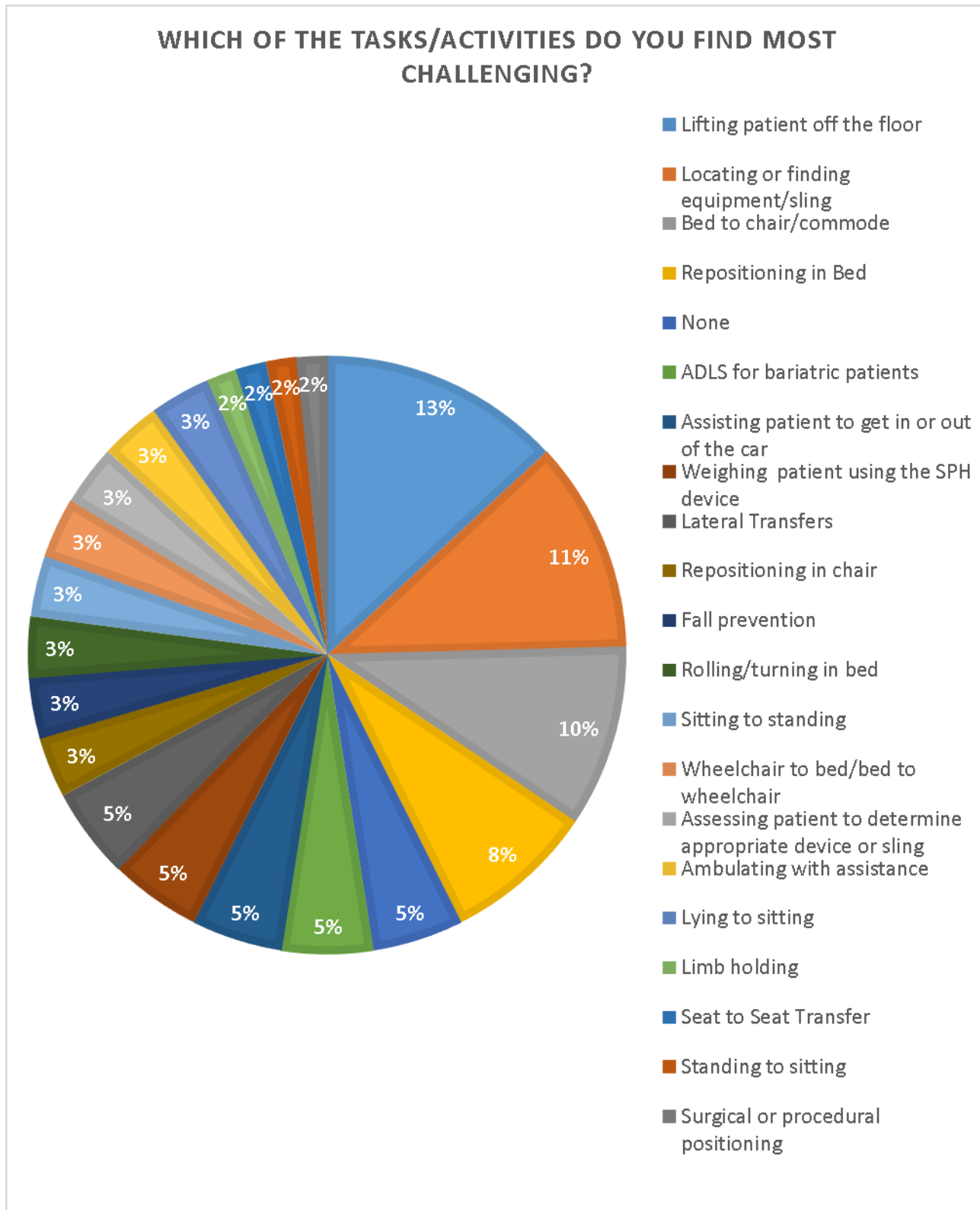


Tasks Routinely Performed - Continued

UNIT	ED
ITEM NUMBER	5

Row Labels
Are there other tasks that you routinely perform not listed above?
EKG, room cleaning, sharps removable and transport
KEEPING PATIENTS FROM HURTING SELF
Make beds (bend over), transfer patients, moving stretchers
many
N/A
na
NO
None
rolling a cow
yes

Tasks/Activities Most Challenging



Tasks/Activities Most Challenging - Continued

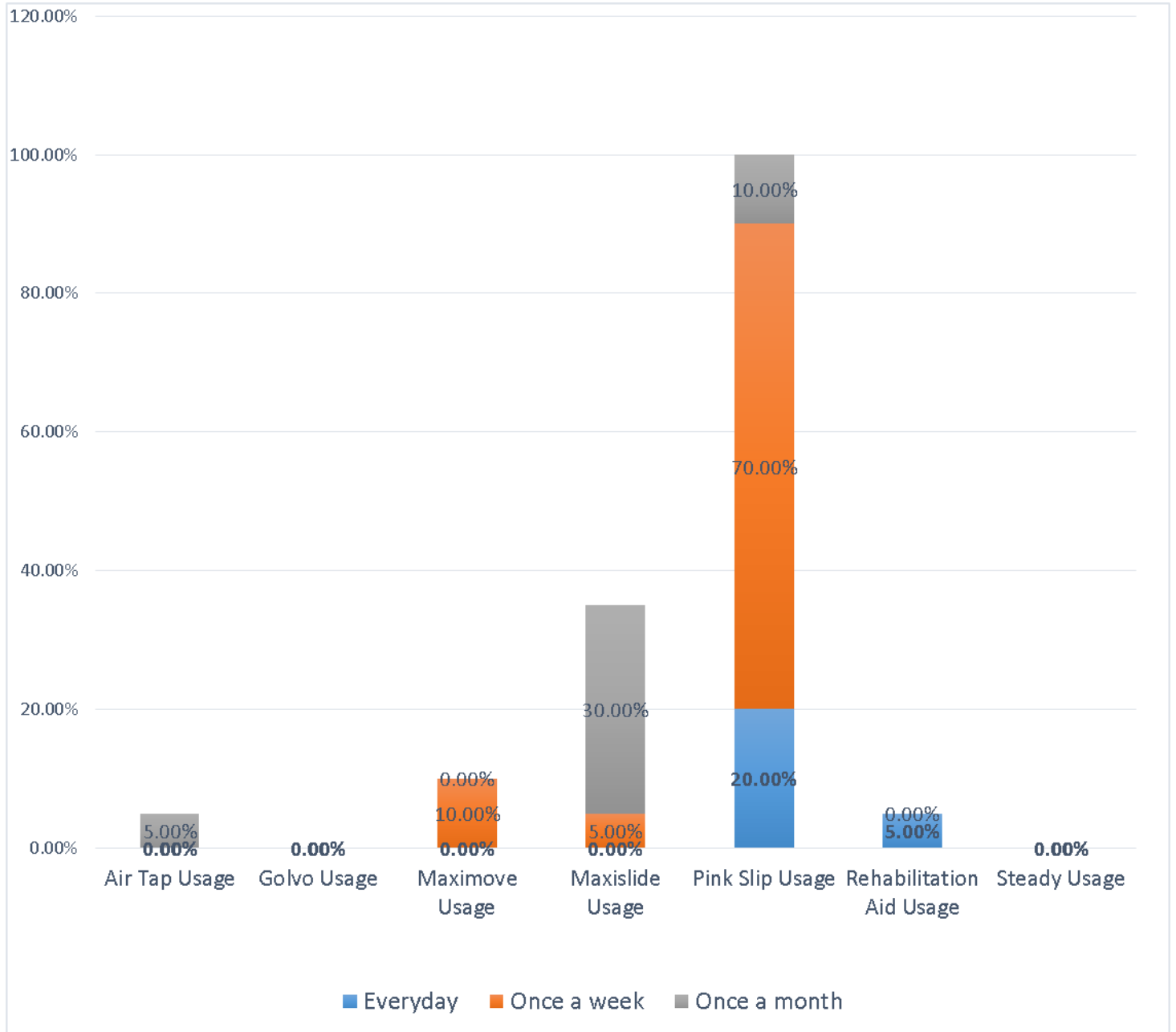
UNIT	ED
ITEM NUMBER	7

Row Labels
Explain why you find those tasks challenging.
...
All supplies are not present as they are borrowed often and very minimal do we have the chance to use the equipment. So few usage of the equipment is due to the amount of help from ems and staff on duty.
Discharging patients who are bed or chair bound and unable to assist with transfer. Not enough experience using assistive devices
DONE THE LEAST OFTEN
equipment isn't available or pt. refuses to be placed in a device to move.
Hard on lower back back.
INCREASE SIZE OF PATIENTS
Infrequency of performing the task
missing equipment
N/A
na
None
Not enough space to move when getting someone in or out of a car
Pt canbe heavy and difficult to maneuver
requires specific body mechanics and coordinated movements in order to protect yourself and the patient
the er stretchers are small, there is not enough staff
They are tasks that are more risky for my back, especially if the patient is heavy.
we don't have one in the department
when taking the pt out of car and pt is unable to move in the parking lot, its very challenging to move within the given space depending on the type of vehicle,

Equipment Frequently Used

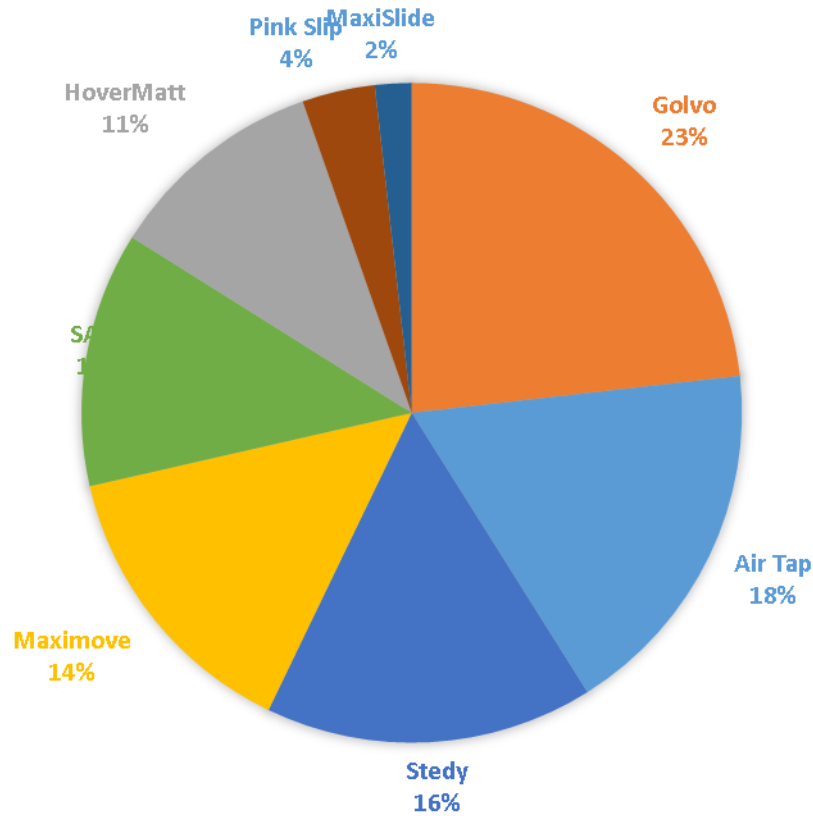
Q) In the past year, how often did you use the following products?

Emergency Dept.



Equipment/Devices Need More Practice or Help

SELECT THE TOP 3 SPH EQUIPMENT/DEVICES FOR WHICH YOU NEED MORE PRACTICE OR HELP TO OPERATE.



Situations Where You Could Have Been Better Prepared

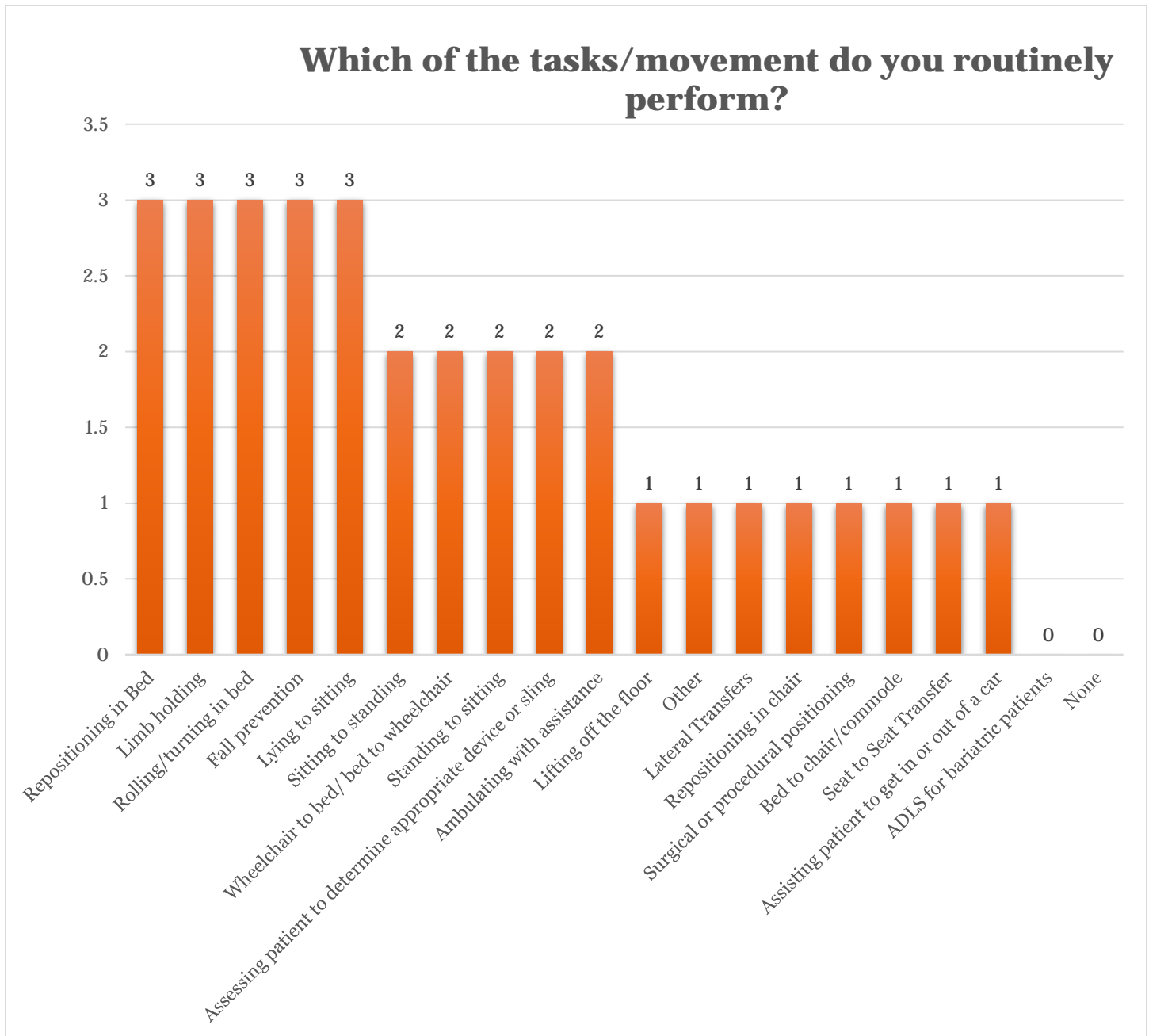
UNIT	ED
ITEM NUMBER	17

Row Labels
<p>In the past year, tell us a situation where you could have been better prepared in terms of patient handling? Describe the key points.</p>
<p>...</p>
<p>Cannot recall a situation</p>
<p>could have used an aistive device</p>
<p>DID NOT FEEL UNPREPARED</p>
<p>Getting a patient out of the car that was actively seizing</p>
<p>having equipment available when needed instead of sending a tech to go find it</p>
<p>Having the knowledge a 300 plus pound patient was coming into the ER to allow us to identify and get the proper equipment to move the patient when needed.</p>
<p>I am unsure where to find all of the different mobility devices and have them readily available.</p>
<p>if equipment was available or if pt was co-operative</p>
<p>In the past year I could have used the pink slip more and make sure the bed rail is all the way down in order to protect my back.</p>
<p>N/A</p>
<p>na</p>
<p>None</p>
<p>TEAM EVENTS WHERE YOU WORK TOGETHER</p>
<p>trying to move heavy pt without help</p>

PRE ADMISSIONS TESTING

Response Count = 3; Response Rate = 100%

Tasks Routinely Performed

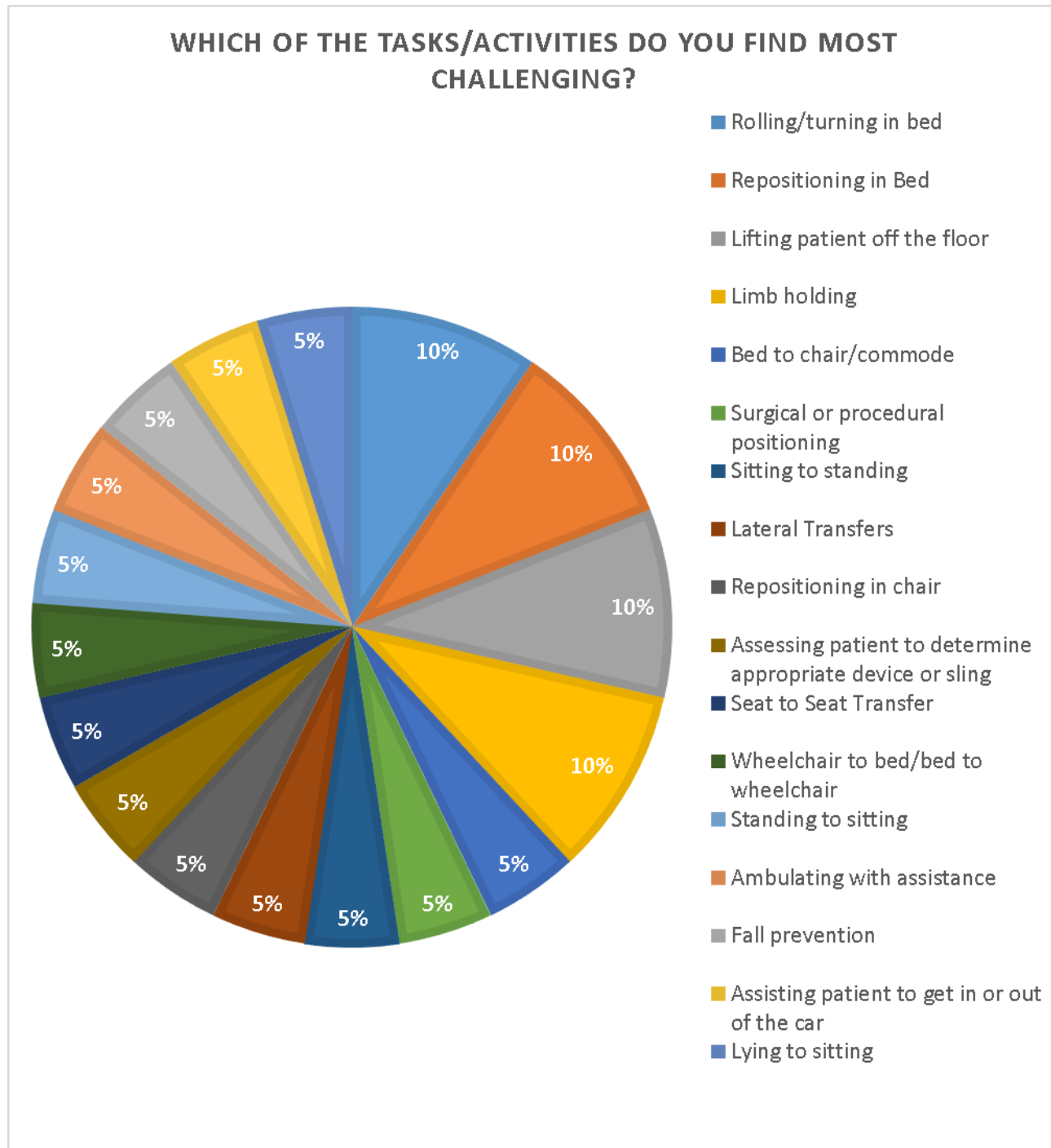


Tasks Routinely Performed - Continued

UNIT	PMA
ITEM NUMBER	5

Row Labels
Are there other tasks that you routinely perform not listed above?
Lifting in Bed
NO
pt advocate, clerical work, cleaning pts, emptying bedpans, recording for code strokes in er, admitting pts to hospital , medication reconciliation

Tasks/Activities Most Challenging



Tasks/Activities Most Challenging - Continued

UNIT	PMA
ITEM NUMBER	7

Row Labels

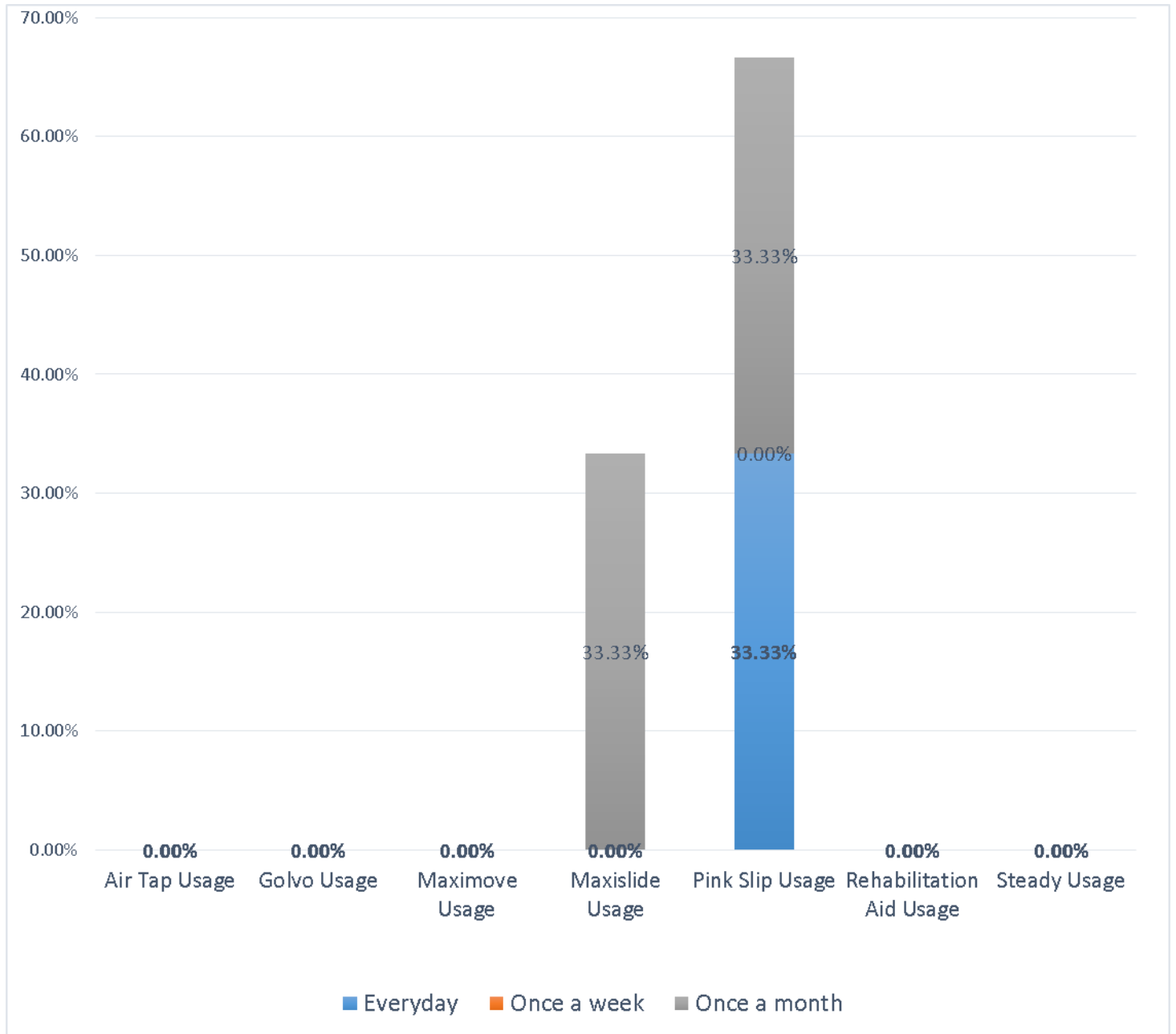
Explain why you find those tasks challenging.

