



Phelps Hospital
Northwell Health®



Safe Patient Handling (SPH) Analysis April 28, 2020

By

Kathleen Calabro
kcalabro@northwell.edu

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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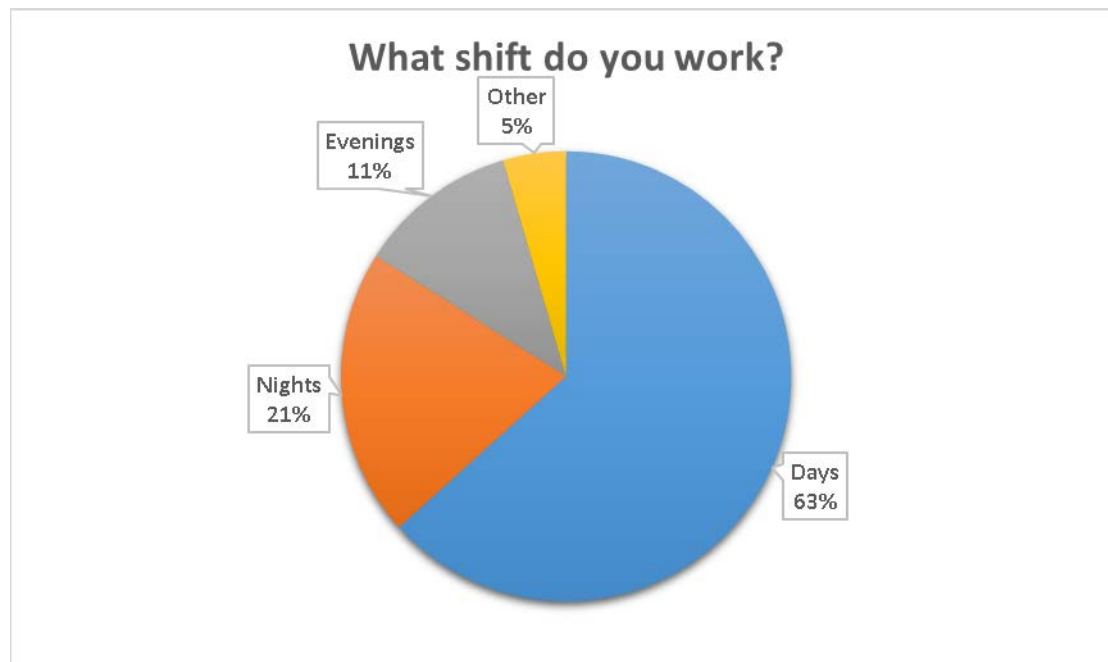
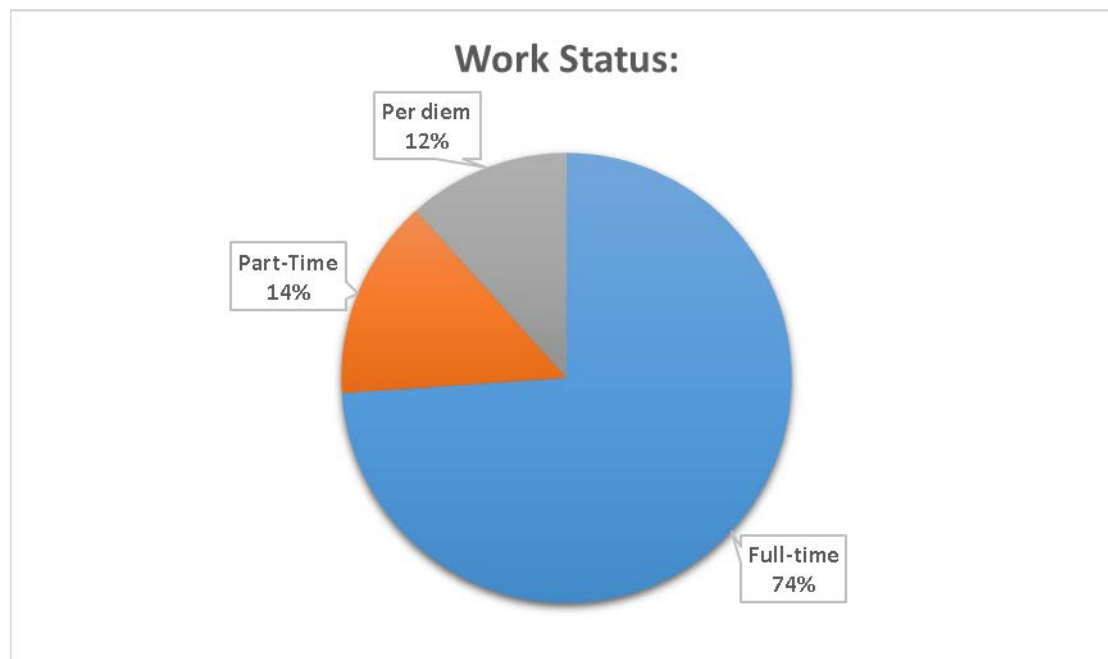
SURVEY SUMMARY