I find these tasks challenging because they routinely require the use of one's whole body to perform a specific task. It is very easy to forget the use of proper body mechanics when you are in a hurry , which can result in an acute or chronic injury.
physically demanding

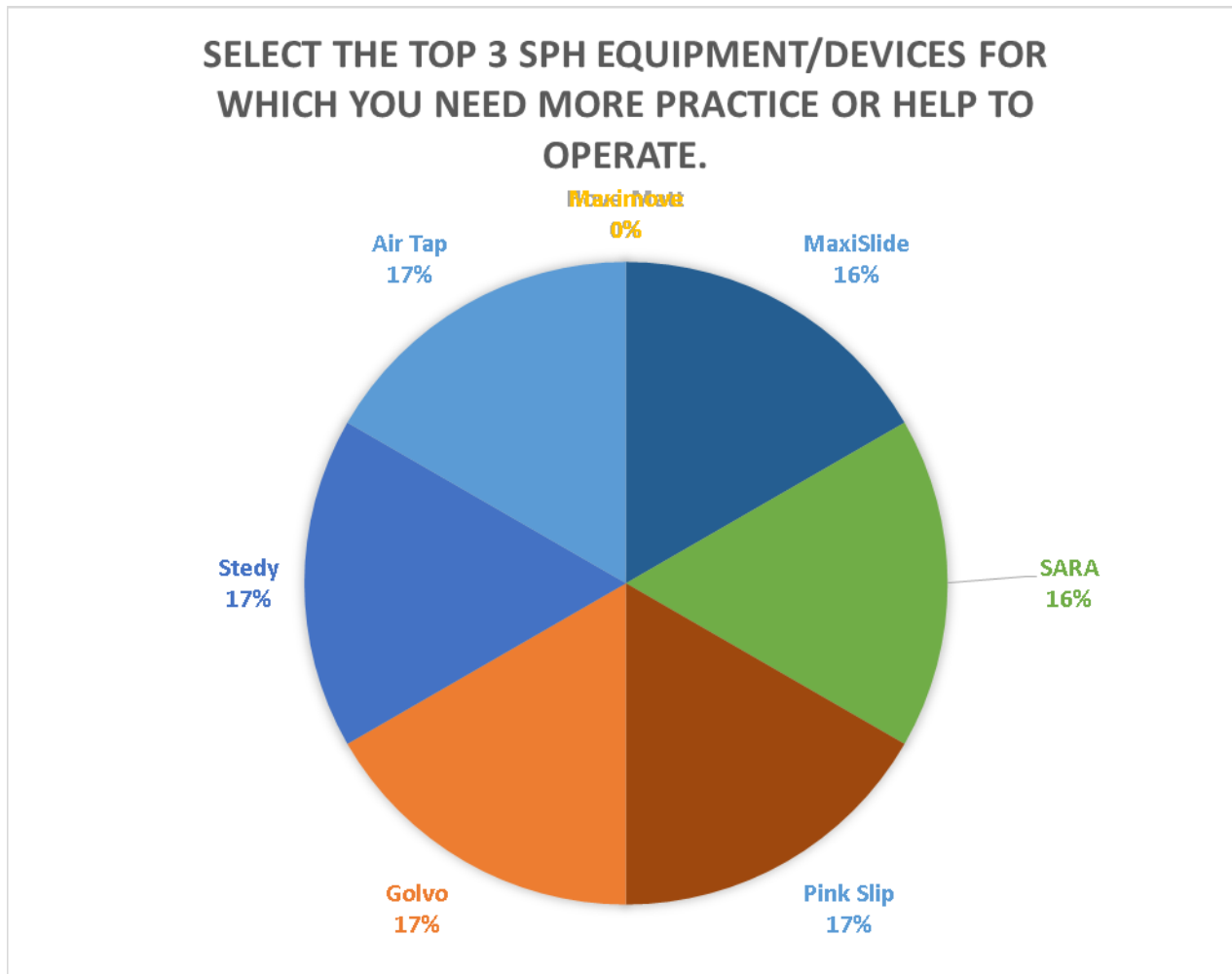
Equipment Frequently Used

Q) In the past year, how often did you use the following products?

Pre Admissions Testing



Equipment/Devices Need More Practice or Help



Situations Where You Could Have Been Better Prepared

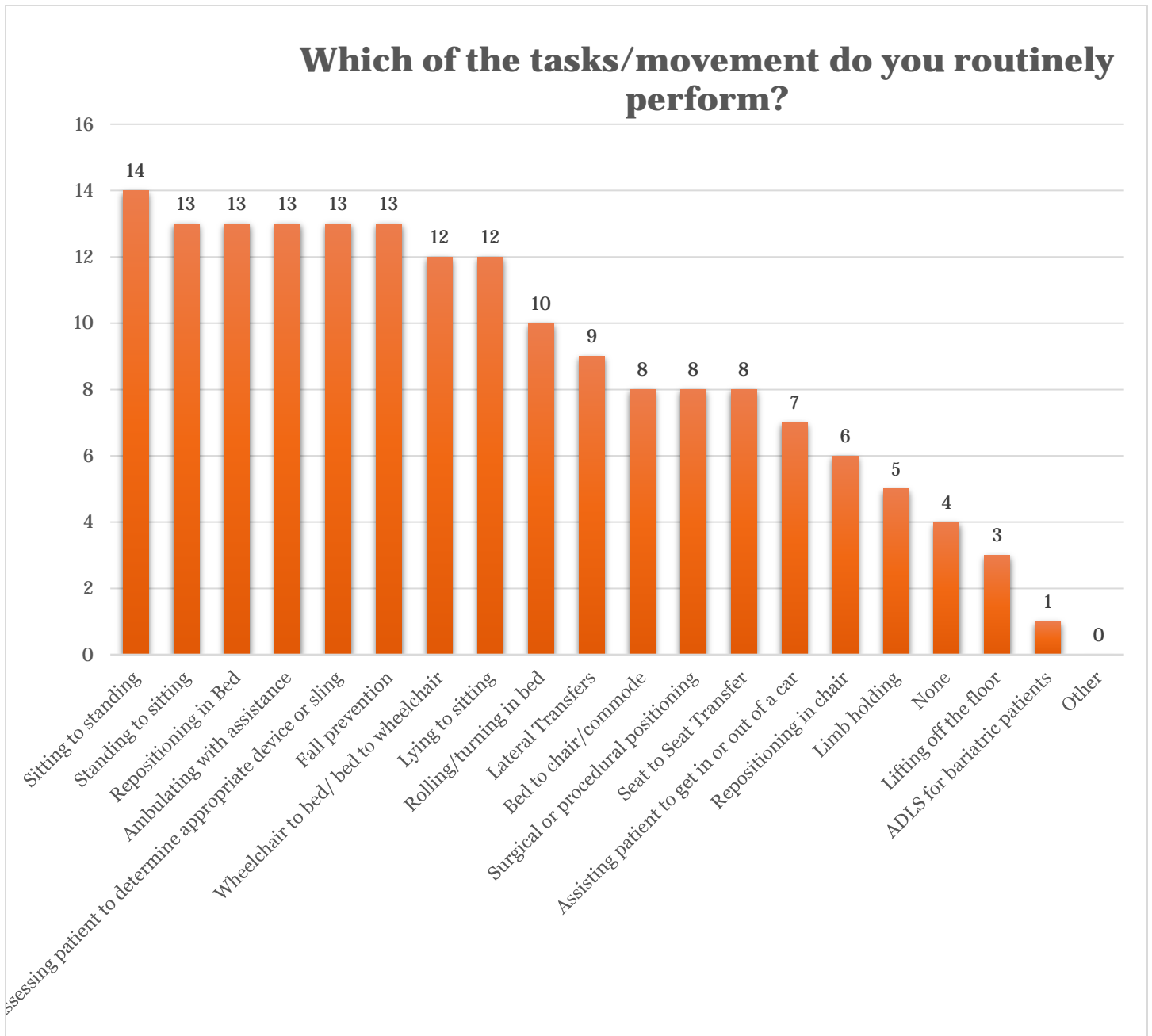
UNIT	PMA
ITEM NUMBER	17

Row Labels
In the past year, tell us a situation where you could have been better prepared in terms of patient handling? Describe the key points.
Being a PMA RN, I do not handle patients very often. I only either assist in boosting the patient up in bed or log rolling the patient from side to side to change the patient and/or the bed linens.
have equipment in rooms in all rooms
I cant think of anything at this time

ASU

Response Count = 18; Response Rate = 81.82%

Tasks Routinely Performed

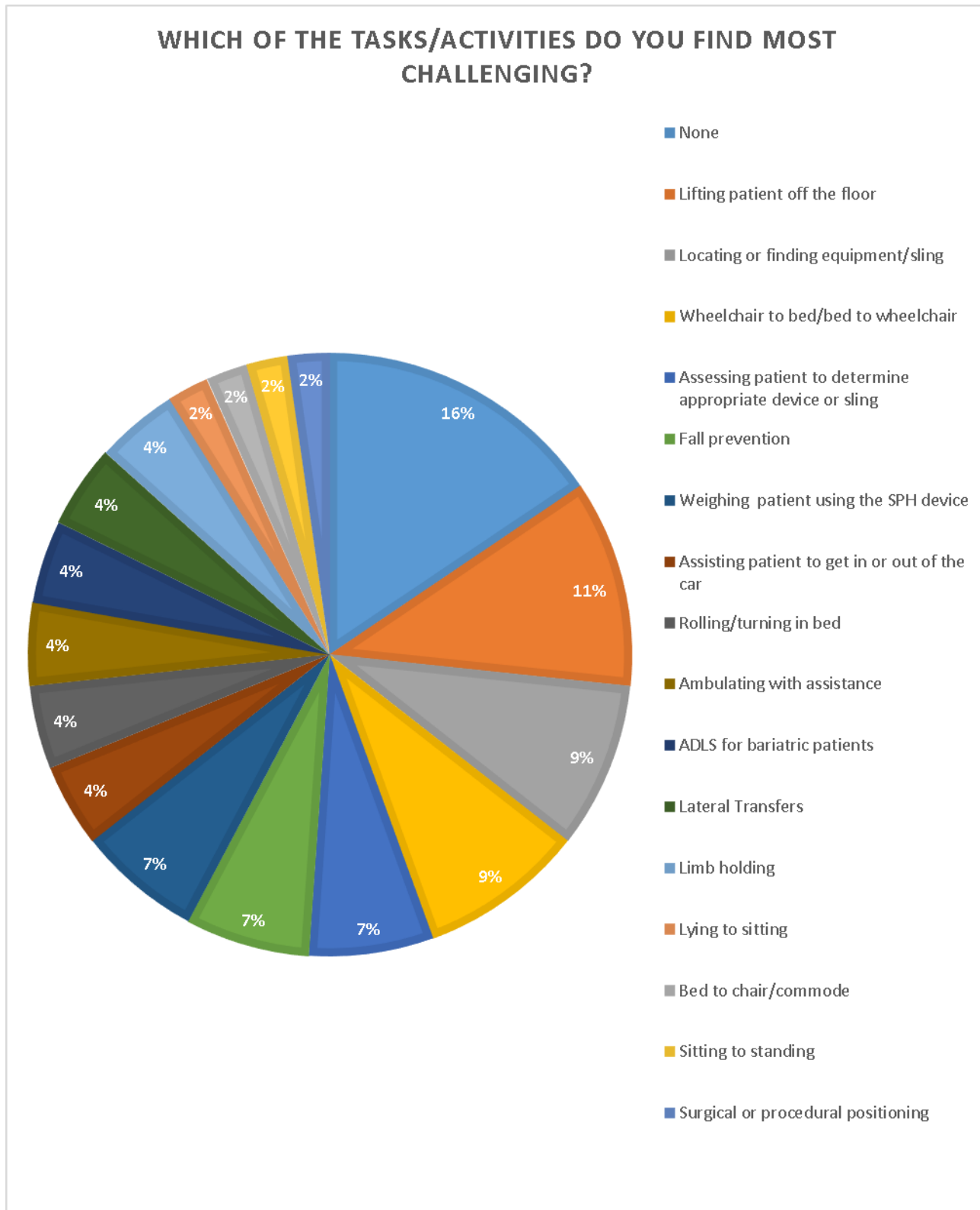


Tasks Routinely Performed - Continued

UNIT	ASU
ITEM NUMBER	5

Row Labels
Are there other tasks that you routinely perform not listed above?
////
dishard pt
hoyer lift, wheelchair/ stretcher transport
N/A
NO
None
PUSHING A STRETCHER,
Yes!

Tasks/Activities Most Challenging



Tasks/Activities Most Challenging - Continued

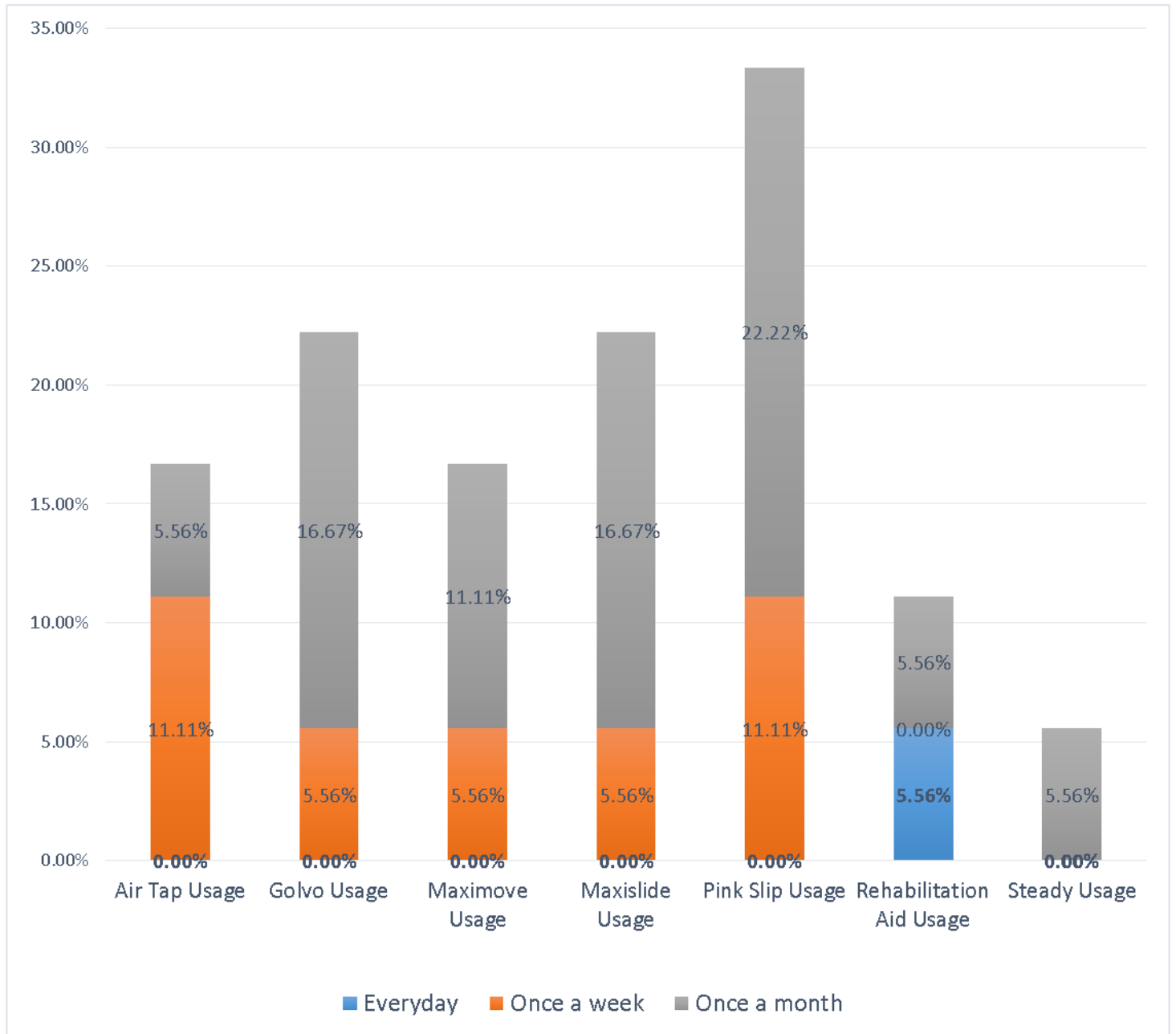
UNIT	ASU
ITEM NUMBER	7

Row Labels
Explain why you find those tasks challenging.
ASU have only stretches, rolling and turning is difficult. We have difficulties finding lifting equipment.
AT TIMES REPOSITIONING PT /ASSISTING PT FROM BED TO CHAIR CHAIR TO BED OR BED TO STANDING CAN BE CHALLENGING IF PROPER BODY MECHANICS ARE NOT USED NOT EVERY PT QUALIFIES FOR ASSISTIVE DEVICE AND THEY RELY ON OUR ASSISTANCE TO HELP GO FROM LYING TO SITTING IN BED
Back is bad. Been in nursing long before lift equipment. Leaning over takes a toll
getting people from wheelchair to car is often challenging especially if they have a limb that is not functional.
I DO NOT ROUTINELY UTILIZE DEVICES OR LIFTING EQUIPMENT BECAUSE FOR THE MOST PART MY PATIENTS ARE AMBULATORY
IT IS CHALLENGING IF WE DO NOT HAVE ADEQUATE HELP AT THIS TIME OF NEED
MUST HAVE ASSISTANCE OR GET EQUIPMENT NOT ON OUR FLOOR
N/A
need more help
None
Not comfortable using hoyer lift
pt to or on time200
Sometimes difficult to have pt cooperate with transfer Generally elderly population
Untrained in sling sizing

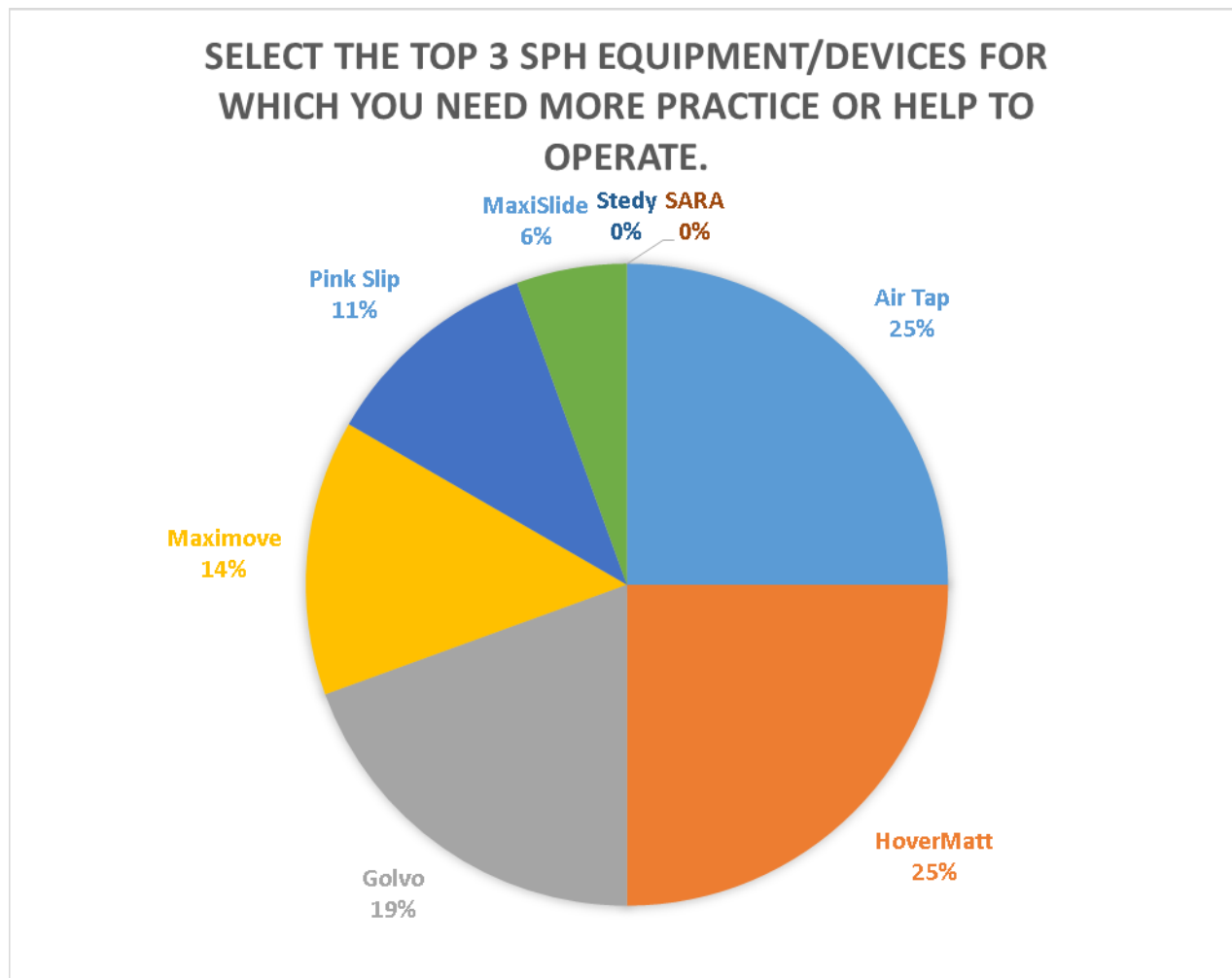
Equipment Frequently Used

Q) In the past year, how often did you use the following products?

ASU



Equipment/Devices Need More Practice or Help



Situations Where You Could Have Been Better Prepared

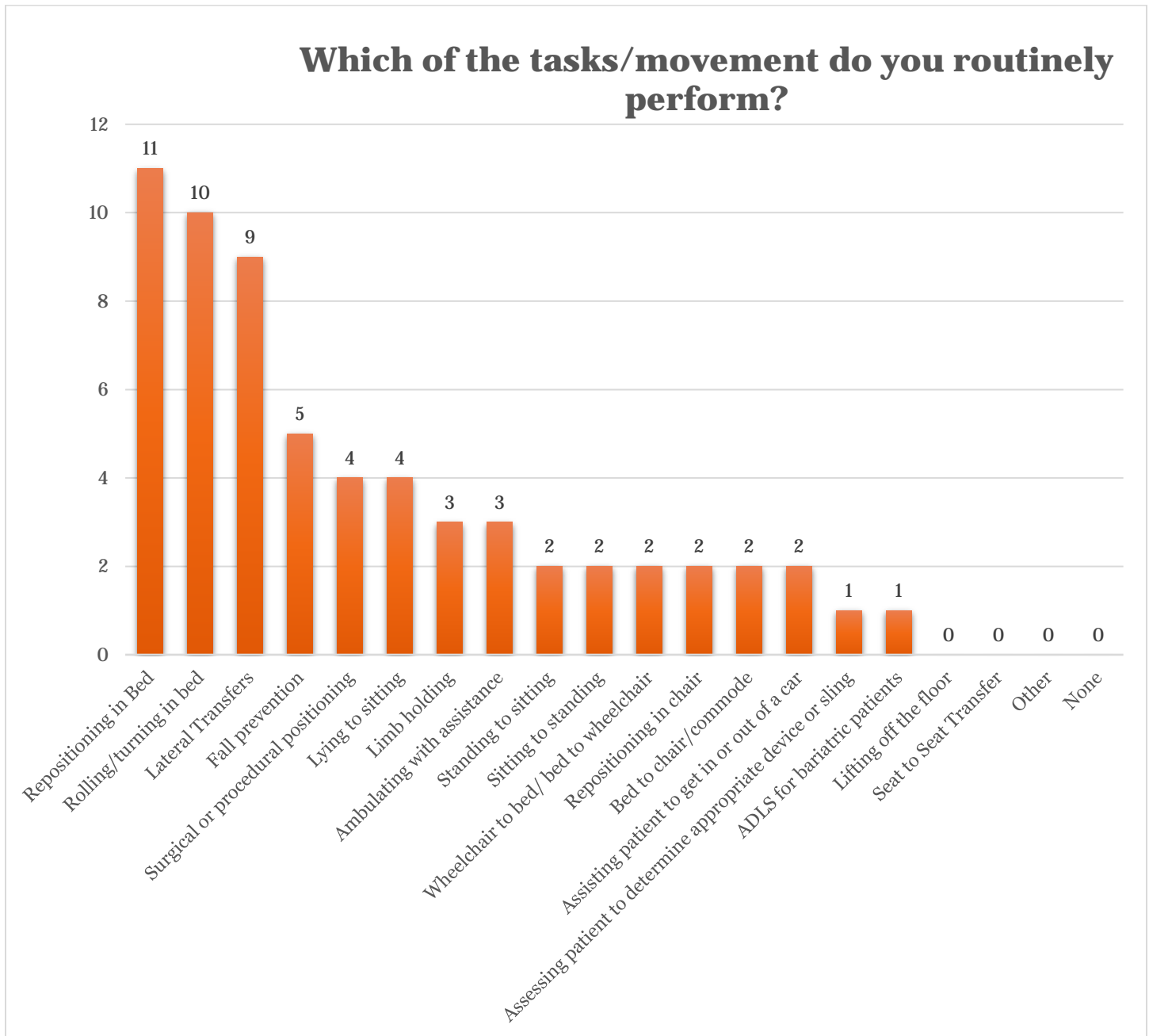
UNIT	ASU
ITEM NUMBER	17

Row Labels
In the past year, tell us a situation where you could have been better prepared in terms of patient handling? Describe the key points.
Always need a review since we don't use very frequently
CANNOT THINK OF A SITUATION AT THIS TIME THE ISSUE IS NOT REALLY GETTING EQUIPMENT WE UNDERSTAND AND ARE ABLE TO ASSESS THOSE PT IMMEDIATELY. IT IS THE DAILY PT ASSISTING FROM LYING TO SITTING
Having the equipment in our department
I don't get report or some information on patient's ability to move, I can be better prepared and with the right equipment if I have enough information about the patient .
I WORK IN A NON CLINICAL AREA , NOT IN DIRECT PATIENT CARE
IT WOULD BE BENEFICIAL TO HAVE THE STEDY OR SARA LOCATED IN AMB SURG
N/A
Need more training with hoyer lift & maxi move because most of the time our techs are doing it so when the RNs need to do it when our techs are not available we forget how to use it. RNs need more practice with using them.
None
sitting on bed to transferring to wheelchair when a leg has a block , with nwb, and cannot be bent
THE SARA COULD BE OF USE IN ASU , POST OP TO TAKE PT TO BATHROOM WHEN PT WAS NOT YET STABLE ENOUGH TO WALK A SHORT DISTANCE
TRANFER A QUADRIPLAGIC FROM WHEEL CHAIR TO BED
why
X
yes [am

PACU

Response Count = 11; Response Rate = 68.75%

Tasks Routinely Performed

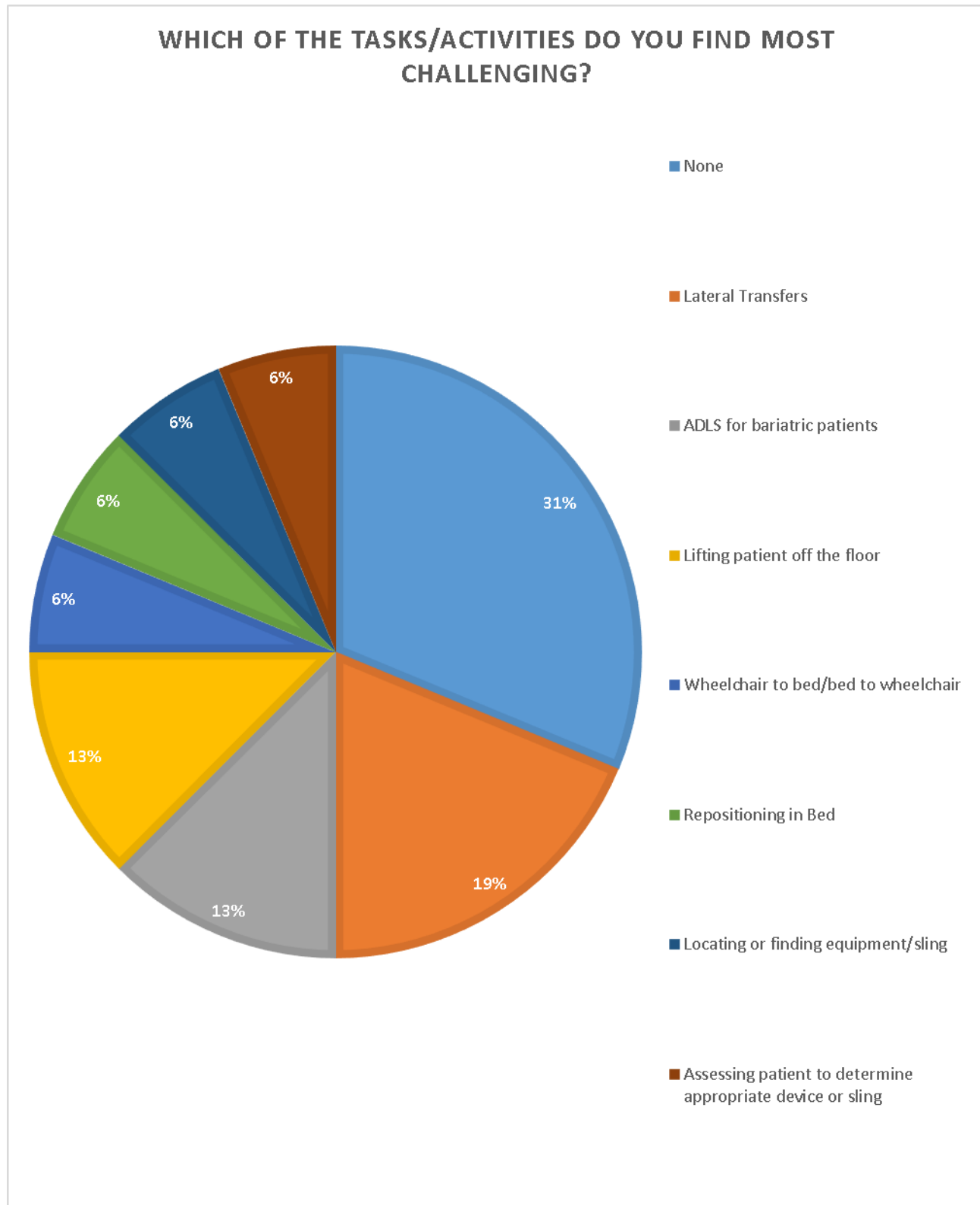


Tasks Routinely Performed - Continued

UNIT	PACU
ITEM NUMBER	5

Row Labels
Are there other tasks that you routinely perform not listed above?
boosting patient in stretcher/bed
NA

Tasks/Activities Most Challenging



Tasks/Activities Most Challenging - Continued

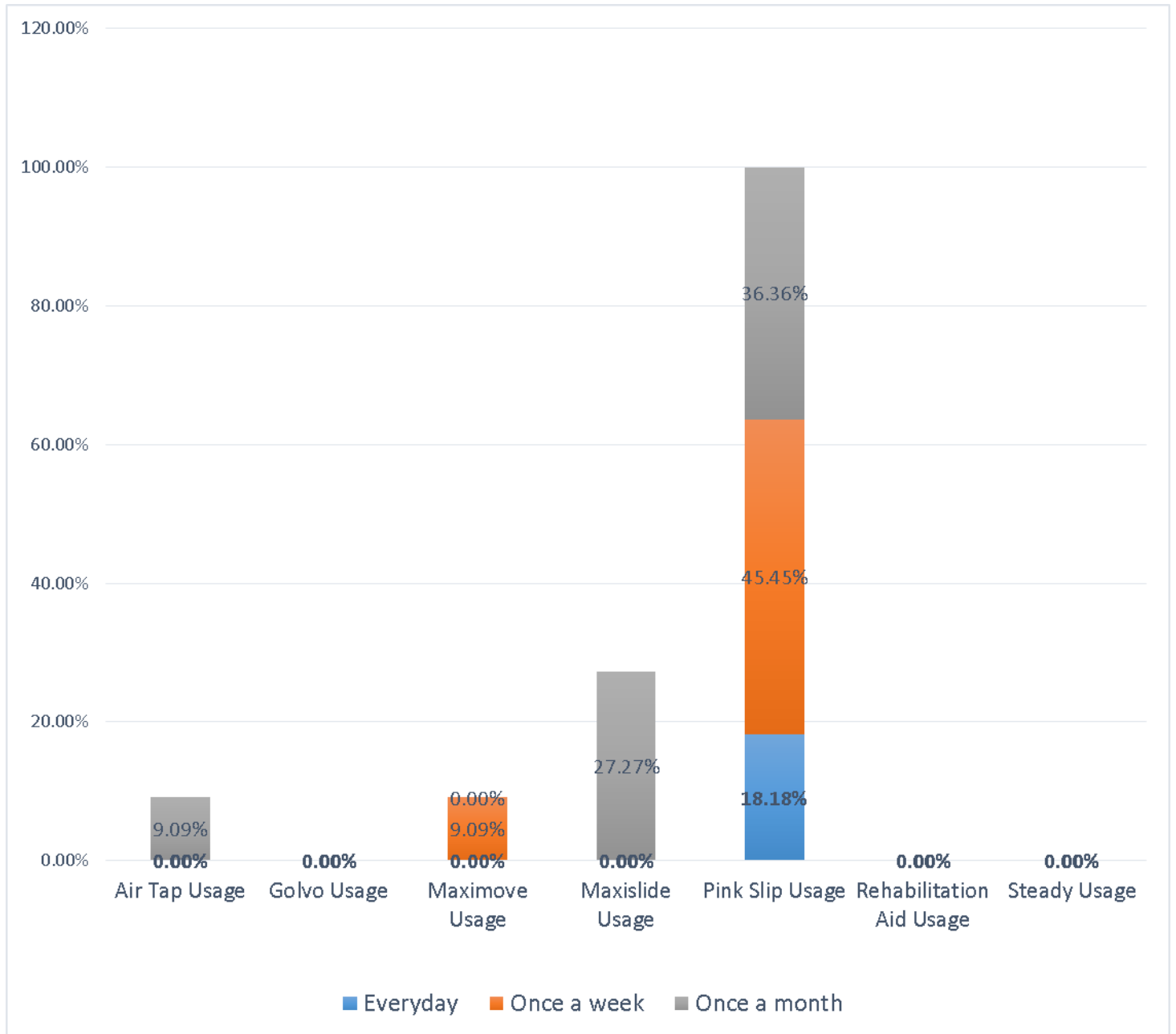
UNIT	PACU
ITEM NUMBER	7

Row Labels
Explain why you find those tasks challenging.
depends on weight of patient
heavy
lack of experience. I do not perform these tasks often.
Lateral transfers are difficult if the patient is unable to participate or in pain and if there are not enough staff readily available to assist in the transfer. It is also extremely difficult to maneuver lateral transfers in crowded patient rooms especially semiprivate rooms with lots of equipment, chairs tray tables visitors etc.
N/A
na
None
Not using equipment often therefore, lose skills
rooms are too smallespecially when there is a roommate

Equipment Frequently Used

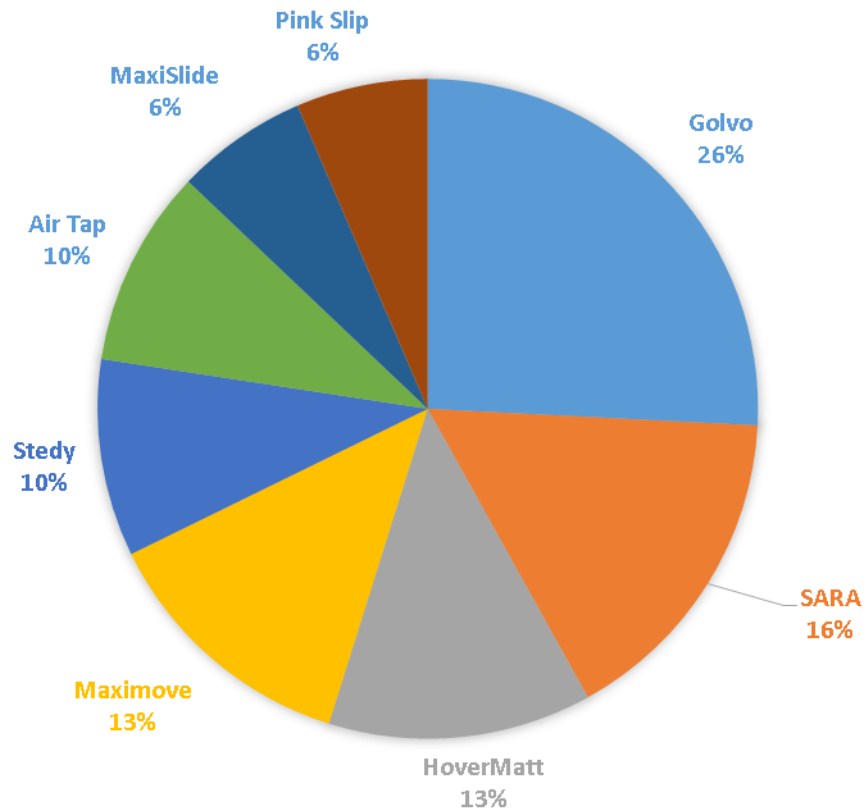
Q) In the past year, how often did you use the following products?

PACU



Equipment/Devices Need More Practice or Help

SELECT THE TOP 3 SPH EQUIPMENT/DEVICES FOR WHICH YOU NEED MORE PRACTICE OR HELP TO OPERATE.



Situations Where You Could Have Been Better Prepared

UNIT

PACU

ITEM NUMBER

17

Row Labels

In the past year, tell us a situation where you could have been better prepared in terms of patient handling? Describe the key points.

HAVE PT PUT ON THE APPROPRIATE STRETCHER OR BED WHEN COMING OUT OF OR.

N/A

na

No. We use the hover mat for bariatric moves and we assist each other with turning, etc.

None

Patient handling would be much more efficient if staff who are accepting the patient back from the PACU would come to assist with transfers upon patient arrival. This is not always a problem as on some floors, nurses and techs do come to assist right away, however there are some departments where staff is not readily able and therefore transfers are performed more slowly and are overall more difficult to complete.

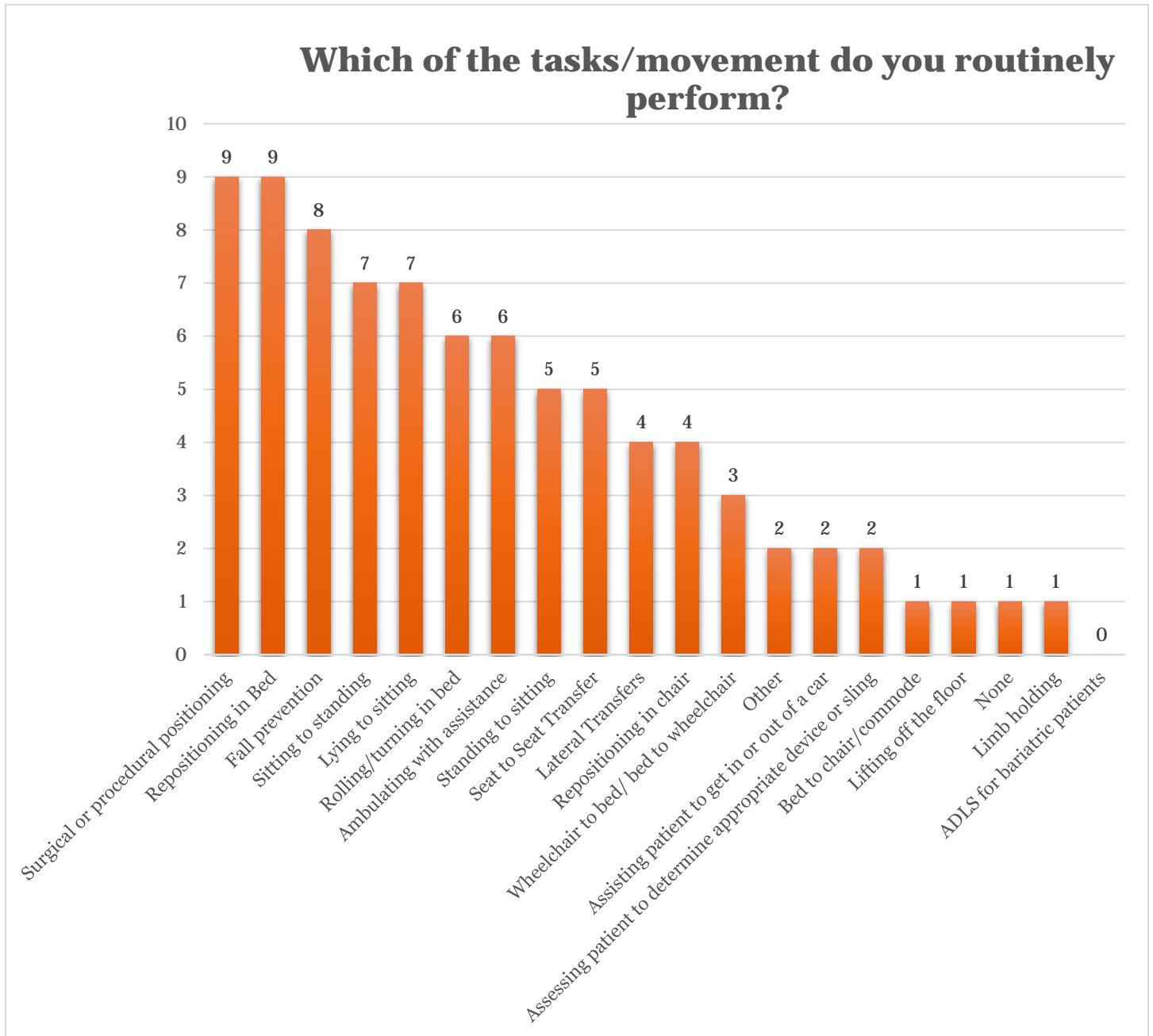
using hovermatt with bariatric patient....used so infrequently I forget some key points

When using the Hovermat because the staff on the floor were not familiar with the device and did not have the machine to blow up the Hovermat. Since then this has improved and now all floors have the proper equipment.

ENDOSCOPY

Response Count = 11; Response Rate = 57.89%

Tasks Routinely Performed

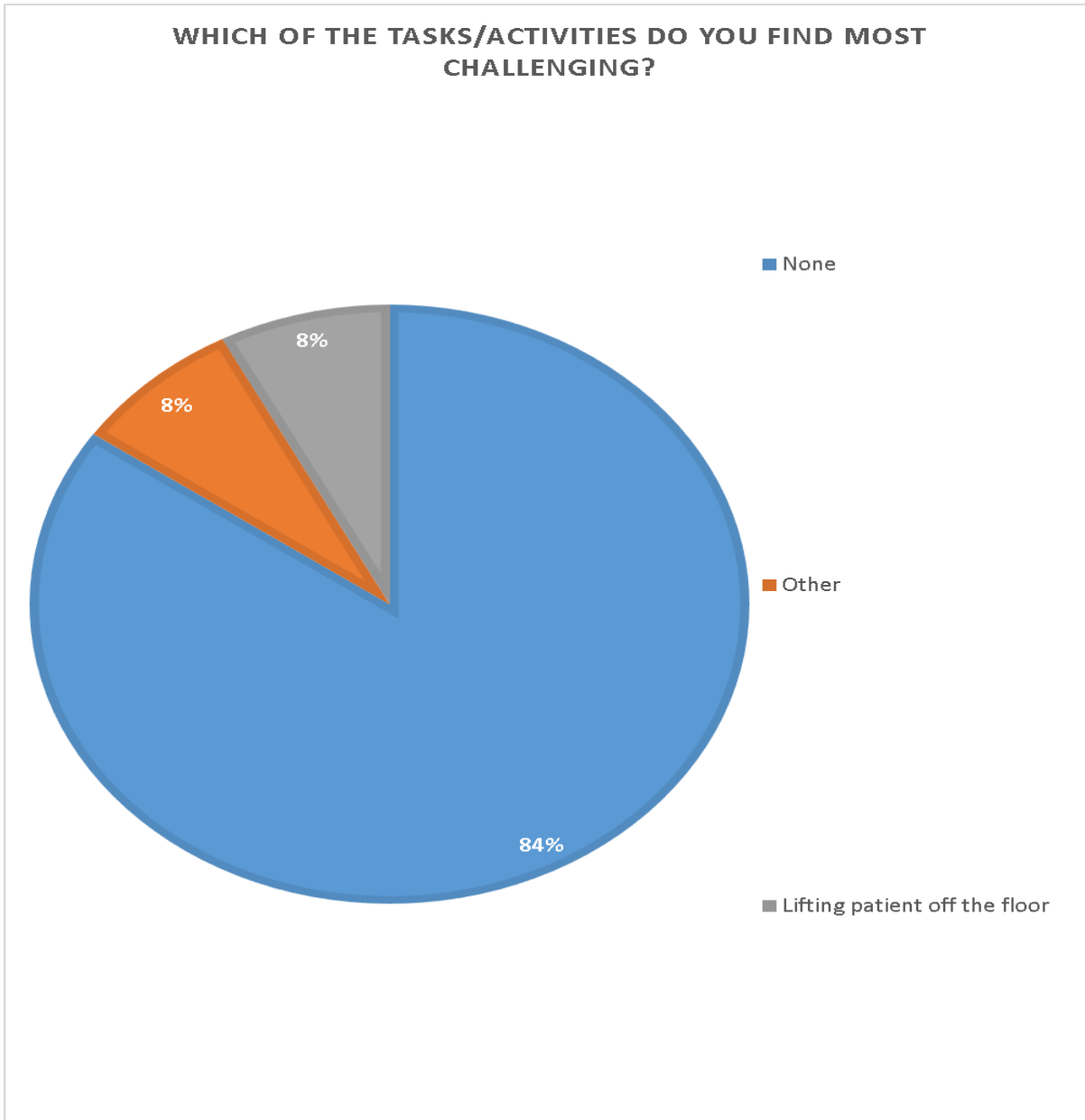


Tasks Routinely Performed - Continued

UNIT	ENDO
ITEM NUMBER	5

Row Labels
Are there other tasks that you routinely perform not listed above?
equipment ,assist for the procedure
N/A
N/E
NO
None
PUSHING AND PULLING STRECHTER, TRANSPORT PT O UIT VIA STRECHTER
scope reprocessing, assisting endoscopy procedure

Tasks/Activities Most Challenging



Tasks/Activities Most Challenging - Continued

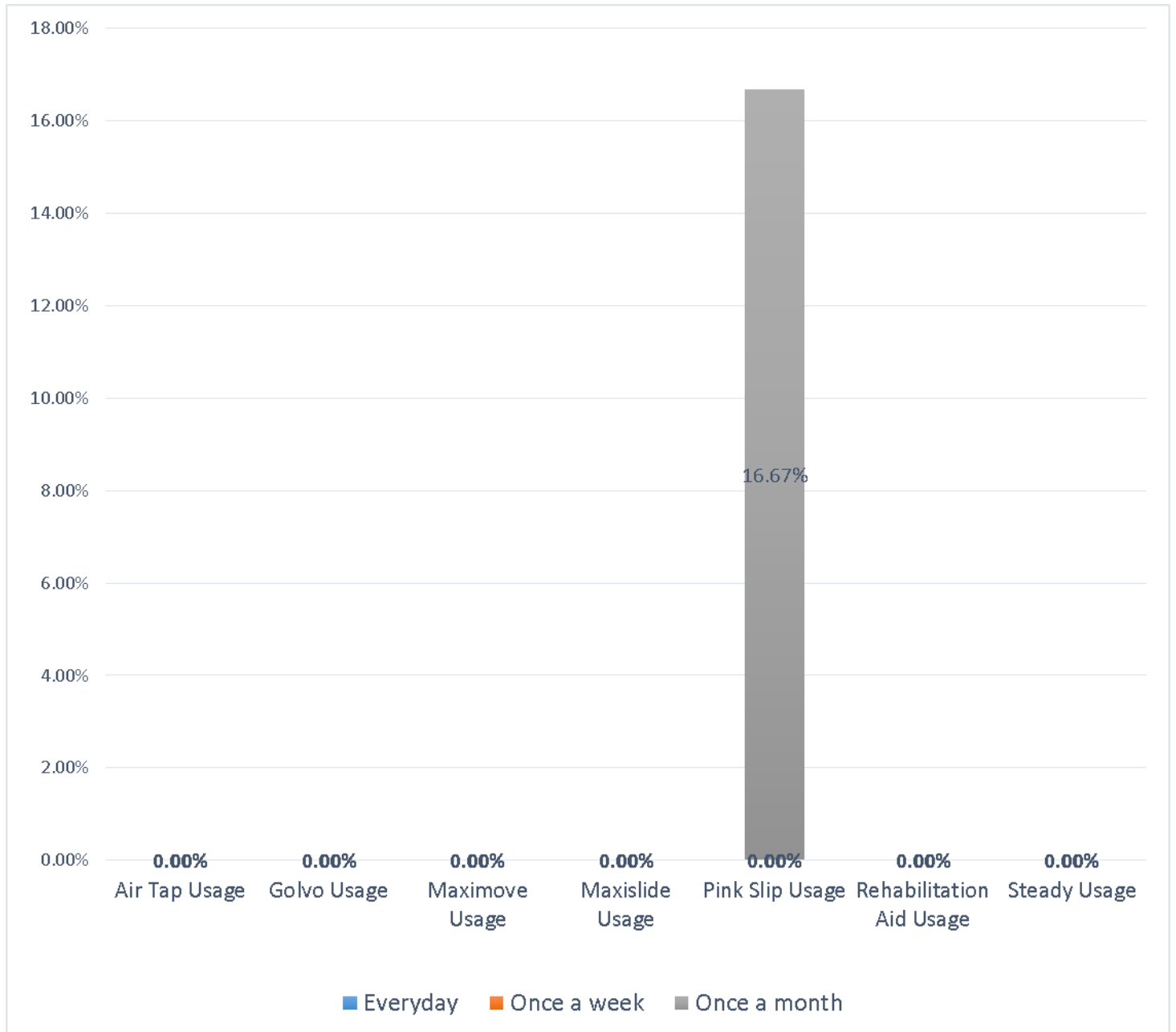
UNIT	ENDO
ITEM NUMBER	7

Row Labels
Explain why you find those tasks challenging.
IT IS INFREQUENT THAT WE GET PT'S NEEDING THESE DEVICES.
lack of accessibility

Equipment Frequently Used

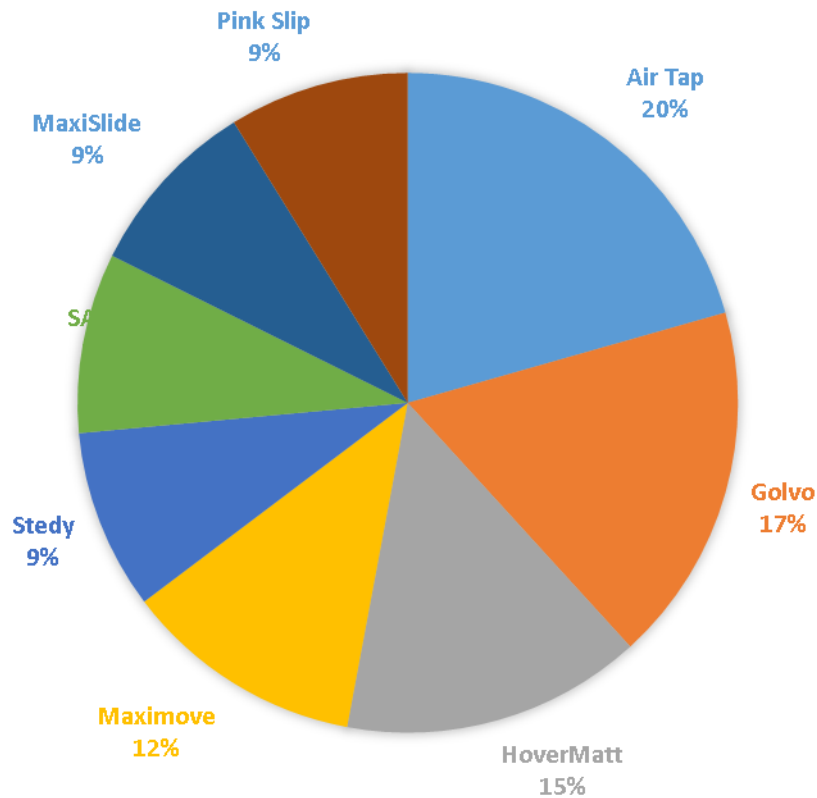
Q) In the past year, how often did you use the following products?