HOSPITAL WIDE Statistics

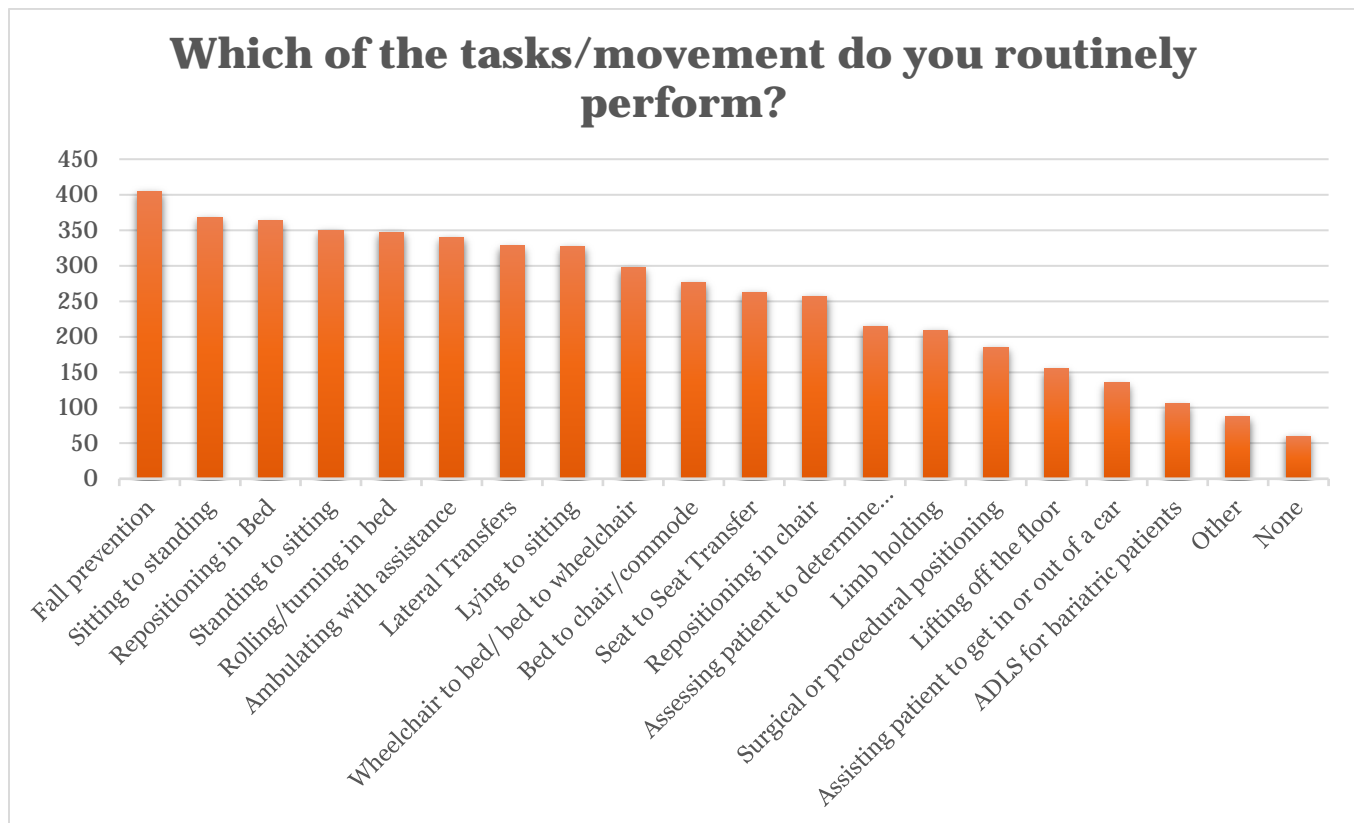
Overall Responses = 499; Response Rate = 67.80%