ENDO



Equipment/Devices Need More Practice or Help

SELECT THE TOP 3 SPH EQUIPMENT/DEVICES FOR WHICH YOU NEED MORE PRACTICE OR HELP TO OPERATE.



Situations Where You Could Have Been Better Prepared

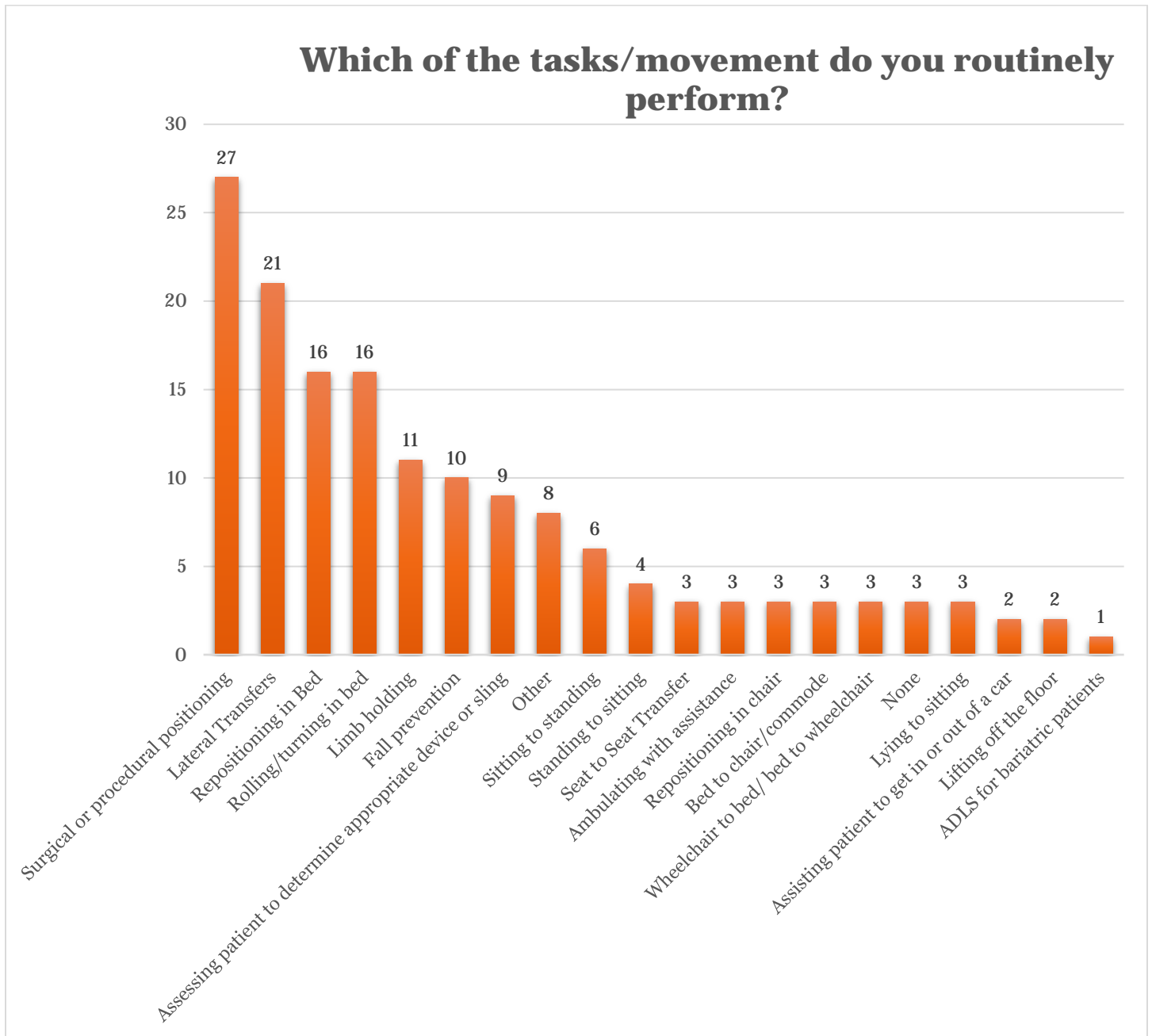
UNIT	ENDO
ITEM NUMBER	17

Row Labels
<p>In the past year, tell us a situation where you could have been better prepared in terms of patient handling? Describe the key points.</p>
.
cant recall any
FROM WHEELCHAIR TO STRETCHER, STRETCHER TO WHEELCHAIR. PT WAS SCARED. PT COULD STAND BUT WOULD COLLAPSE A LITTLE. CONTINUED TO REASSURE PT IN STANDING. HELPED HER TO PIVOT ONTO THE STRETCHER.
having a charged battery on the lift from change of night shift to day shit. it is not routine that the night shift staff changes and charges the battery.
na
NON
None
should have used a pink sheet under a patient undergoing colonoscopy procedure. difficult to position pt in procedure
take care of the patient

Operating room

Response Count = 39; Response Rate = 84.78%

Tasks Routinely Performed

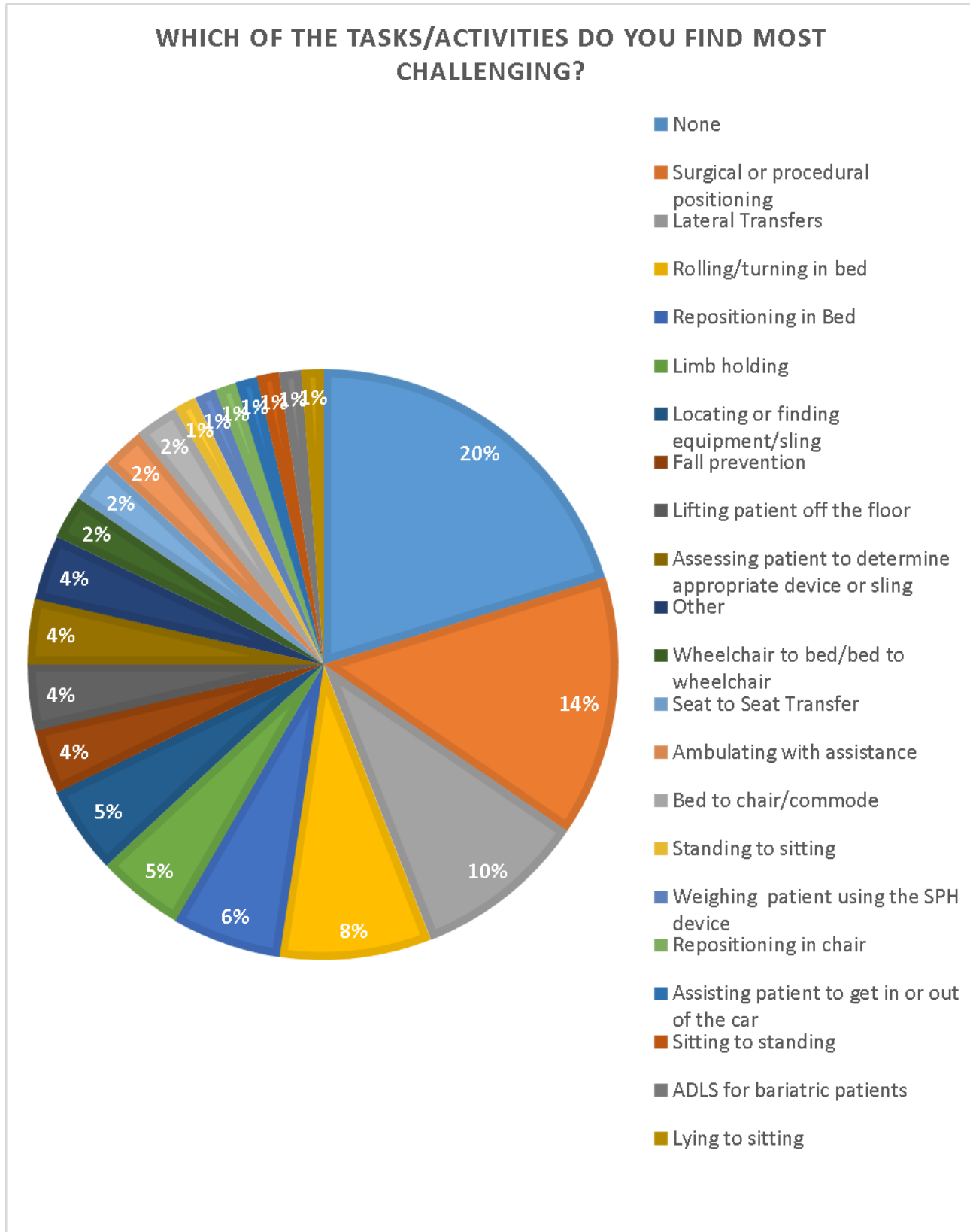


Tasks Routinely Performed - Continued

UNIT	OR
ITEM NUMBER	5

Row Labels
Are there other tasks that you routinely perform not listed above?
,
clean room, bring in equipments
cleaning the rooms set up the case in the room
lifting / moving heavy objects
movement from strecher to bed
MOVING PATIENTS FROM STRETCHER OR BED TO SURGICAL OR BED
N/A
na
NO
None
Performing laser procedures for eye surgery and circulating for eye surgeries.
Pushing stretchers, moving patients from ASU to OR to PACU
standing for long periods of time
transfer from bed to stretcher or from stretcher to bed
yes

Tasks/Activities Most Challenging



Tasks/Activities Most Challenging - Continued

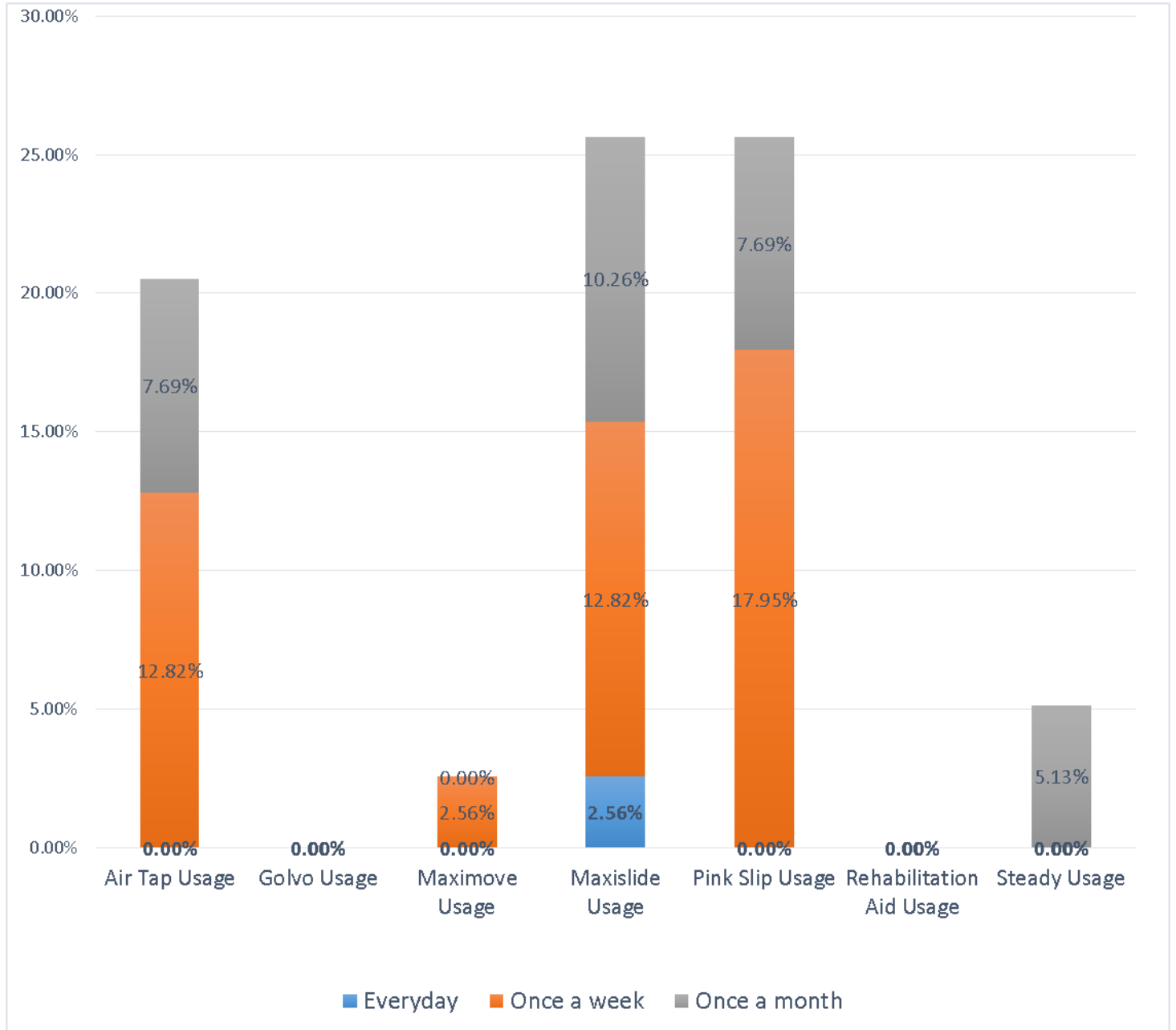
UNIT	OR
ITEM NUMBER	7

Row Labels
Explain why you find those tasks challenging.
Because we have to take care of the patiente first.
Depends on six of patient. Limb holding especially can be for a long time in an awkward position.
didnt find any task challenging
don't usually do any of the task listed above
Equipment is not always available first thing in the morning for eye cases from Central Sterile. Also, equipment that was sent downstairs to Central Sterile is sometimes misplaced or lost.
EQUIPMENT IS NOT AVAILABLE, OR TIME REQUIRED TO PERFORM TASKS IS LIMITED.
HARD ON YOUR BACK
I do not find anyone of them challenging
its all we do
Moving patients from supine to prone. There aren't any devices to assist with those positions.
N/A
NOT ENOUGH PERSONNEL TO MAKE TO REPOSITION PATIENT, PATIENT IS OVERWEIGHT, POSITIONING DEVICE IS MISPLACED OR LOST, SURGEONS ARE NOT HELPING OUT POSITIONING PATIENT, SURGEON LEAVES THE ROOM ONCE THE PROCEEDURE THE DONE, ETC.
NOTHING IS CHALLENGING I WAS TRAINED ON THE EQUIPMENT AND FEEL VERY COMFORTABLE USING ALL GADGETS TO ASSIST OUR PATIENTS IF NEEDED
positioning devices
proper body mechanics
Several people needed position patient and when on call, you don't have the help
Some patients limbs are heavy and need to be suspended for a long time while the surgeon scrubs in, and preps the limb
Sometimes when you're on call, you are the only person positioning the patient.
The aforementioned tasks are challenging in some instances since some of the patients are big and we don't have the available set of hands to perform those tasks.
the patient is in a difficult spot
The use of the hovermat is frowned upon.
Transferring a patient from the OR bed to the stretcher can be challenging if they are overweight.

Equipment Frequently Used

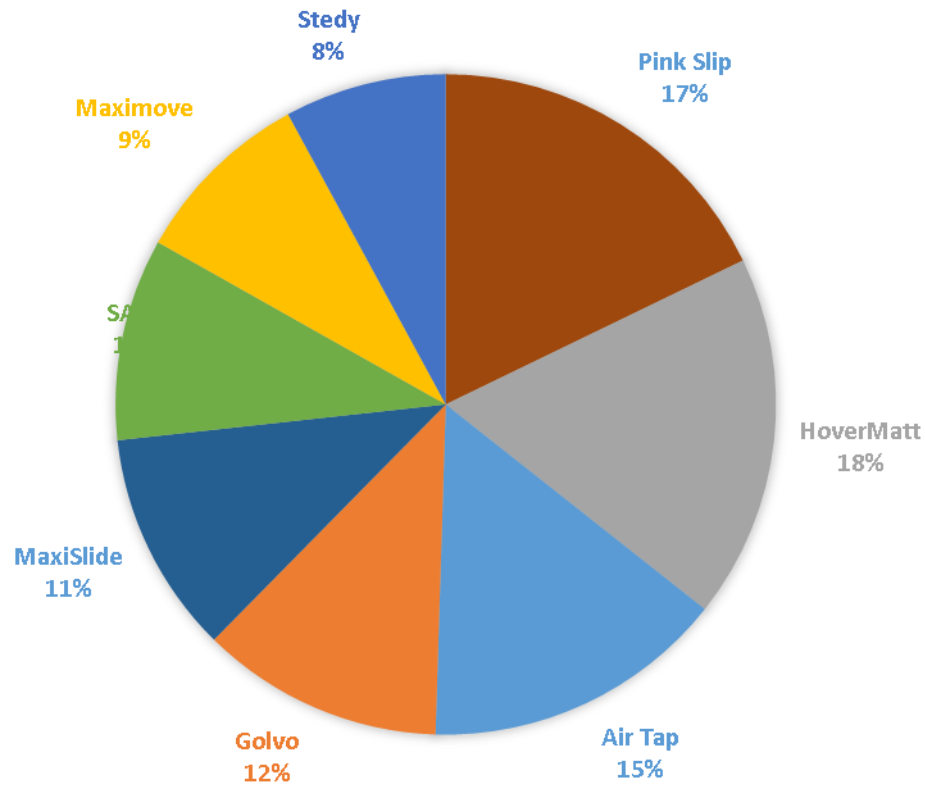
Q) In the past year, how often did you use the following products?

OR



Equipment/Devices Need More Practice or Help

SELECT THE TOP 3 SPH EQUIPMENT/DEVICES FOR WHICH YOU NEED MORE PRACTICE OR HELP TO OPERATE.



Situations Where You Could Have Been Better Prepared

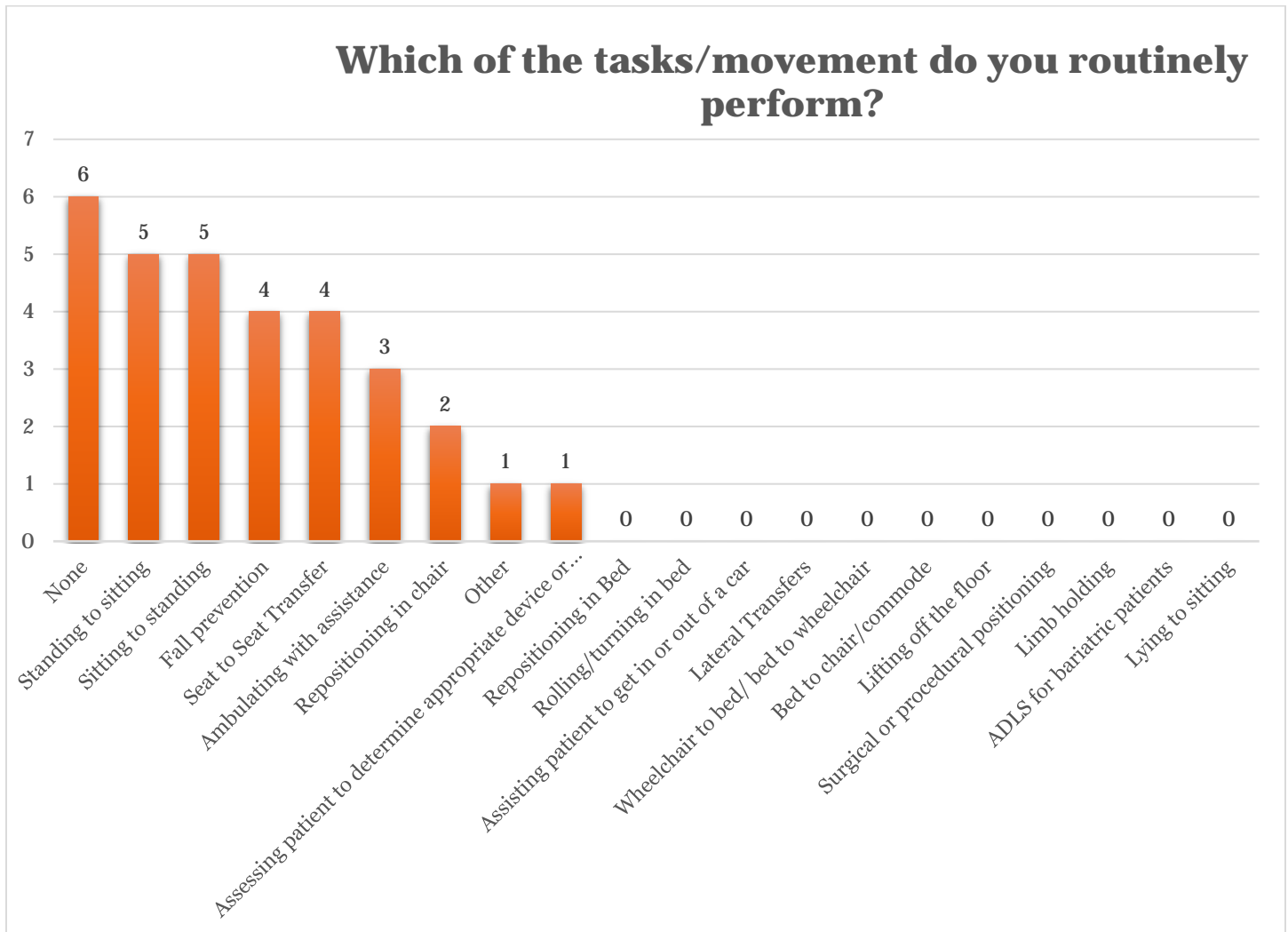
UNIT	OR
ITEM NUMBER	17

Row Labels
In the past year, tell us a situation where you could have been better prepared in terms of patient handling? Describe the key points.
.
,
air bed helped to move larger patients
ASU staff need to identify larger patients and have the hovermat on the stretcher prior to the patient positioning themselves on it so it is under the patient when we go to move them onto the OR table.
communication from unit to unit if the patient is on contact.
I ASSIST WITH MOVING IN THE OR
I don't have any because my job is to surgery the patient from the strait to the surgery table.
If we are informed beforehand of the patients habitus.
Just always asked for a help to prevent accidents.
moving from supine to prone
My role is currently has no direct patient contact.
N/A
na
Need more hovermats available
NO
None
None of this applies to my role. I selected pink slip because I had to select one to complete the eval.
none so far just use the pink is a good way for move patient for bed to bed
notification from the floor that a patient needs moving devices
PATIENT SHOULD BE ON HOVERMAT, MAXISLIDE OR PINK SLIP PRIOR WHEELING INTO THE OPERATING ROOM. IT SAVES US TIME AND EFFORT TO START THE PROCEDURE.
positioning a pt for spine surgery
positioning devices
This health stream doesn't pertain to me as much as it does the Specialty Techs.
using a hover lift to transfer pt
We would benefit from more hovermat pumps in the perioperative setting.
WHEN WE HAD TO MOVE A PATIENT FROM A NORMAL STRETCHER TO AN ICU BED I ASSISTED IN TRANSFERRING THE PATIENT USING A PINK SLIP. WE AS A GROUP IN THE PACU WAS SUCCESSFUL WITH THE KNOWLEDGE TO FOLLOW THIS TASK WITH FLYING COLORS AS THE PATIENT WAS MORE COMFORTABLE IN HIS BED AND MADE IT TO A FULL RECOVERY.

Cancer Institute

Response Count = 12; Response Rate = 85.71%

Tasks Routinely Performed



Tasks Routinely Performed - Continued

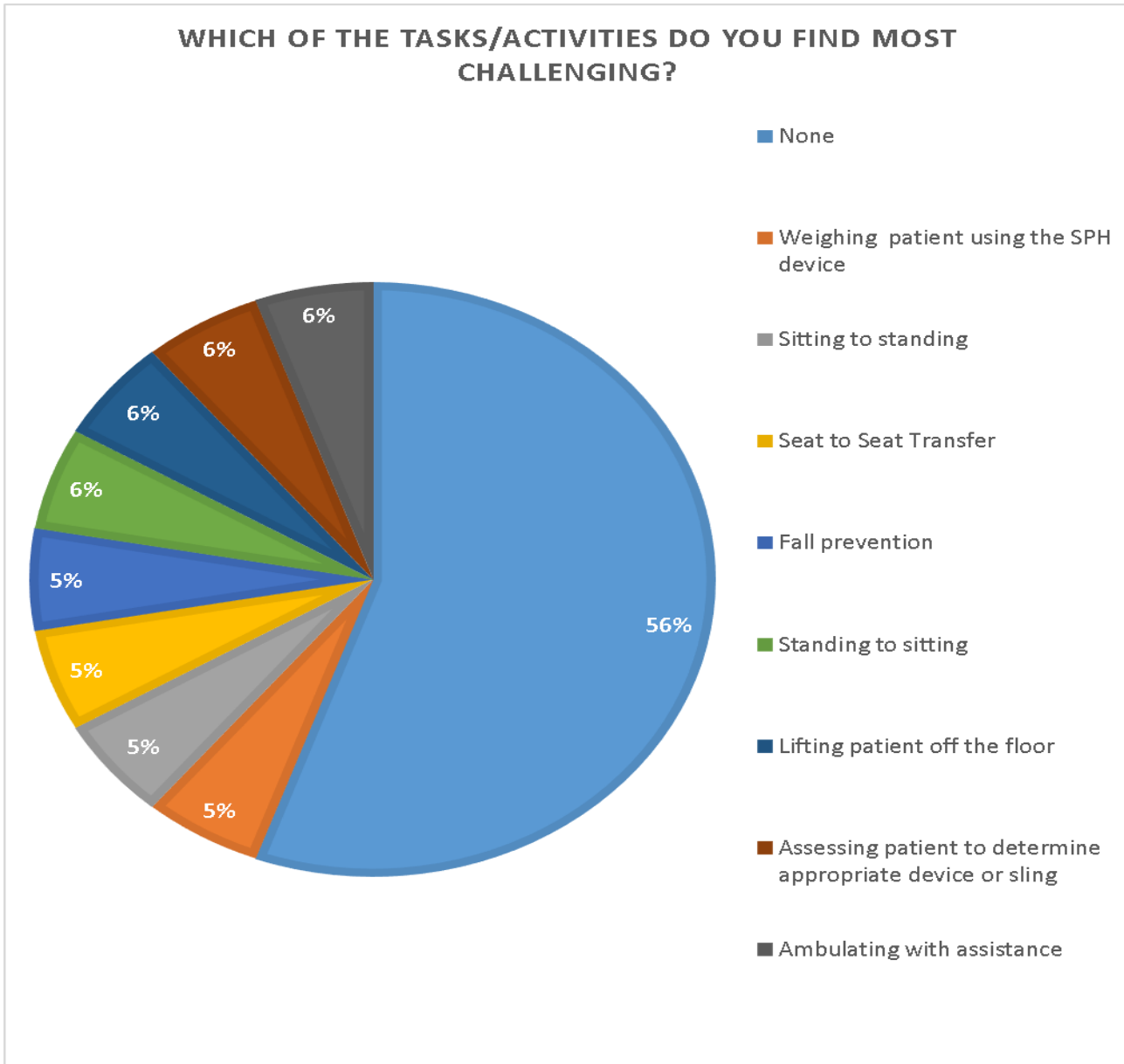
Are there other tasks that you routinely perform not listed above?

access port-a-cath, perform IV insertions

NO

none, most of our pt. are ambulatory

Tasks/Activities Most Challenging



UNIT

Cancer
Inst.

ITEM NUMBER

7

Row Labels

Explain why you find those tasks challenging.

Availability of the right size sling, the weight of the patient, their level of immobility, time constraints.

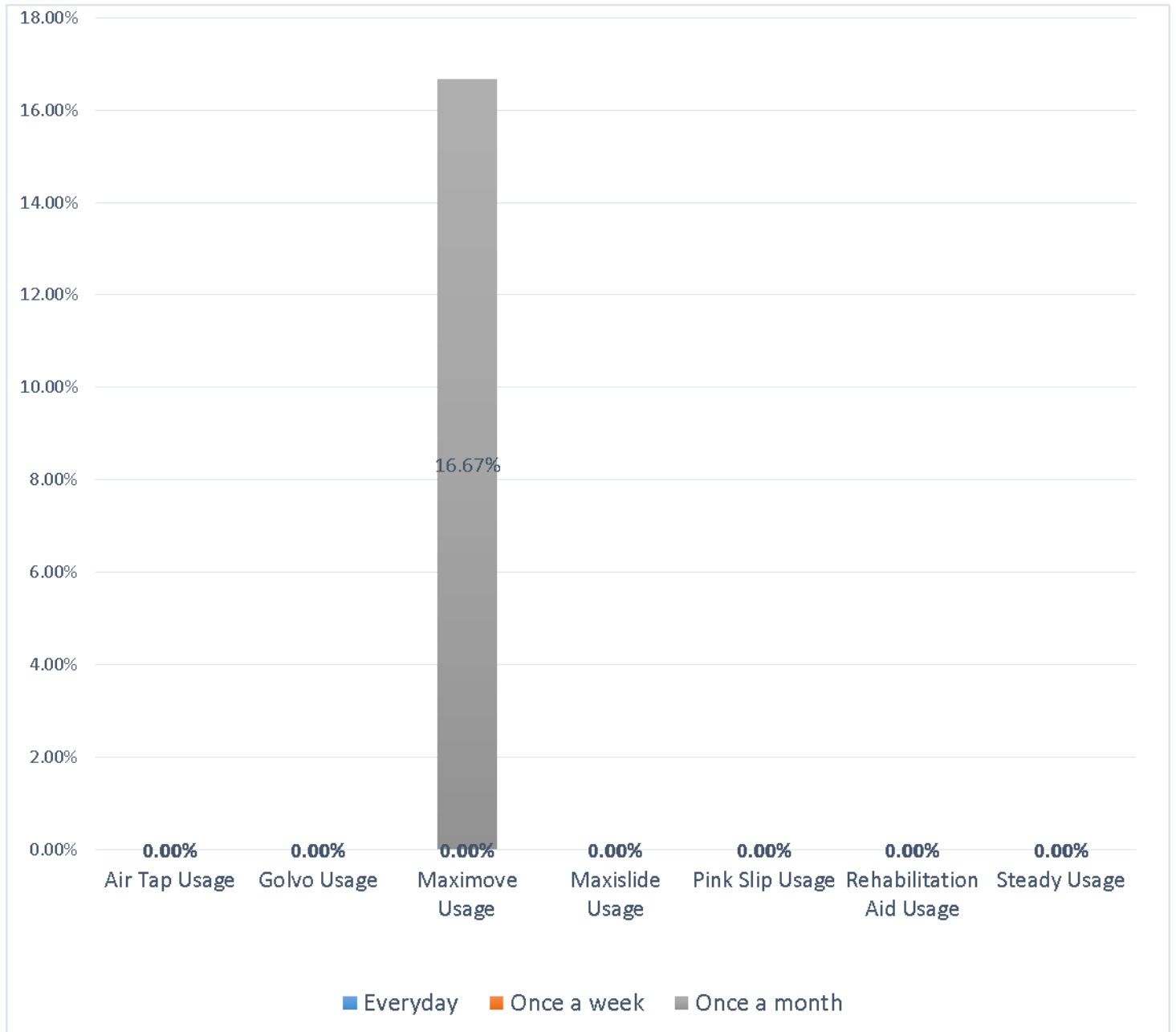
I work in outpatient so I don't have these challenges

N/A

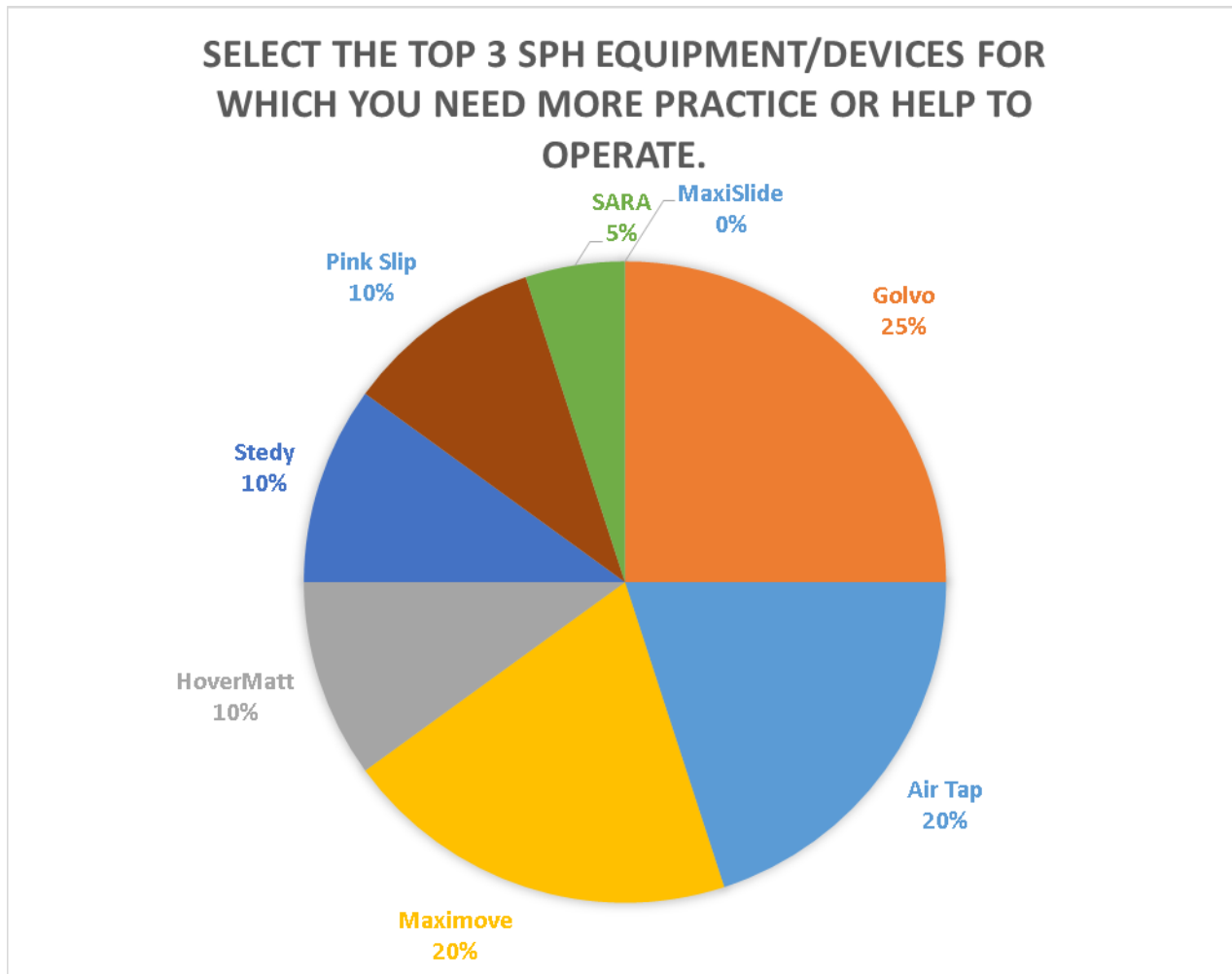
Equipment Frequently Used

Q) In the past year, how often did you use the following products?

Cancer Institute



Equipment/Devices Need More Practice or Help



Situations Where You Could Have Been Better Prepared

In the past year, tell us a situation where you could have been better prepared in terms of patient handling? Describe the key points.

Have maxislide in the unit ahead of time.

N/A

outpatient infusion center does not utilize these

The patient came to the infusion suite in the wheelchair, we did not know the level of the patient's immobility and we did not have a mechanical lift. We had to get one from another unit which delayed patient's treatment. We were prepared for his next treatment having the lift available .

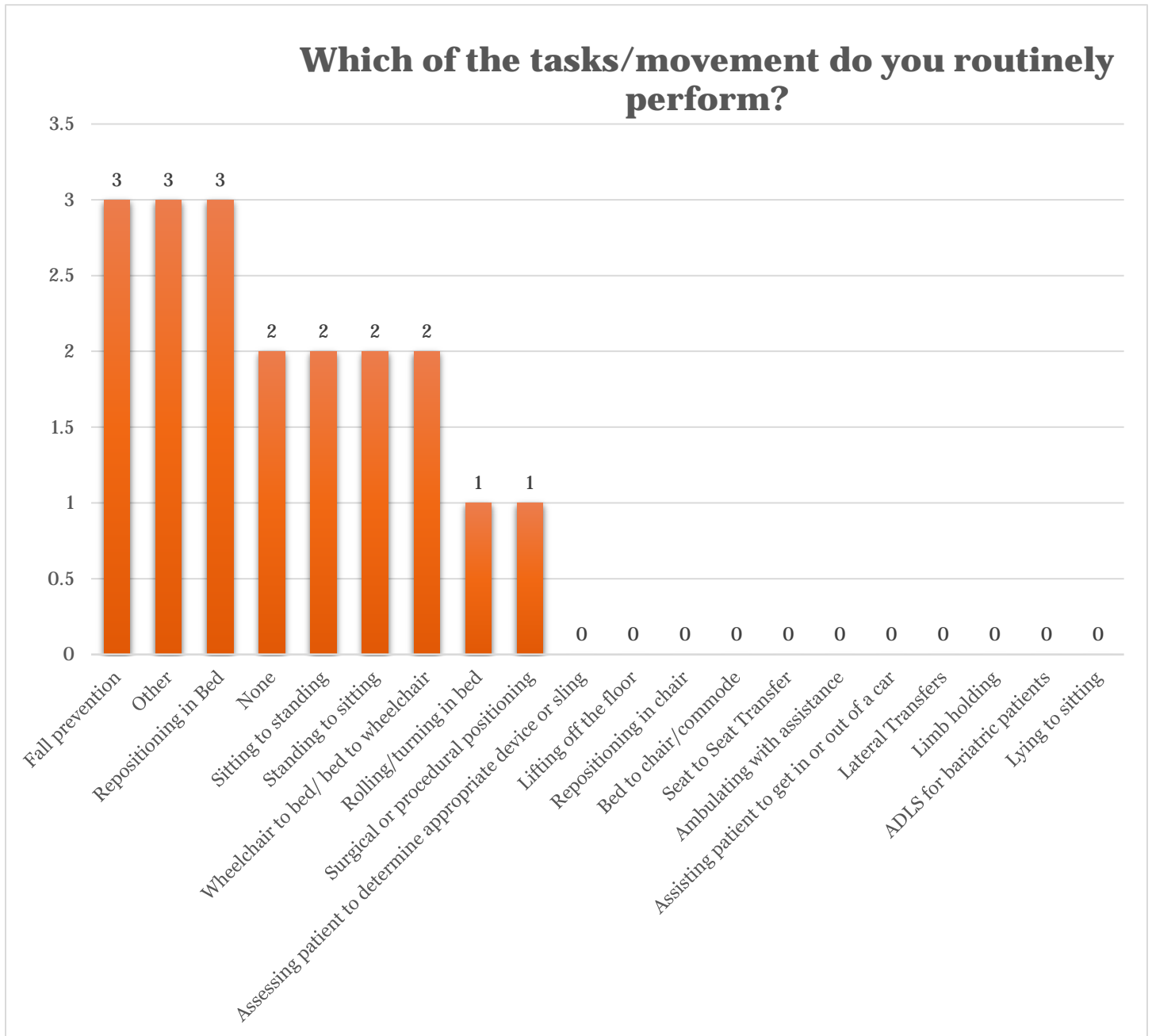
The survey doesn't really apply to the out patient Cancer Center at Phelps

We only use Maximove in the Infusion Center for patient transfer and for taking weight (but rarely because our patients are ambulatory), so far there has not been any issues.

Cardiovascular

Response Count = 9; Response Rate = 69.23%

Tasks Routinely Performed

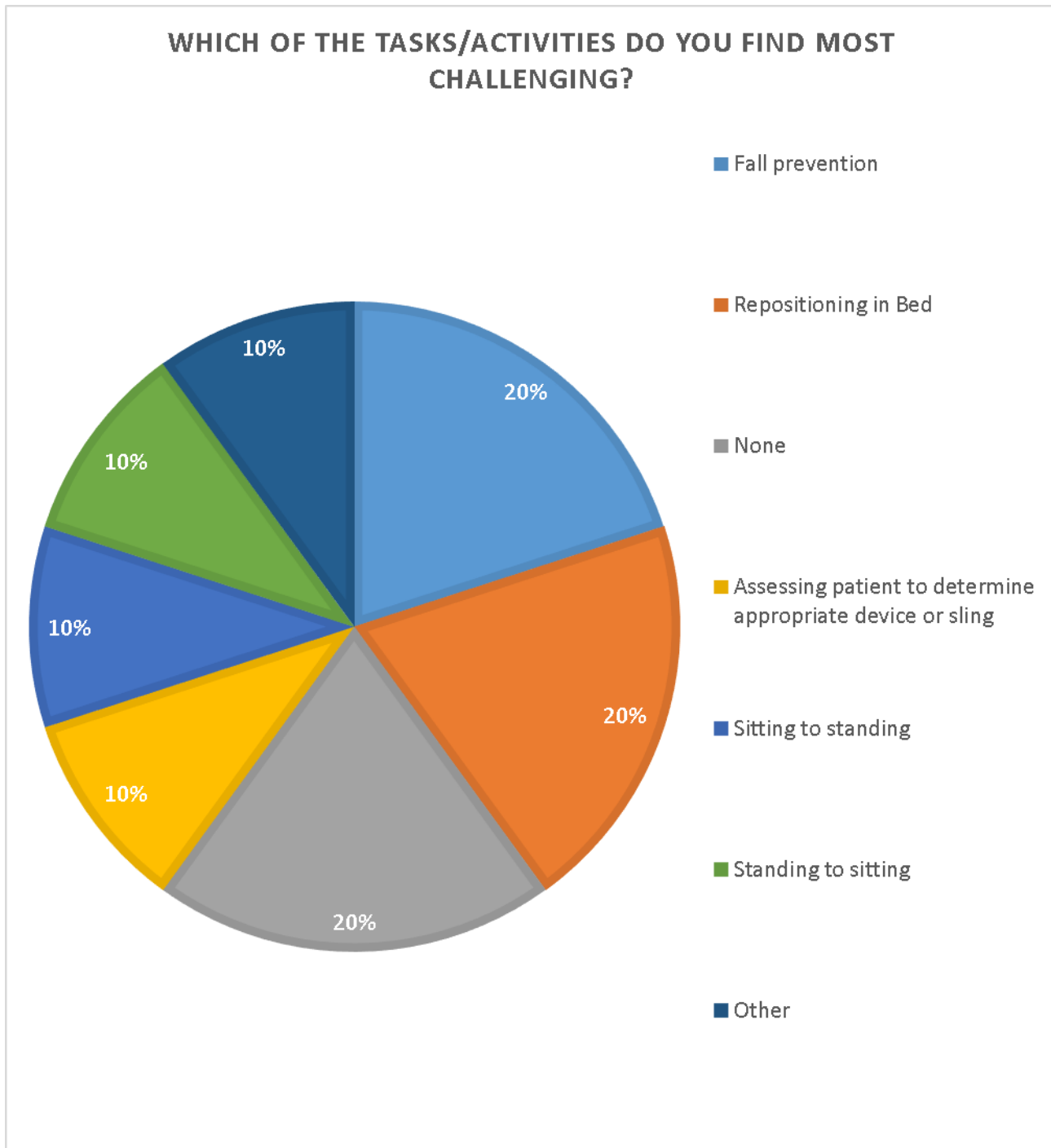


Tasks Routinely Performed - Continued

UNIT	Cardiovascular
ITEM NUMBER	5

Row Labels
Are there other tasks that you routinely perform not listed above?
Greeting Patients... no contact
NO
None
PERFORMING STRESS TEST AND SOME VASCULAR STUDIES
safe use of exercise equipment
WHEEL CHAIR TO CHAIR

Tasks/Activities Most Challenging

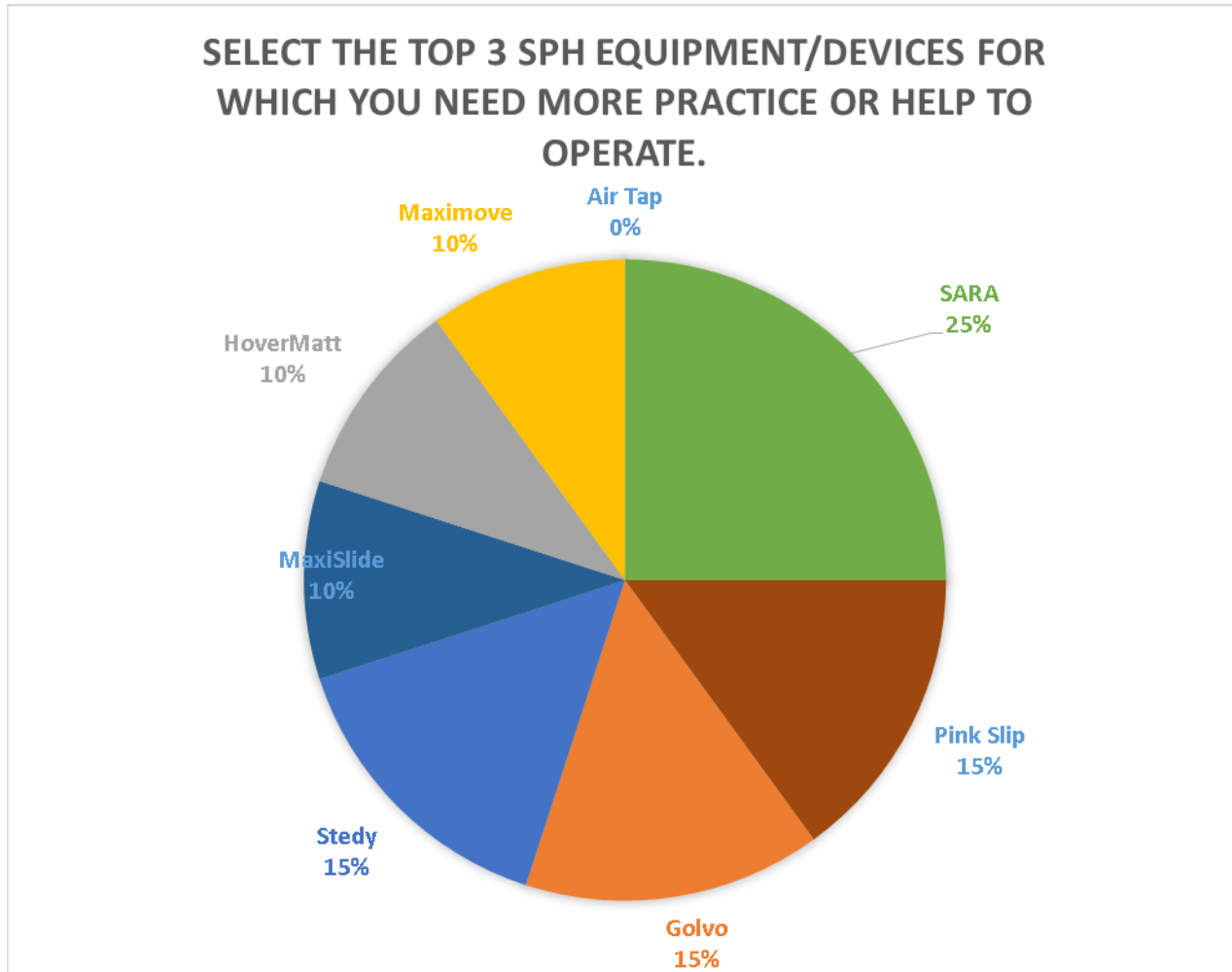


Tasks/Activities Most Challenging - Continued

UNIT	Cardiovascular
ITEM NUMBER	7
Row Labels	
Explain why you find those tasks challenging.	
BECAUSE IT HARD TO GET PT UP WHEN TRYING TO THE TEST,	
I don't have patient contact other than signing consent forms	
na	
Our clients are exercising on equipment and their status change suddenly	
OUR DEPARTMENT DOES NOT HAVE EQUIPMENT FOR PT. TRANSFER	
safety for patient and myself	
sometime I can get them moved up in bed to do eeg.	
THE NEED IS VERY INFREQUENT- ALSO ALL OF OUR IN-PATIENTS COME DOWN BY STRETCHER ONLY.	
When we do echo, we need the patient to be on their left side in order to get good imaging. If they cant be on their side, we have no choice than to do the echo in supine position.	