Top Job Title Participants:

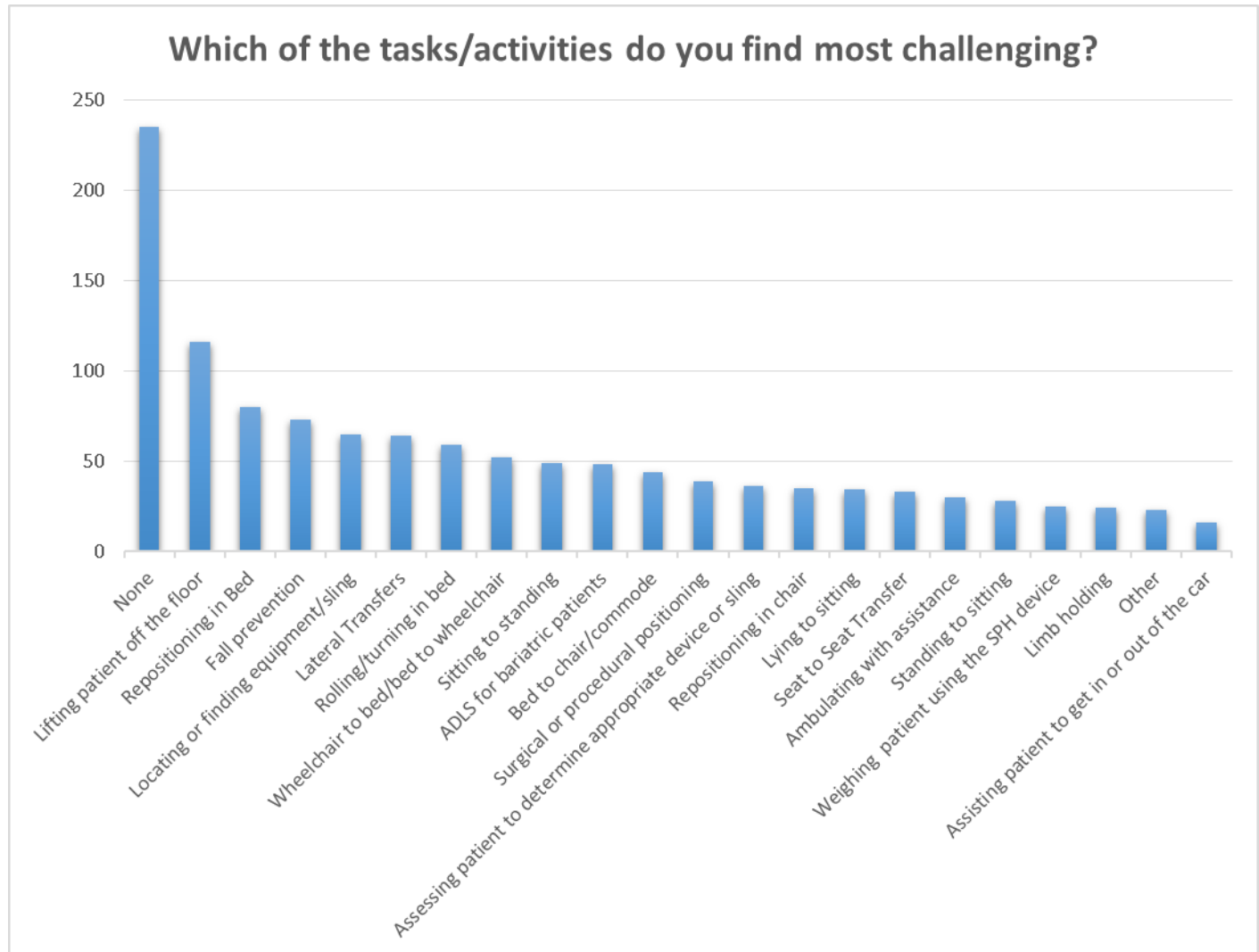
Count of RESPONSES Row Labels	Column Labels What is your Job Title?
RN	43.89%
med surg tech	6.64%
mental health worker	2.62%
Physical Therapist	1.75%
tech	1.40%
Occupational Therapist	1.22%
Specialty Tech	1.05%
RESPIRATORY THERAPIST	0.87%
lpn	0.87%
Hospitality Rep	0.87%
...	