Equipment Frequently Used - NA

Equipment/Devices Need More Practice or Help Cardiovascular



Situations Where You Could Have Been Better Prepared

In the past year, tell us a situation where you could have been better prepared in terms of patient handling? Describe the key points.

ALL IN-PATIENTS ARE STRETCHER ONLY AND OUT-PATIENTS THAT CAN NOT AMBULATE MAY BE DONE IN THE WHEEL CHAIR.

I am no longer patient handling
my department doesn't really use most of this .

N/A

Our patients usually come in a stretcher, mostly we don't need to do anything besides helping patient to lay on left side. Rarely we have outpatients that come in a wheelchair and need assistance to transfer to stretcher.

PT. ARRIVED LATE FOR A VASCULAR TEST AND WAS UNABLE TO STAND

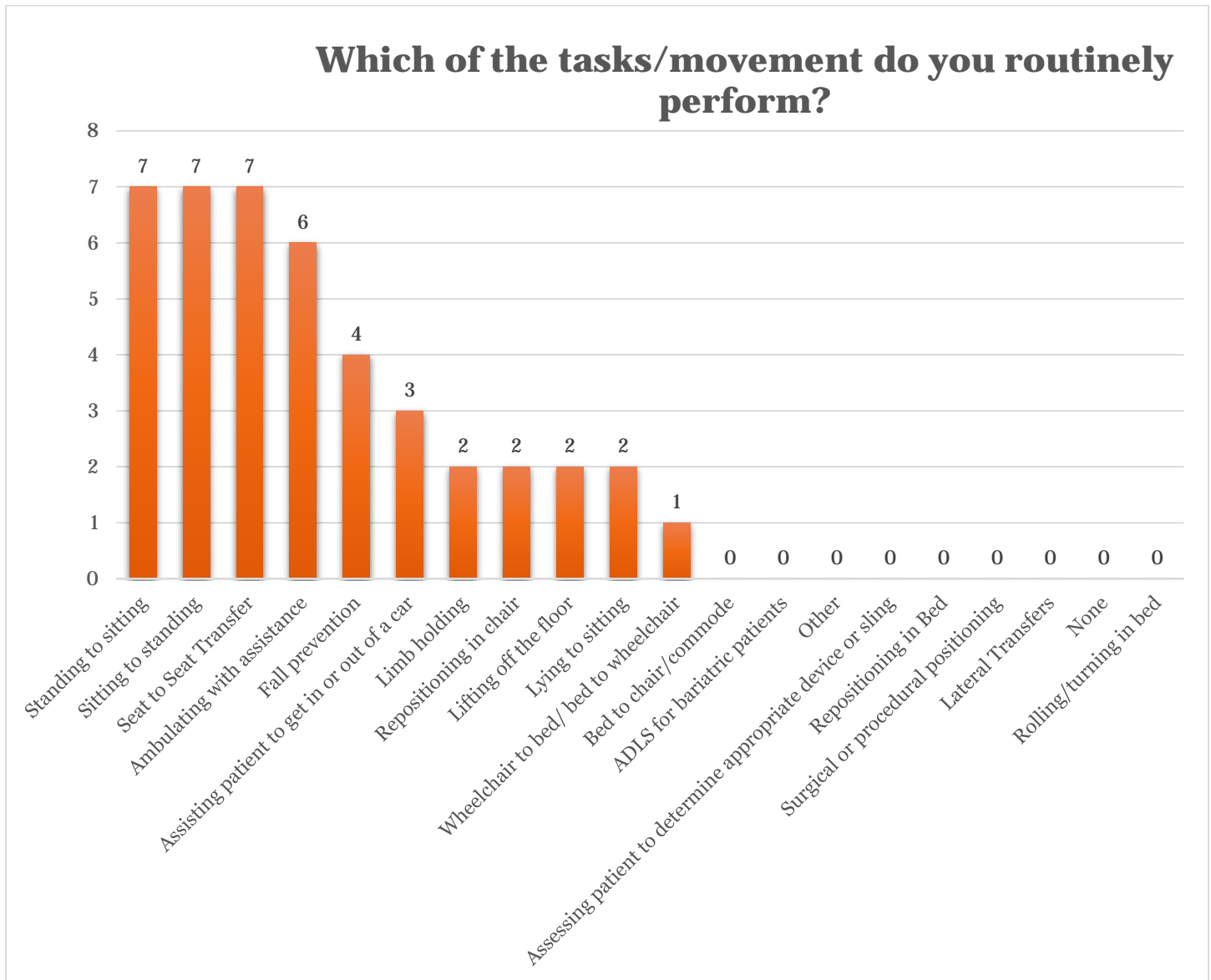
We are out patient services and haven't used any of the sph equipment other than at our yearly inservice.

WE NEVER USE ANY OF THE ABOVE.

HYPERBARIC

Response Count = 8; Response Rate = 72.73%

Tasks Routinely Performed



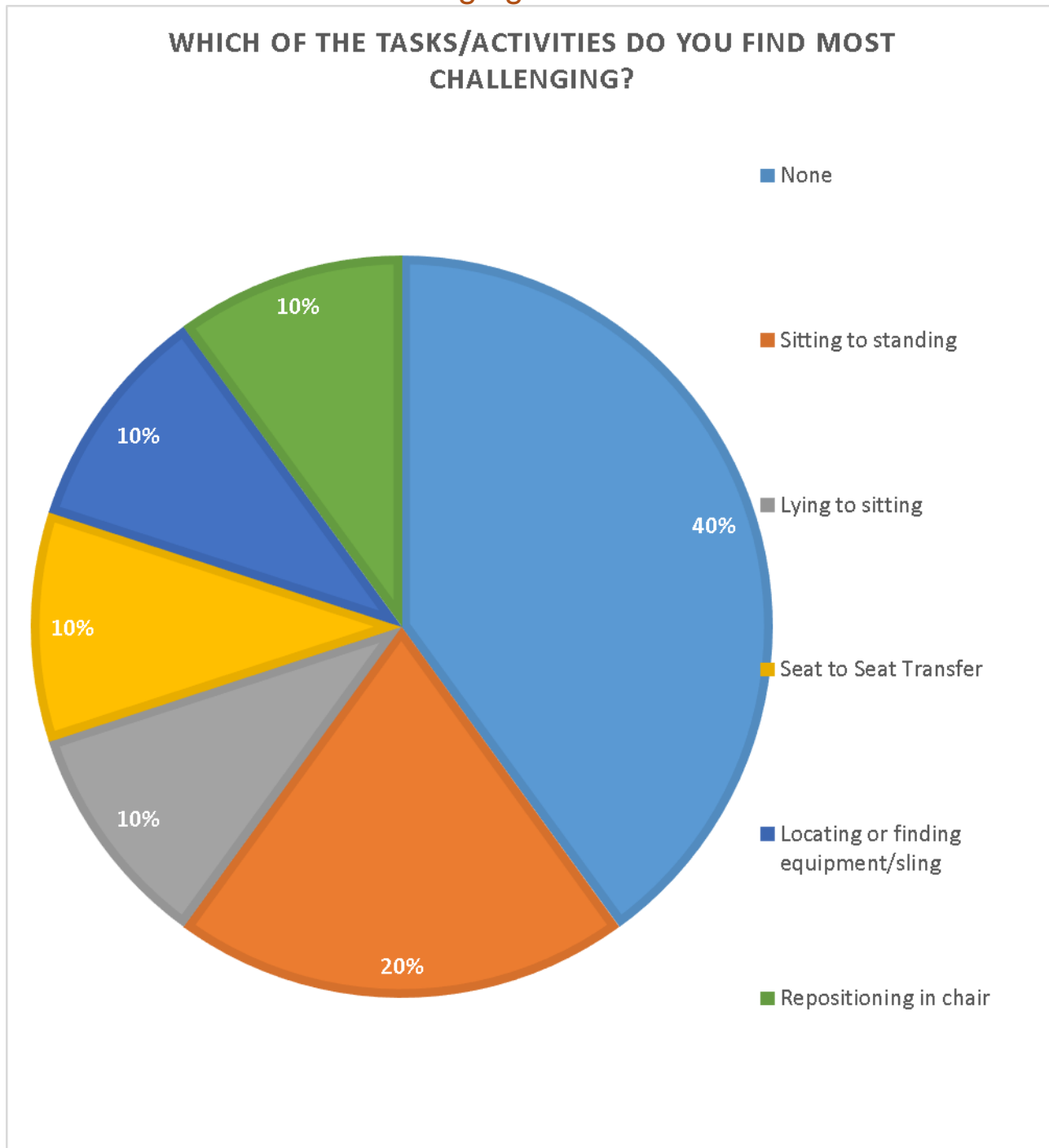
Are there other tasks that you routinely perform not listed above?

contact guarding

N/A

wheelchair to wheelchair

Tasks/Activities Most Challenging



Explain why you find those tasks challenging.

I do not find these tasks challenging.

Limited space in my work area, limiting the amount of help when moving a patient

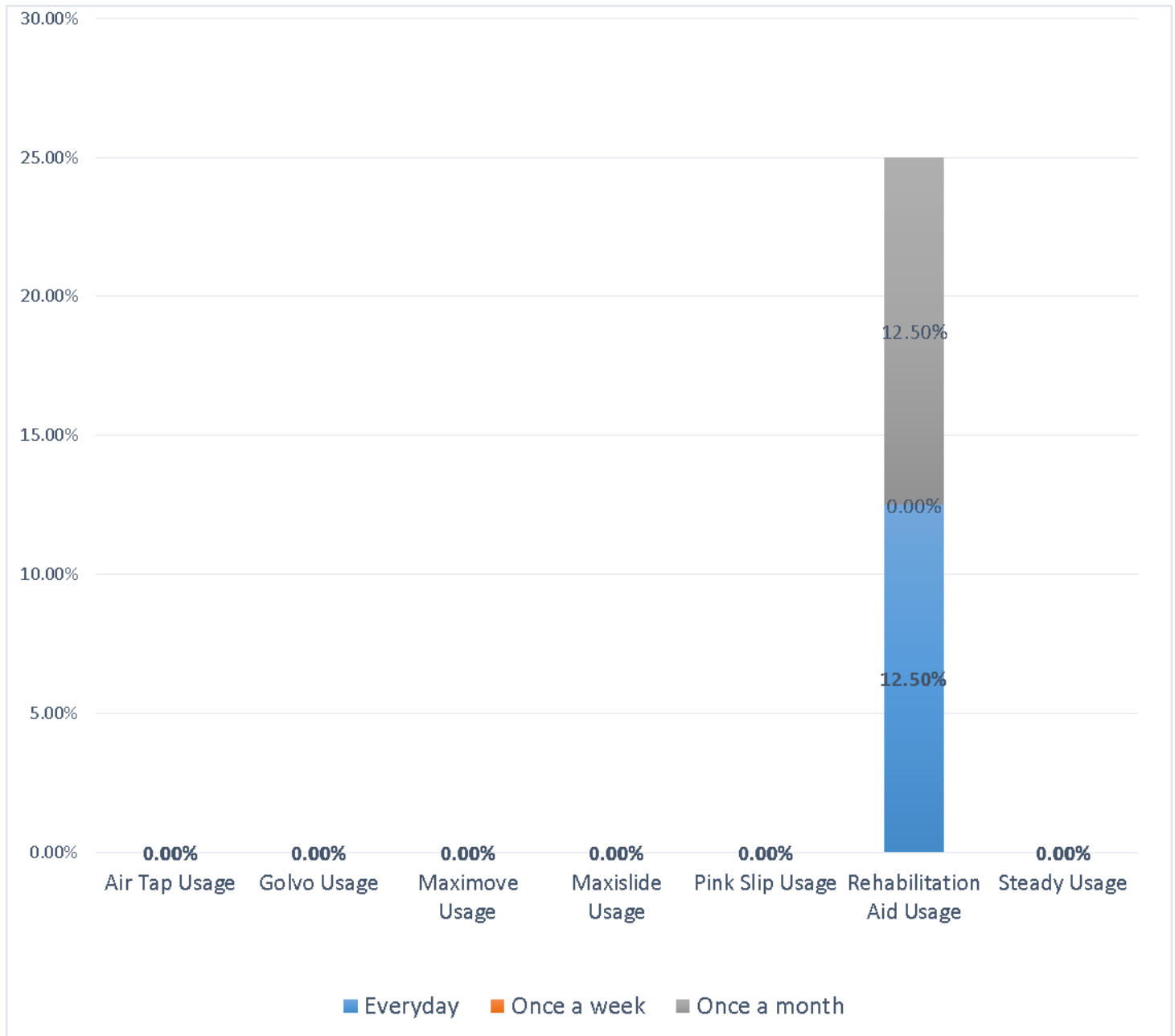
Seat height is low for some patients and they have difficulty standing from a low chair.

Seat to seat transfers are challenging due to the configuration of the hyperbaric chamber chairs.

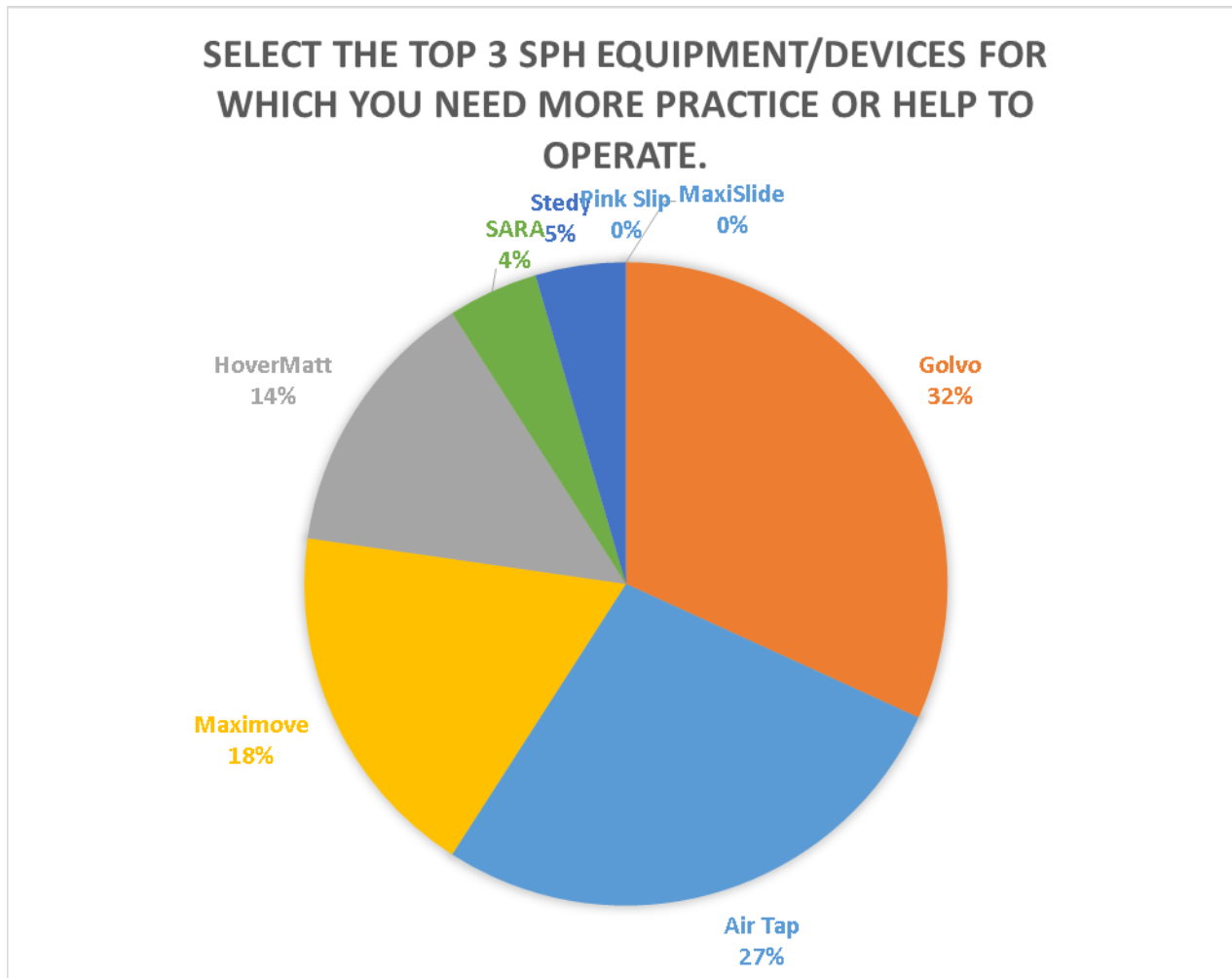
we are in hyperbarics

Equipment Frequently Used

Q) In the past year, how often did you use the following products?



Equipment/Devices Need More Practice or Help



Situations Where You Could Have Been Better Prepared

In the past year, tell us a situation where you could have been better prepared in terms of patient handling? Describe the key points.

Cant recall one.

I can't think of any instance we were ill prepared when it came to patient handling.

Most of our difficult transfers involve obese patients who are unable to assist in transferring from chair to chair while in the hyperbaric chamber. Don't know how we can address this, as we are limited as to what we can use in-chamber.

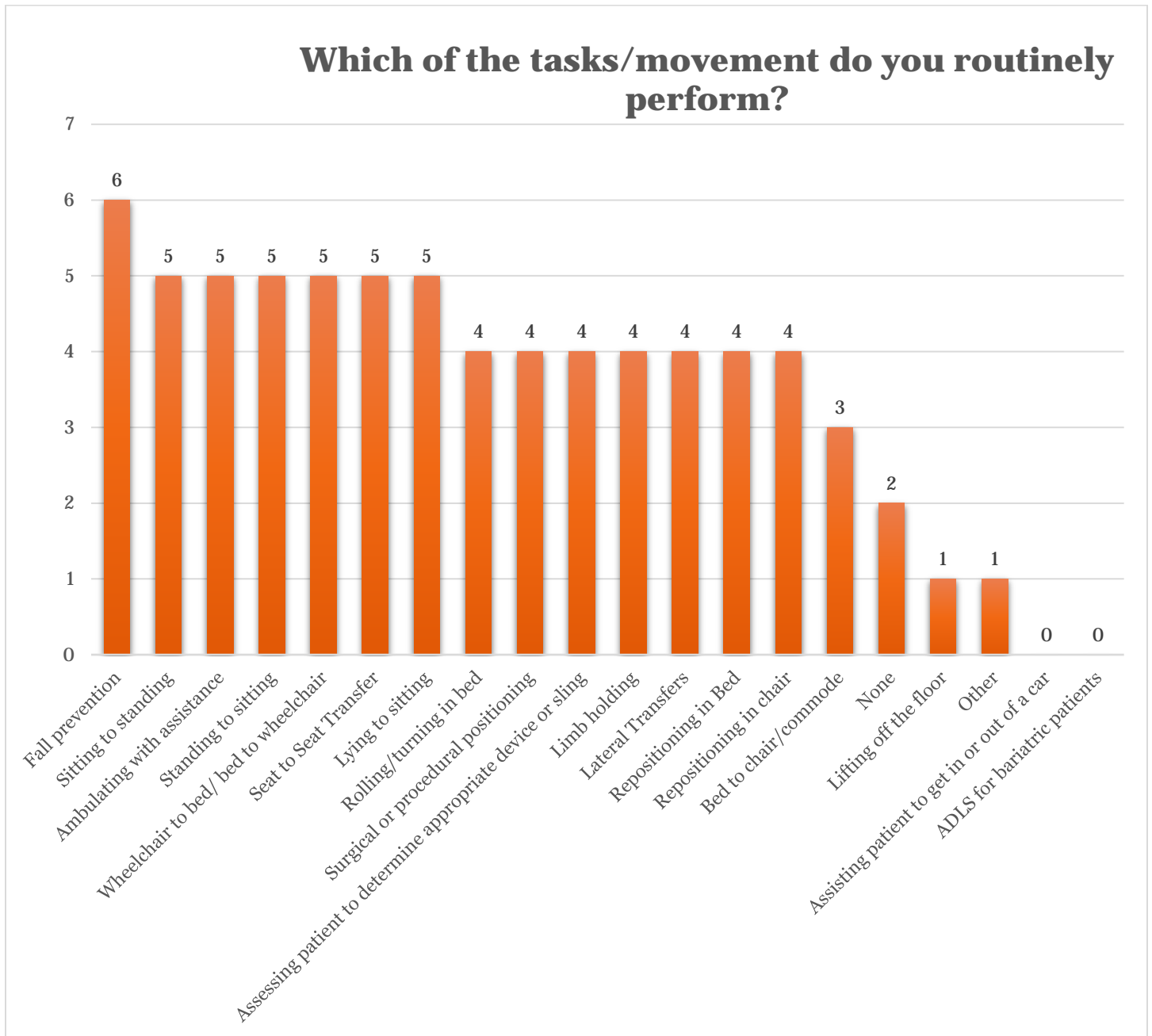
N/A

Our is very safe when it pertains to moving patients. Because we are an outpatient facility most of our patients are ambulatory. SARA works well for our department needs.

WOUND HEALING INSTITUTE

Response Count = 8; Response Rate = 72.73%

Tasks Routinely Performed

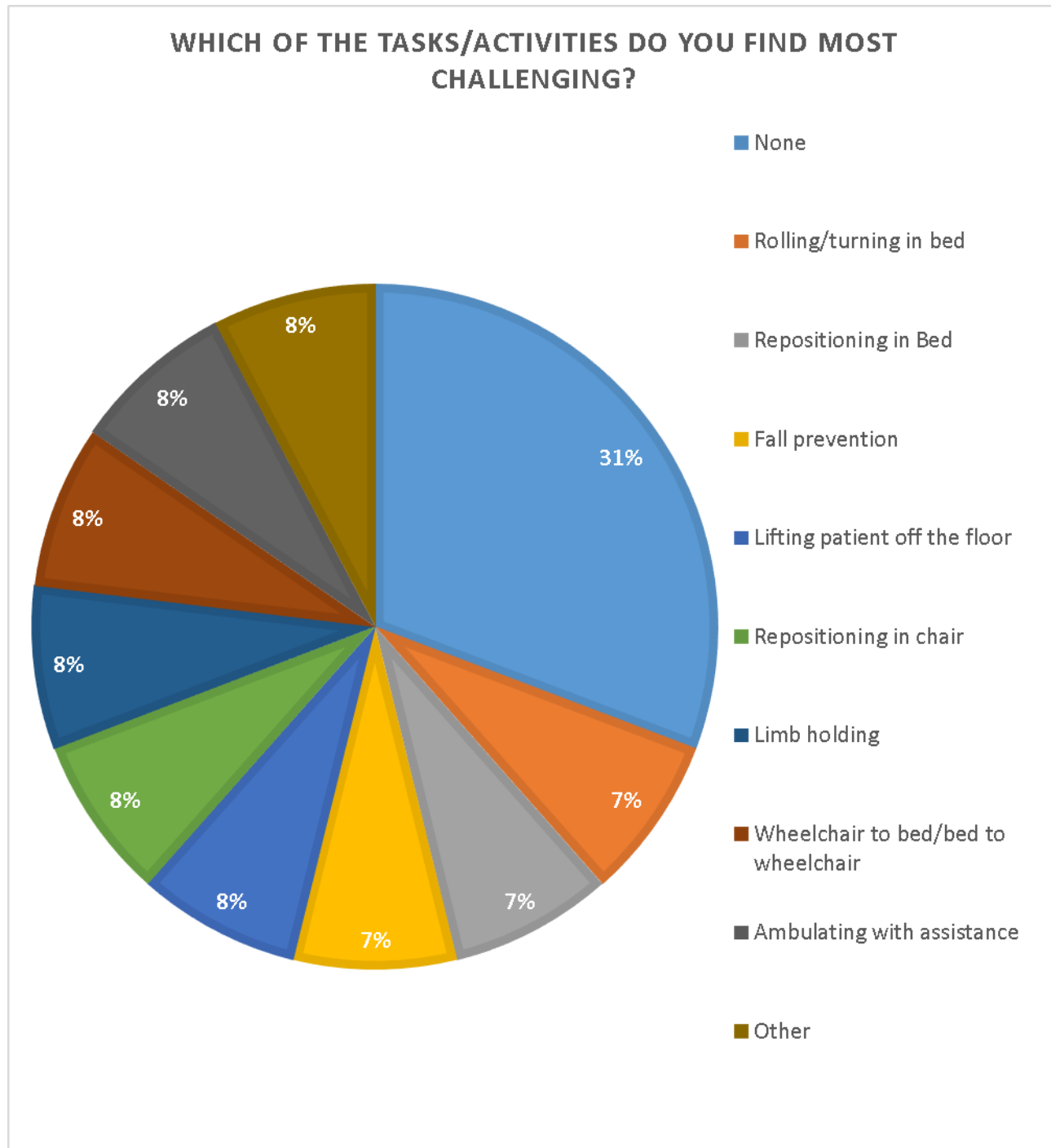


Tasks Routinely Performed - Continued

UNIT	WHI
ITEM NUMBER	5

Row Labels
Are there other tasks that you routinely perform not listed above?
Check in patients, check out patients
NO
non clinical
None
wheelchair to and from toilet transfer
yes. non patient contact

Tasks/Activities Most Challenging



Tasks/Activities Most Challenging - Continued

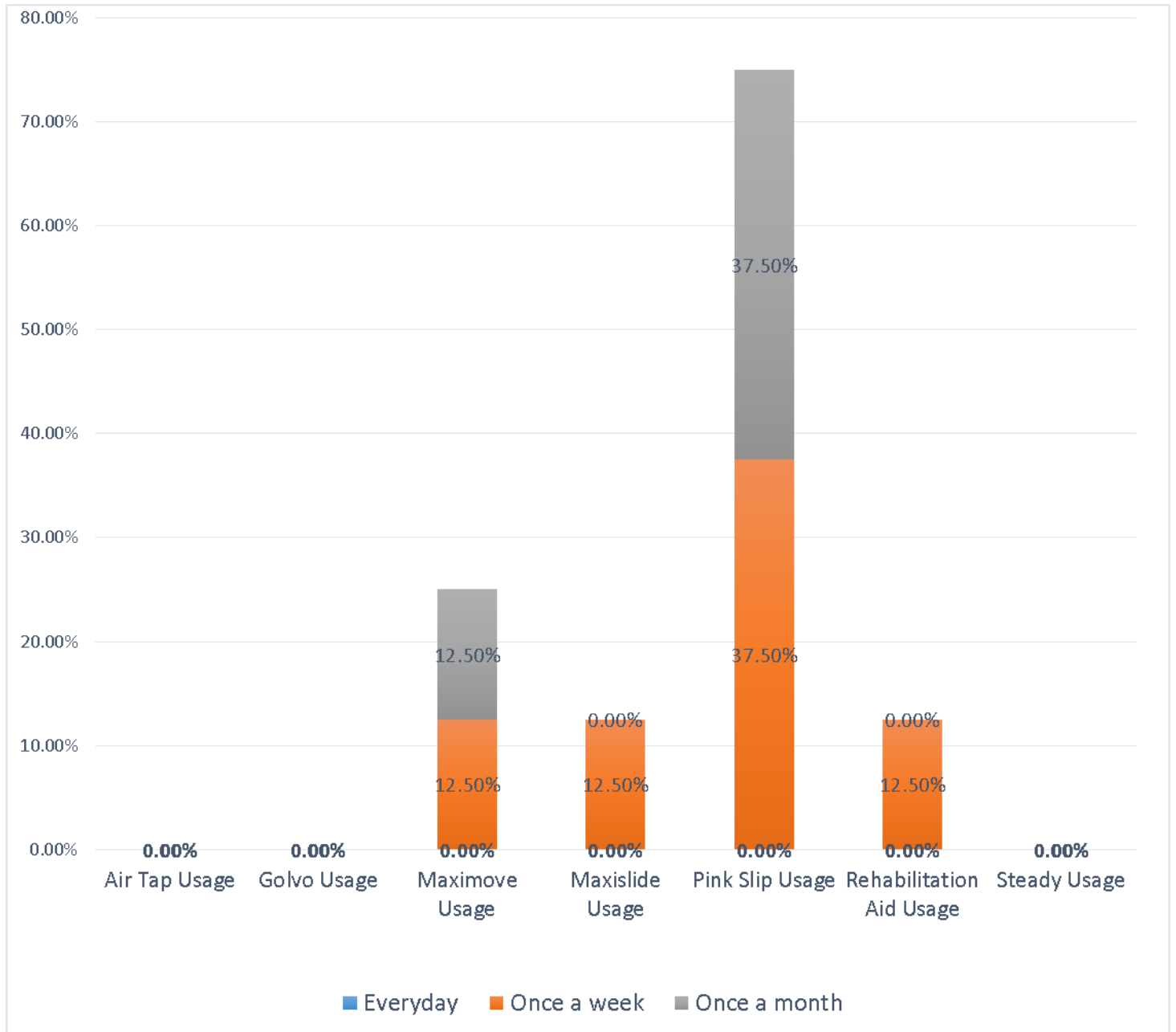
UNIT	WHI
ITEM NUMBER	7

Row Labels
Explain why you find those tasks challenging.
Lifting patient off the floor requires device and at least 2 people (depending on the weight of the patient).
N/A
some patient do not follow safety rules and want to be independent regardless their physical well being
the patients are too large for our stretchers so they have to roll and scoot at the same time.
Time consuming prior wheelchair to and from bed transfer with maxisky. Most of the time, I have to wait for the availability of the other staff to help you.
Weight of the patients is on average 300 pounds , heavy, painful legs.

Equipment Frequently Used

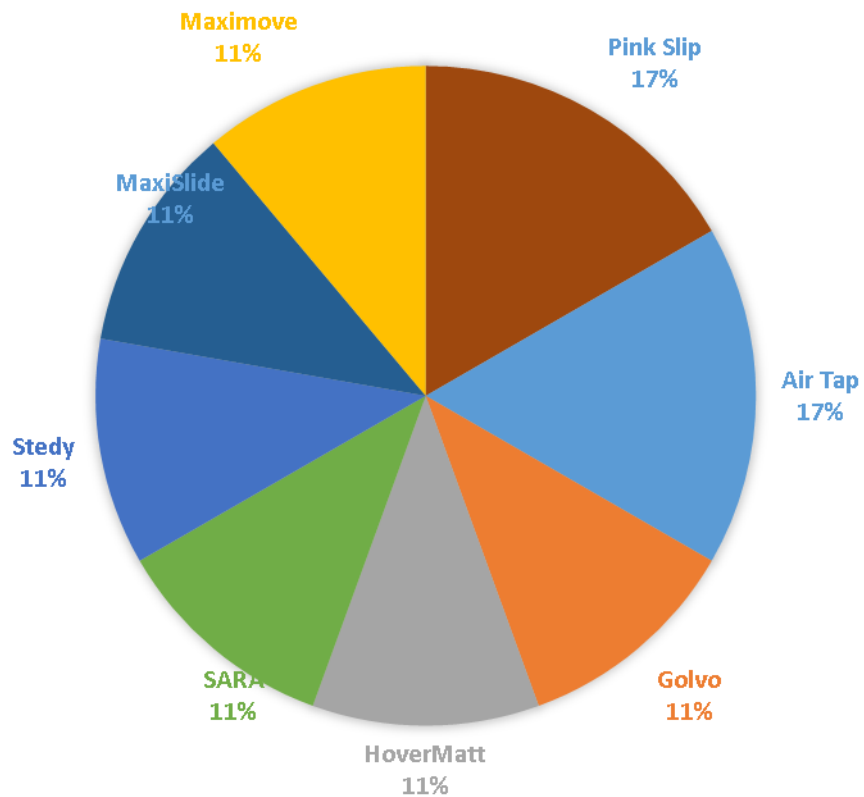
Q) In the past year, how often did you use the following products?

WHI



Equipment/Devices Need More Practice or Help

SELECT THE TOP 3 SPH EQUIPMENT/DEVICES FOR WHICH YOU NEED MORE PRACTICE OR HELP TO OPERATE.



Situations Where You Could Have Been Better Prepared

UNIT

WHI

ITEM NUMBER

17

Row Labels

In the past year, tell us a situation where you could have been better prepared in terms of patient handling? Describe the key points.

N/A

Open communication among staff and patients. Staff constantly communicating and we relayed it to the patients while reassuring them during transfer from wheelchair to and from bed.

so far, I was able to handle all patient handling safely while being prepared all times

this isn't applicable to my job description, and I checked the last question falsely because it won't let me submit if I leave it blank.

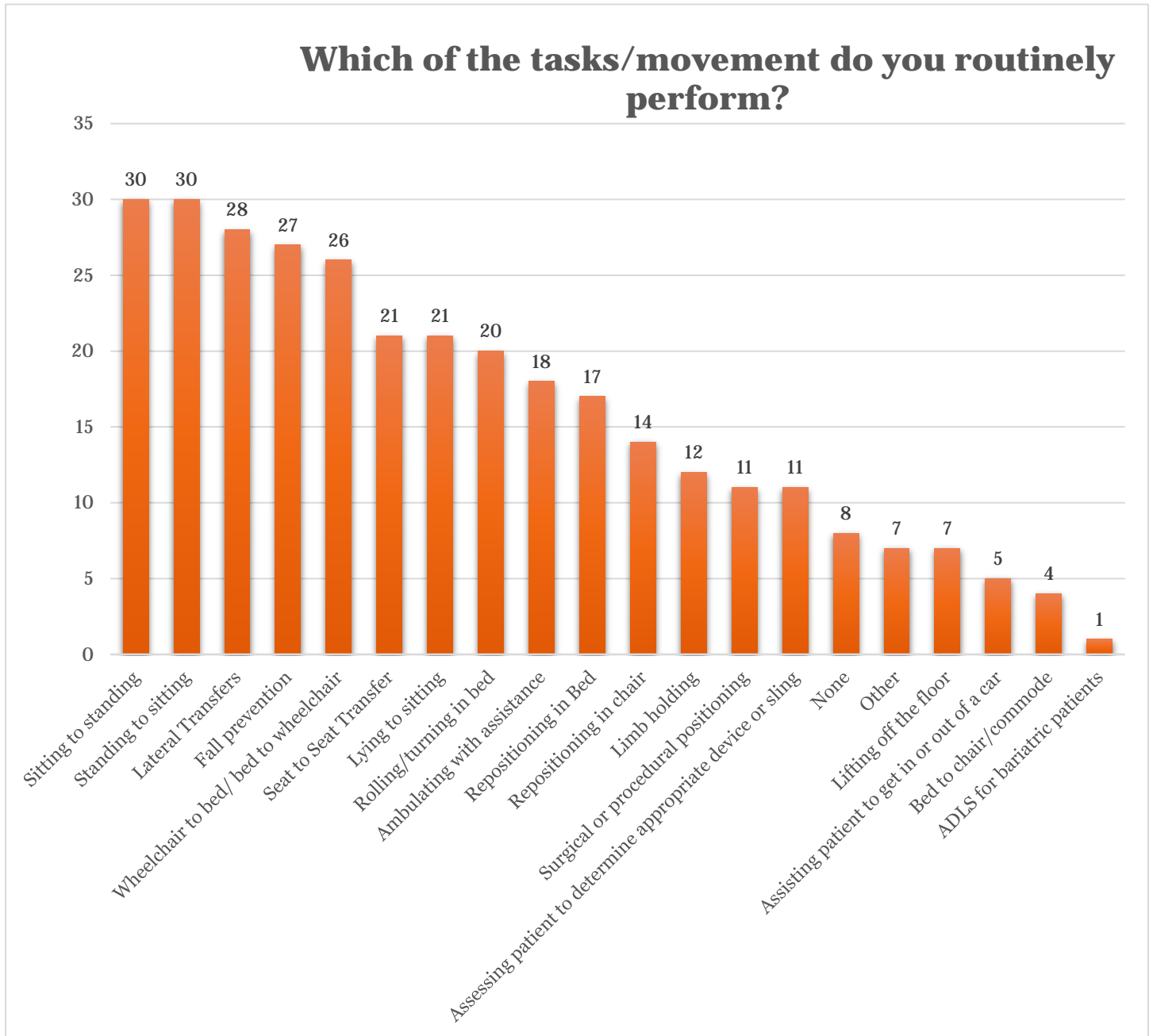
We had one incident in our department where we had a patient who was over 300 lbs that we had to lower on the floor to prevent a fall. Luckily, we were in one of the treatment rooms and we had the maxi slide and able to use it.

We use the maxisky device not listed above.

RADIOLOGY

Response Count = 46; Response Rate = 69.70%

Tasks Routinely Performed

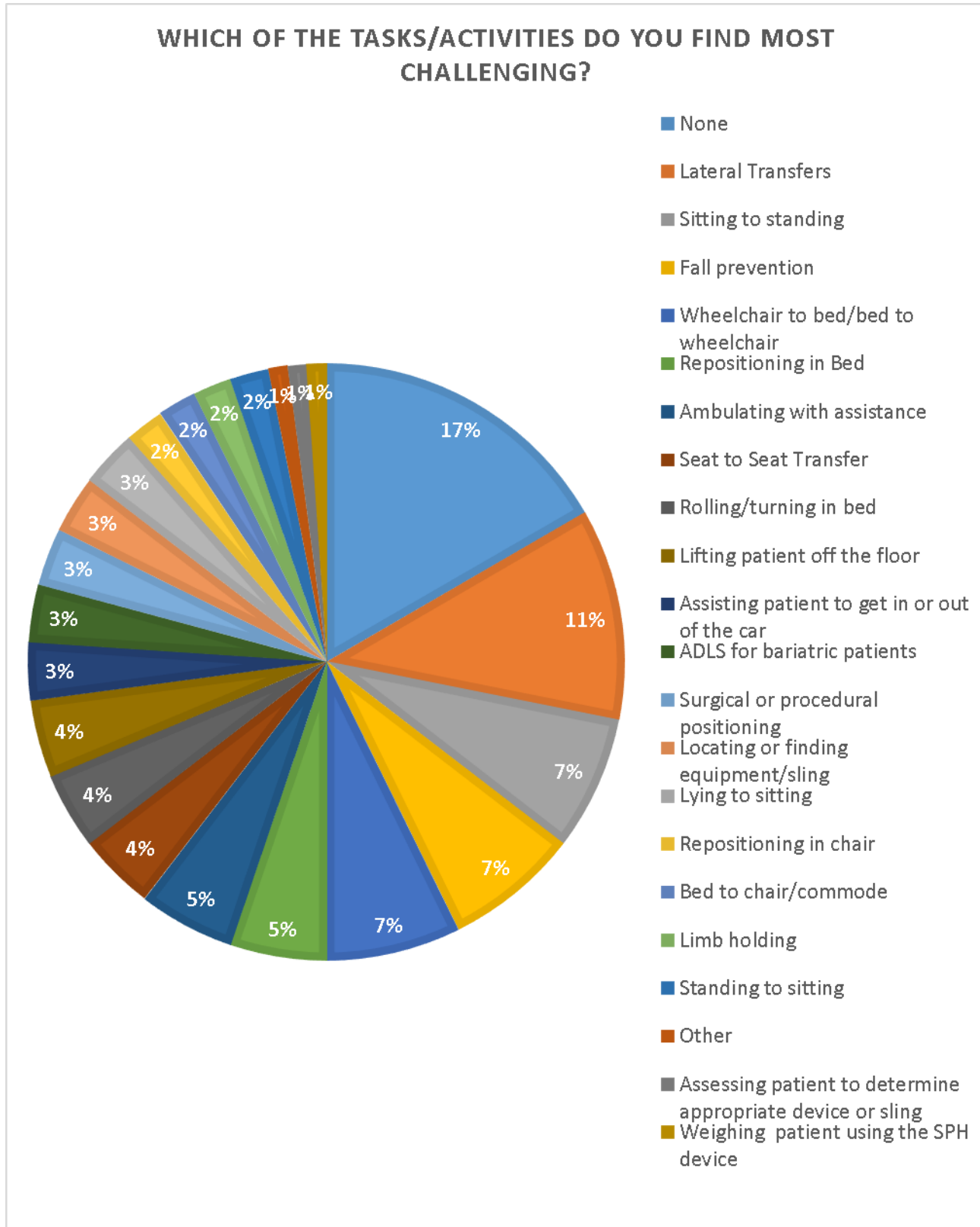


Tasks Routinely Performed - Continued

UNIT	Radiology
ITEM NUMBER	5

Row Labels
Are there other tasks that you routinely perform not listed above?
file room
Giving Breathing Instructions (Xray)
mental counseling
movement from wheelchair to CT table
N/A
NO
NO, THE LIST PRACTICALLY COVERS EVERYTHING
None
nope
Our patient are usually ambulatory.
positioning pts for their xray exams
stretcher to procedure table transfer
Supervisory role
TRANSPORT DIUTY INSTRUMENT BLOOD TO THE LAB
yes

Tasks/Activities Most Challenging



Tasks/Activities Most Challenging - Continued

UNIT	Radiology
ITEM NUMBER	7
Row Labels	
Explain why you find those tasks challenging.	
ambulatory patients	
At times there may not be enough specials or it was not clearly mark or placed in the correct spot.	
bad back	
Because it requires the most participation from the patient	
depending on the patient weight, it would be difficult for myself to help patient off the floor.	
DEPENDING ON THE PATIENTS SIZE IT CAN BE A STRUGGLE TO MOVE THEM	
due to risk of fall	
Every patient has different needs when dealing with fall prevention.	
Helping patients out of a wheelchair or chair who are ambulatory with assistance is the most challenging because if the patient doesn't bear enough weight, then it is on the person assisting them.	
I DO NOT FIND ANY TASKS CHALLENGING WITH PROPER EQUIPMENT AND STAFF	
i don't do any of the above	
I don't find them challenging. We have the resources available, if we needed to move a patient.	
I DONT HAVE THE STRENGTH I USED TO. I NEED MORE ASSISTANCE	
I work with out patients and do not have to perform these tasks, since the patients are ambulatory.	
if a patient is too heavy for me or calling to get equipment	
im petite	
lifting device don't work well with our MRI scanning table	
more chance for falling	
MOST OF THE LIFTING EQUIPMENT DOESN'T WORK WELL IN MRI	
N/A	
NO MAJOR CHALLENGE. WE HAVE SPECIAL EQUIPMENT TO ASSIST WITH PATIENT POSITIONING AND STAFF AVAILABLE FOR ASSISTANCE	
None	
not enough staff around at the time of transfer. Need to get lifting help from other radiology depts.	
patient can be difficult to move.	
Patients have limited movement, have injuries, in pain	
physical demand despite assisting devises. In general are related to patient's weight and body size	
pt.s can't always help sit themselves up in bed for a CXR portable	
Radiology IT no patient contact	
some people are very heavy	
sometimes due to patient body habitus it can become challenging to move them if you are alone	

sometimes patient comes down to our department in a wheelchair and cannot stand or put pressure on their feet and they are expected to get up on our stretchers. Patients get scared that they are going to fall. Sometimes you have to have them brought back upstairs and put on a stretcher to come down. That makes it very difficult for the patient with the constant back and forth

Sometimes the patient isn't able to stand

Sometimes when I work overnight shifts, I do not have any help so I have to try moving the patient from the bed to the ct/xray table by myself so it can be challenging.

they are taxing on the back

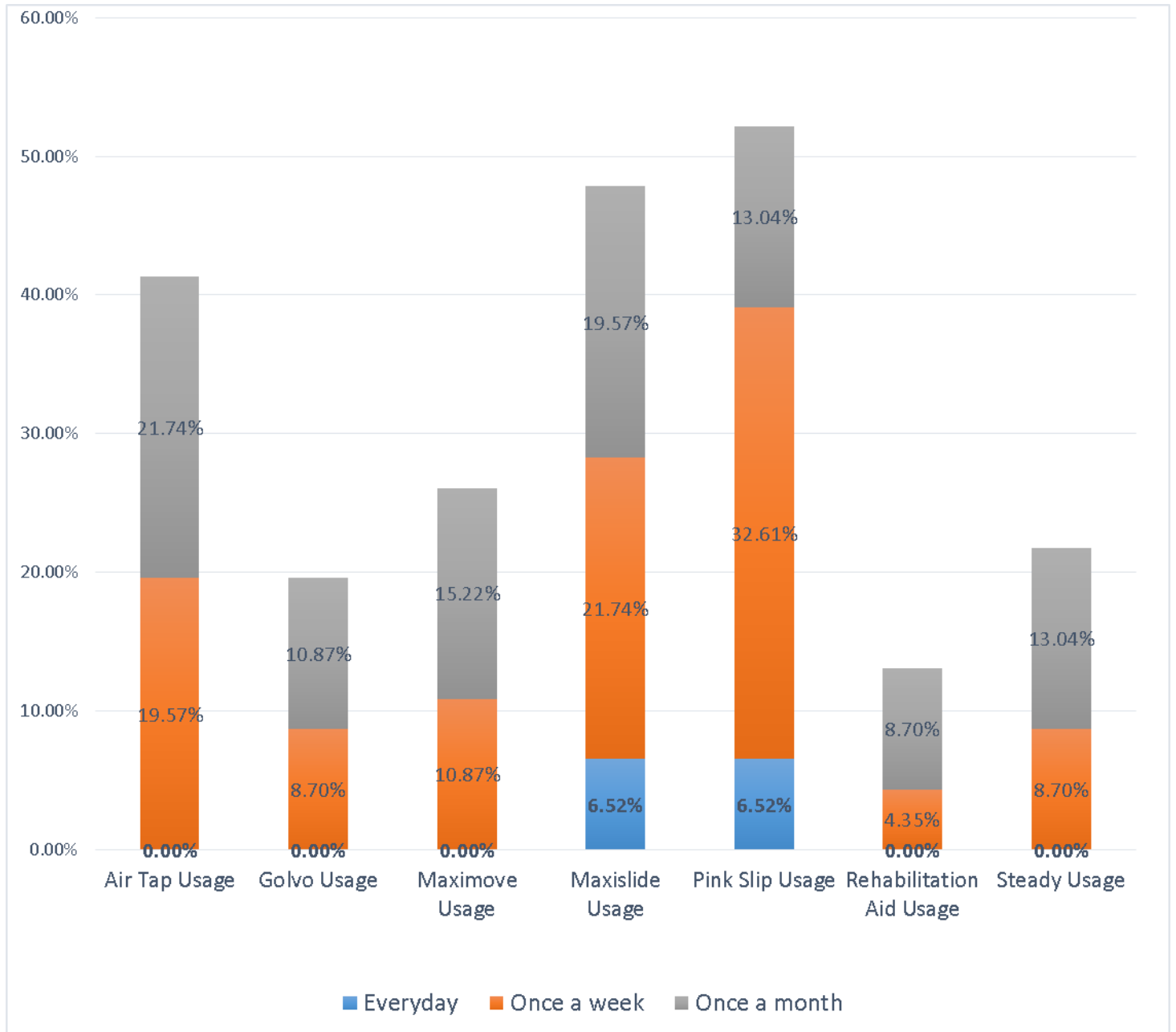
to prevent the patients not to get more injuries

WORK TOGETHERS

Equipment Frequently Used

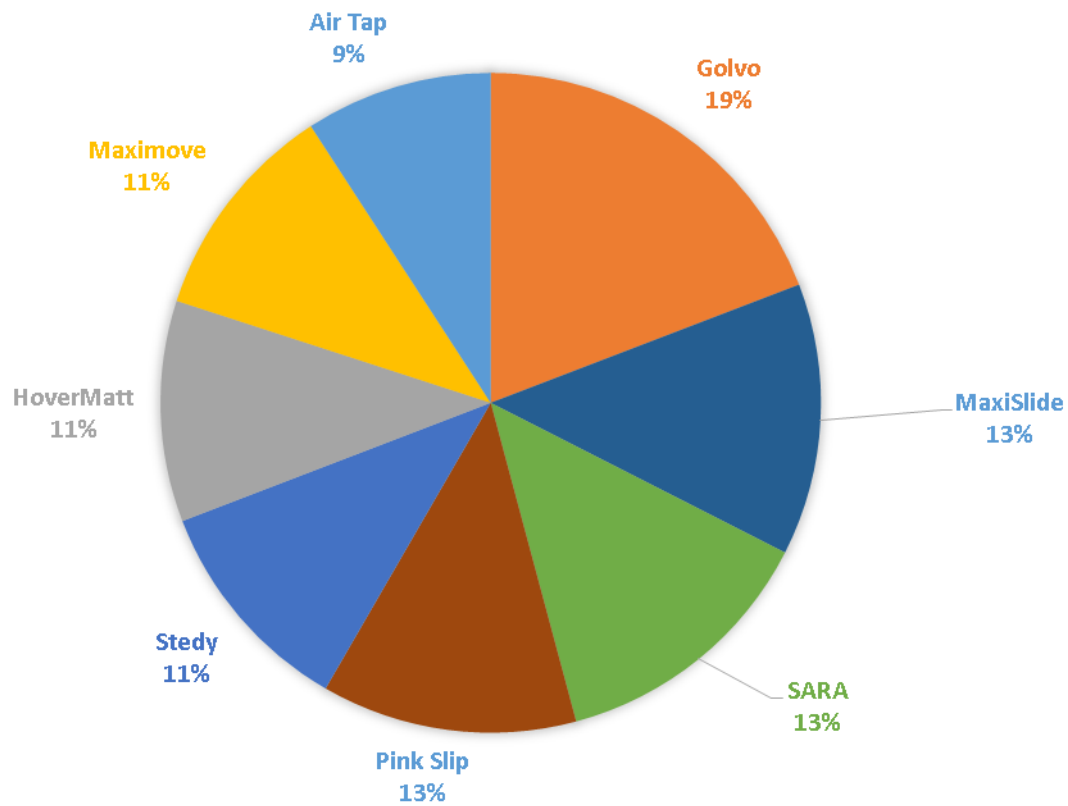
Q) In the past year, how often did you use the following products?

Radiology



Equipment/Devices Need More Practice or Help

SELECT THE TOP 3 SPH EQUIPMENT/DEVICES FOR WHICH YOU NEED MORE PRACTICE OR HELP TO OPERATE.



Situations Where You Could Have Been Better Prepared

UNIT

Radiology

ITEM NUMBER

17

Row Labels
In the past year, tell us a situation where you could have been better prepared in terms of patient handling? Describe the key points.
99% OF THE TIME WE USE SOME KIND OF DEVICE TO ASSIST WITH PT. TRANSFER AND STAFF ASSISTANCE
a patient collapsed on the floor in the MRI room, it was very hard to get the patient on the stretcher.
by using patient handling equipment more often
Could have had the patient decide how it was best to help them due to their mobility
EXPLAIN TO THE PACIENT
I always make sure I am prepared
I did not have it
I do not deal with patient
I do not perform patient handling
I don't often deal with much patient handling because patients who are often high risk for falling are brought to the radiology department in stretchers.
I feel like I am always prepared
I work in outpatient primarily - have ambulatory patients
i would like to keep some maxi slides in our department in case we need to help move a patient
I'm always prepared to handle patients for moving. Most of the time we have to send for the proper equipment, golvo, sara, and other pt moving devices are not stored in our dept. so we have to send for the proper equipment, from another dept.. This slows down our patient turn over times.
In mammography we don't routinely need to use any of the above equipment because 99% of our patients come in walking. Sometimes we have a wheelchair patient and may need to transfer them to a higher chair, but usually we have 2 techs for the move and the patient can stand and pivot.
instruments clean, supplies stacking, interventional specimens, landauer films badges reports, file room clerk.
I've had situations where I transfer patients by myself, I think I should wait for help so it is safe for me and my patients.
lifting device don't work well with our MRI scanning table, slides works best
most patients are ambulatory
N/A
n/a, I am not direct patient care.
None
not applicable
Not readily available in CT.
not sure how to prepare for it but I came across a pt. in a wheelchair who was overweight and sliding out of his chair.

Once in a while a patient will come down to our department in a wheelchair and cannot stand to get up on our stretcher. Patients should be assessed by nurse and transporter prior to them coming down to our department to make sure they can ambulate to our stretcher otherwise they need to be brought down on a stretcher so we don't have to move the patient

our IR table is higher than the GOLVO goes up, its not conducive to us preserving our spines since we have to drag a suspended patient 'UPWARD" onto our table

Practitioners often fail to assess patient's as a "fall risk" upon arrival to ED and/or outpatients come in as fall risks in wheelchairs and transferring is very challenging.

The past year - I have had no problems with patient handling.

TRANSFERING A PATIENT FROM A WHEELCHAIR ONTO THE INTERVENTION RADIOLOGY TABLE WAS DIFFICULT. USING THE MAXIMOVE MADE IT EASIER BUT STILL THE PATIENT HAD HEAVY LEGS AND TORSO MAKING IT DIFFICULT TO LIFT THEM. WITH THE ASSISTANCE FROM 2 OTHER STAFF MEMBERS WE WERE SUCCESSFUL

Transferring of a patient from wheelchair to a Speech pathologist Chair could be explained better.

unable to recall a situation

was moving a pt the other day and did not bend at my knees properly

WE HAD A BARIATRIC PATIENT THAT NEEDED SCANS BUT WAS TOO HEAVY FOR A SLIDING BOARD OR PINK SLIP. THE PATIENT WAS NOT PLACED ON A HOVERMAT WHEN THEY CAME INTO THE ER AND THAT DELAYED THE SCAN BECAUSE ONE HAD TO BE LOCATED AND THEN PLACED UNDER THE PATIENT BEFORE THEY COULD BE BROUGHT TO CT

When outpatients who are unable to move or need an Golvo for assistance, I think it should be communicated that they pad underneath prior to coming in. It causes a lot of stress on the patient when we have to get the pad underneath by the staff causing them to feel unsafe.

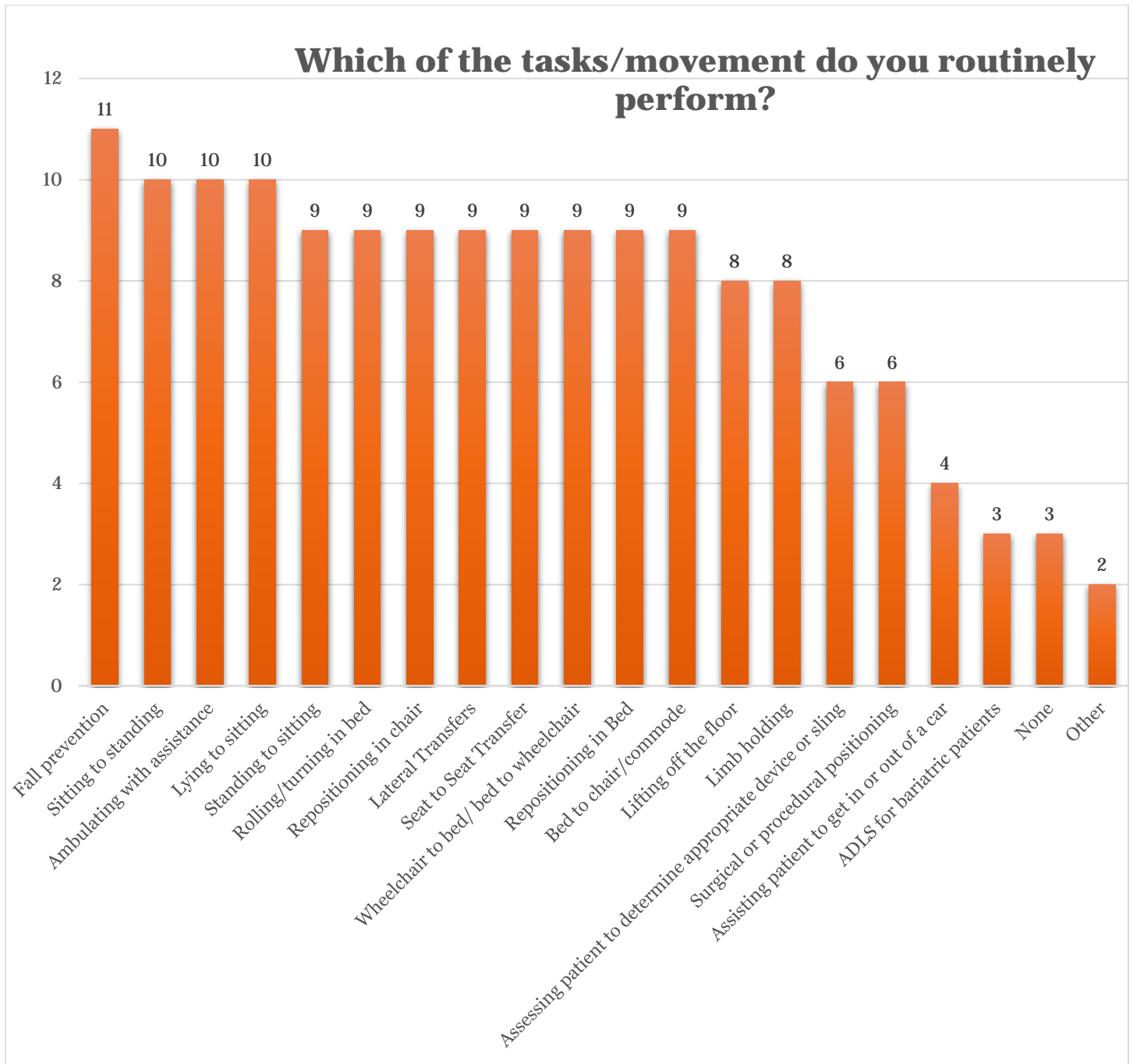
WITH PROPER STAFFING NO ISSUES

All the time doing my tasks
Being trained on patient handling
cant think of any
Communication with staff on who, what, where, and why
Coordinating meal, and medication times for Potential coronavirus patients.
Corona Virus
do not do those tasks
Having a person operate elevator and helping carry out patient items when I was on a shift in the transport department.
I assist if no one available and it is a minor move
I have had never training in the past but I will like to learn.
I learned to always make sure that a patient's bed is in the max inflate mode before doing a lateral transfer with a pink slip. Before , I didn't take notice to it which then made the transfer much harder on the team.
I'm always prepared.
making sure all equipment is ready to help the patient . making sure we have the people power to move patients onto stretchers.
N/A
These tasks are not in my responsibilities
transferred a patient from a bed to a stretcher. there was not enough staff helping move the patient.
Transporting a patient on wheelchair who was overweight and obese. Had difficulty pushing and maneuvering the wheelchair.
Ultimately, I have felt prepared for my daily tasks, however, there have been rapid response scenarios I have been a part of that, objectively speaking, I felt that pre-assigned roles within the transport team would've made things much easier.
unknown

Nursing Leadership

Response Count = 17; Response Rate = 68%

Tasks Routinely Performed

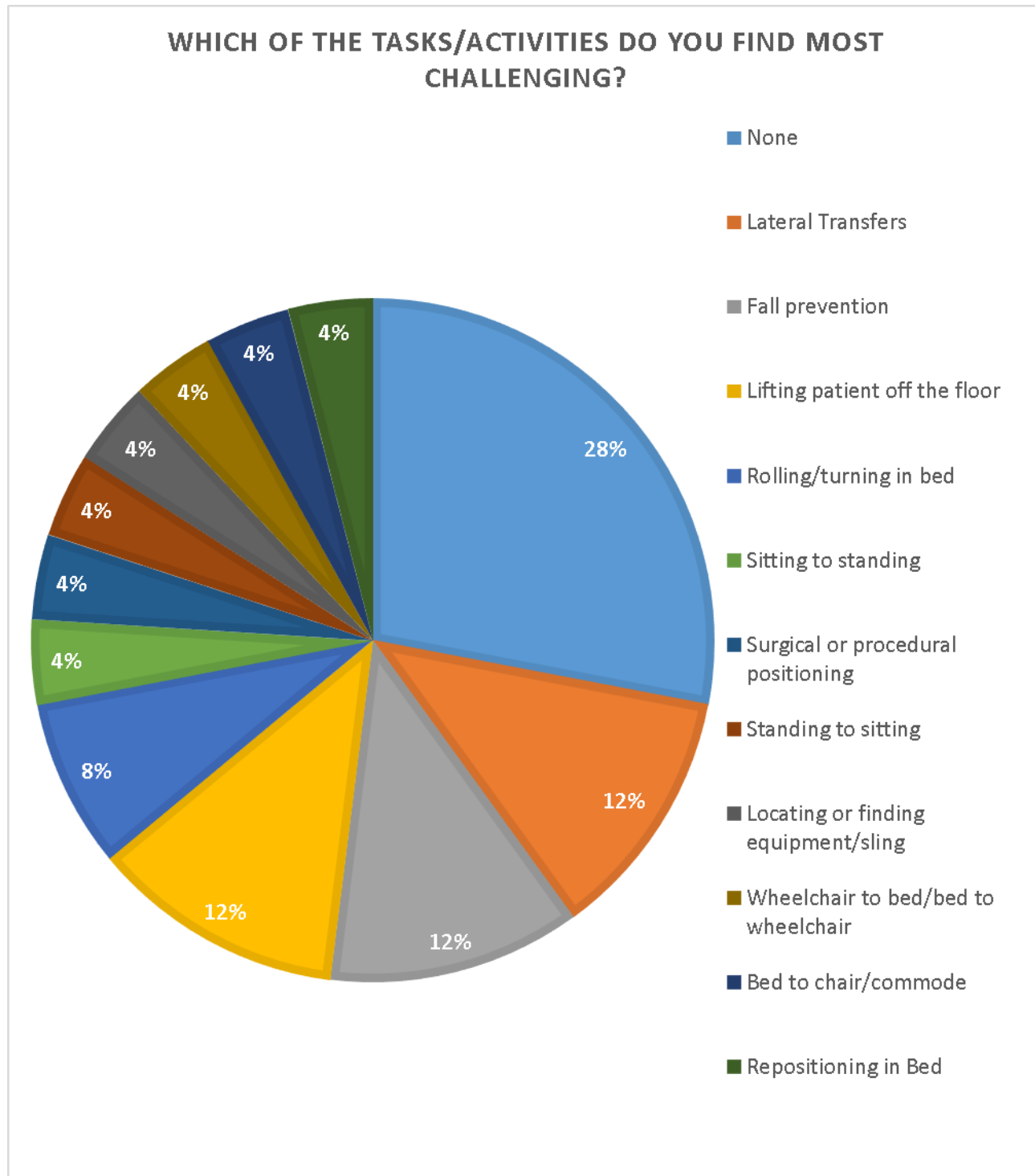


Tasks Routinely Performed - Continued

UNIT	Leadership
ITEM NUMBER	5

Row Labels
Are there other tasks that you routinely perform not listed above?
Admiistrative
assessing under devices
changing in bed
Feeding, Bladder scanning, Checking surgar level in the blood (acu chek), EKG , Range of motion exercises.
Full care of patients
N/A
NO
None
Occasionally push patient in stretcher from ER to an in patient unit
Positioning patients with the use of an air tap.
Rapid response to patient falls
Transferring from stretcher to OR bed

Tasks/Activities Most Challenging



Tasks/Activities Most Challenging - Continued

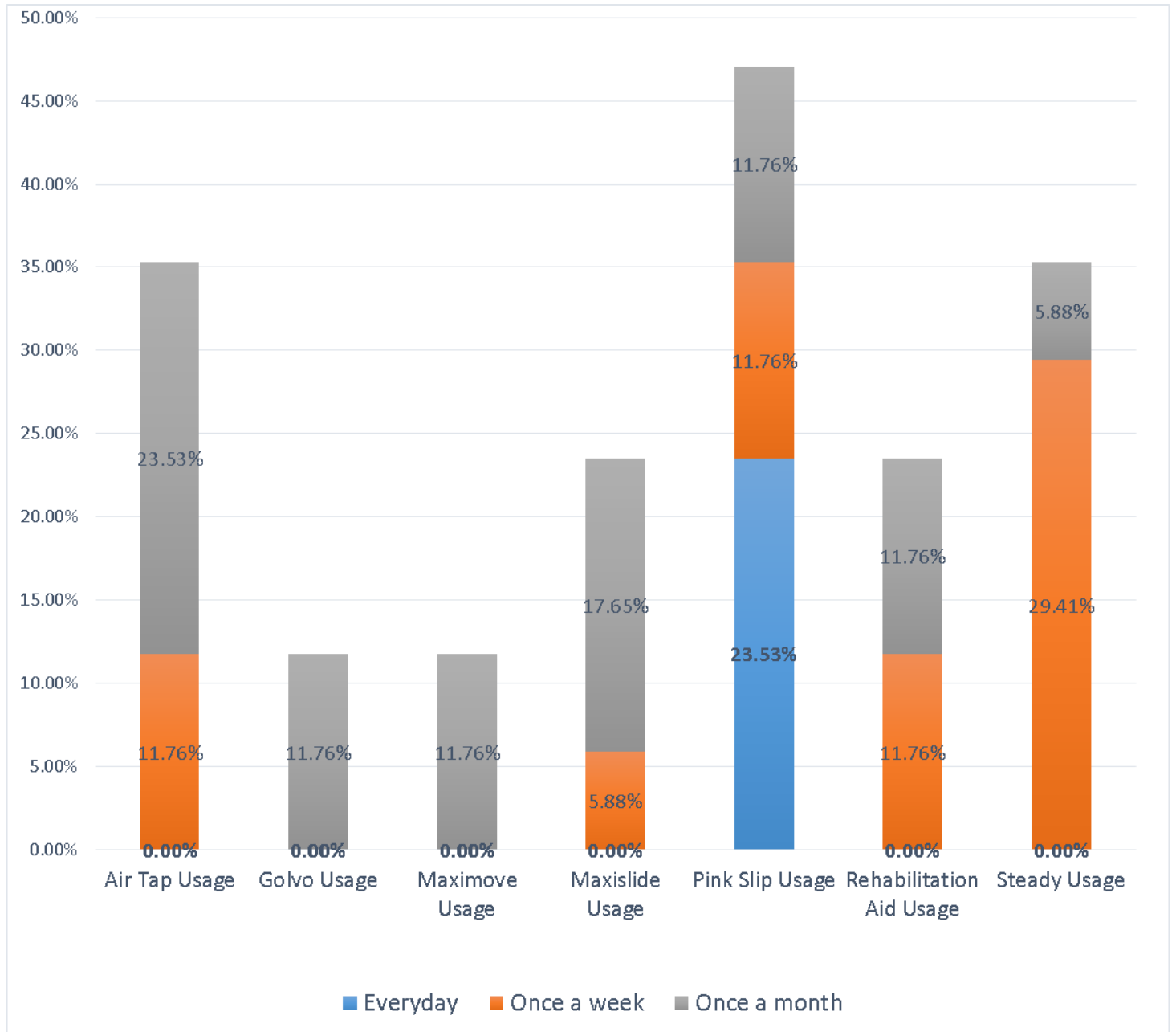
UNIT	Leadership
ITEM NUMBER	7

Row Labels
Explain why you find those tasks challenging.
Appears to be lack of accountability
Can easily hurt back
did not use any equipment
difficult to move
Equipment is not always available and/or can be found.
For surgical or procedural positioning, I have not been introduced to that yet.
I do not use these equipment
I find in the mist of a lateral transfer that I wish we ad used a pink slip.
N/A
None
Not challenging, just part of my work day
Patients can often be really heavy when trying to position them
Requires assessment of patient while on floor before moving to a chair, bed or stretcher. Sometimes the assessment has not been completed before the patient is moved.
These tasks become difficult if the patient does not follow directives or has some dementia.

Equipment Frequently Used

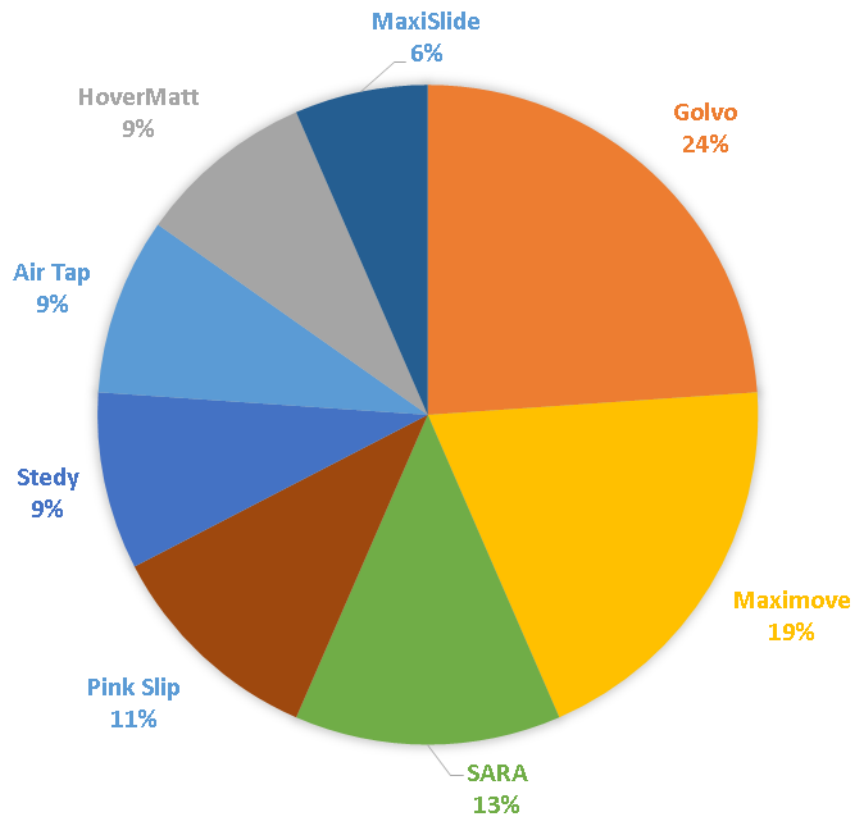
Q) In the past year, how often did you use the following products?

Nursing Leadership



Equipment/Devices Need More Practice or Help

SELECT THE TOP 3 SPH EQUIPMENT/DEVICES FOR WHICH YOU NEED MORE PRACTICE OR HELP TO OPERATE.



Situations Where You Could Have Been Better Prepared

UNIT	Leadership
ITEM NUMBER	17

Row Labels
<p>In the past year, tell us a situation where you could have been better prepared in terms of patient handling? Describe the key points.</p>
<p>At the point where I was transferring a new admitted patient to his unit bed assigned to him. It was a two or three assisting situation to be able to transfer a patient with a pink slip to the bed. We instructed the patient to roll over on his side for the pink slip to be put underneath him. So it was being placed and the patient was transferred safely and smoothly.</p>
<p>did not use any of he equipment</p>
<p>Have proper bariatric set up when dealing with positioning obese pt</p>
<p>I could have been more prepared with a pink slip ready. A patient thought they were able to move without assistance and was wrong. We needed to do a lateral transfer.</p>
<p>I could have used hover mat to move heavier patients</p>
<p>I do not work as a staff nurse on the unit</p>
<p>More staffing to help with maneuvering patients.</p>
<p>N/A</p>
<p>New nurse</p>
<p>No examples/situations - rarely am I ever involved with patient handling. Although I have assisted with patient transfer on/off stretcher in a code stroke in radiology.</p>
<p>No situation to report</p>
<p>None</p>
<p>None that I can think of</p>
<p>Patient fell out on the sidewalk and could not get up. It was difficult to get the maxi move in position on grass and side walk, to get pt lifted onto the stretcher.</p>
<p>So far there has been no incidents/situations.</p>