Shift**Work status**

Tasks Routinely Performed



Tasks/Activities Most Challenging

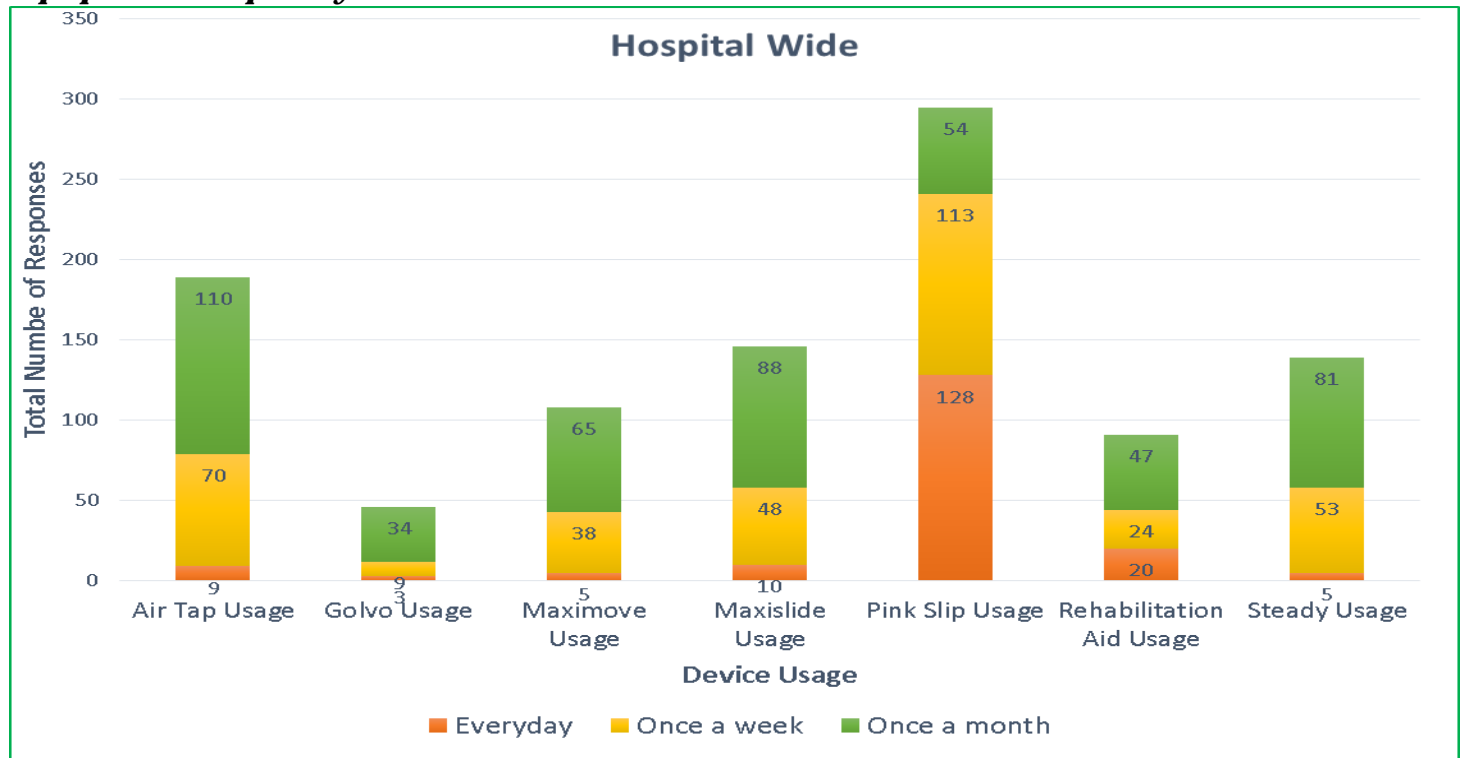


top 5:

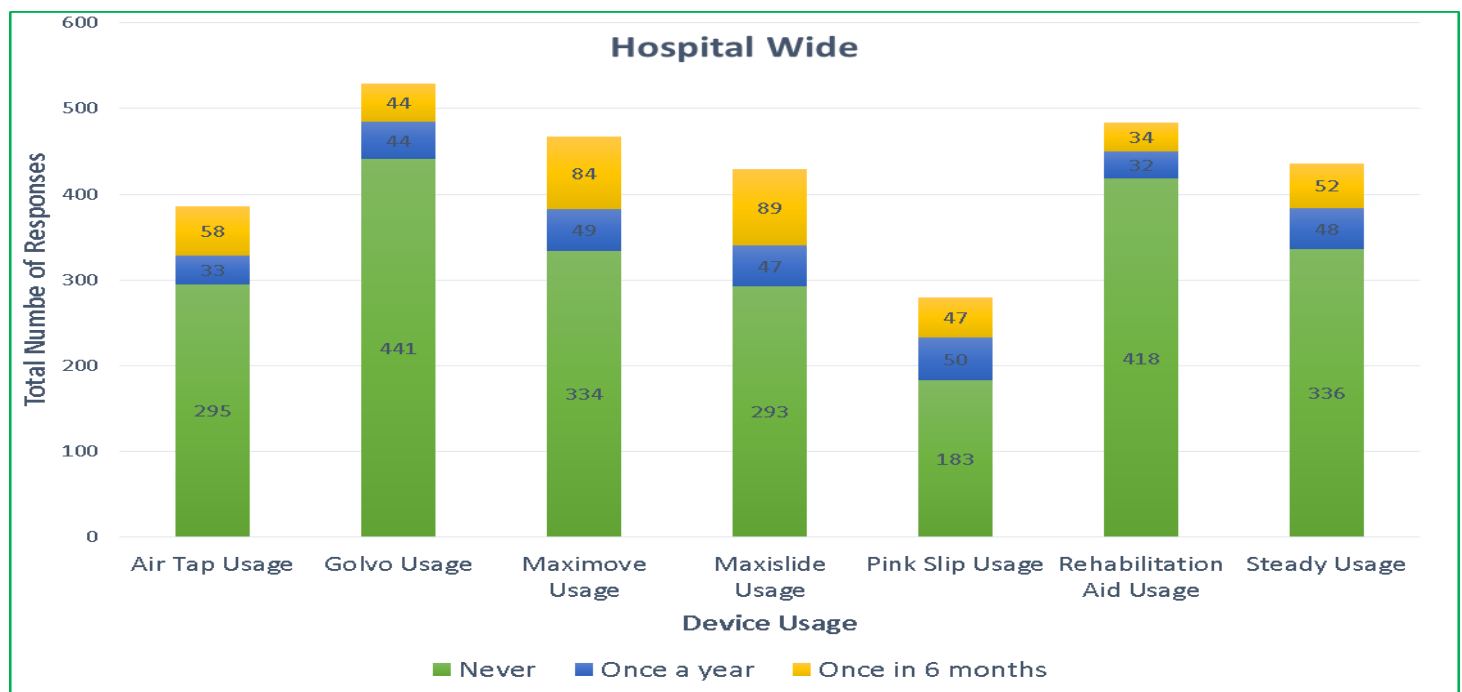
1. Lifting patient off the floor
2. Repositioning in Bed
3. Fall prevention
4. Locating or finding equipment/sling
5. Lateral Transfers

Equipment Frequency

Equipment Frequently Used:

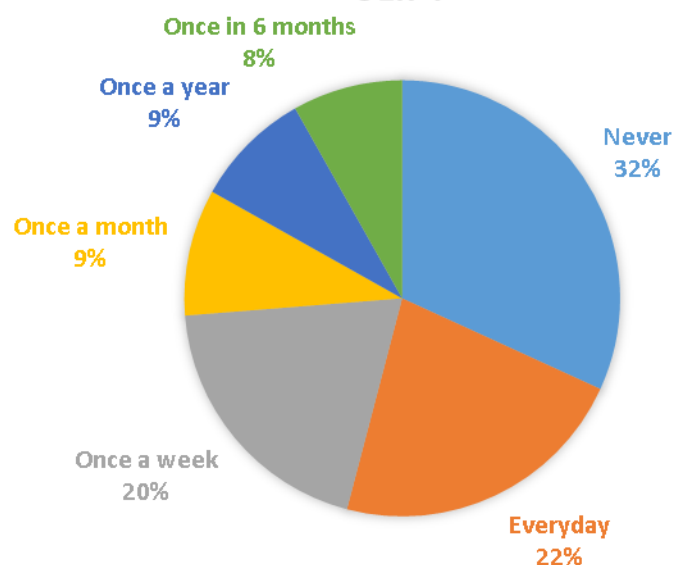


Equipment Less Frequently Used:

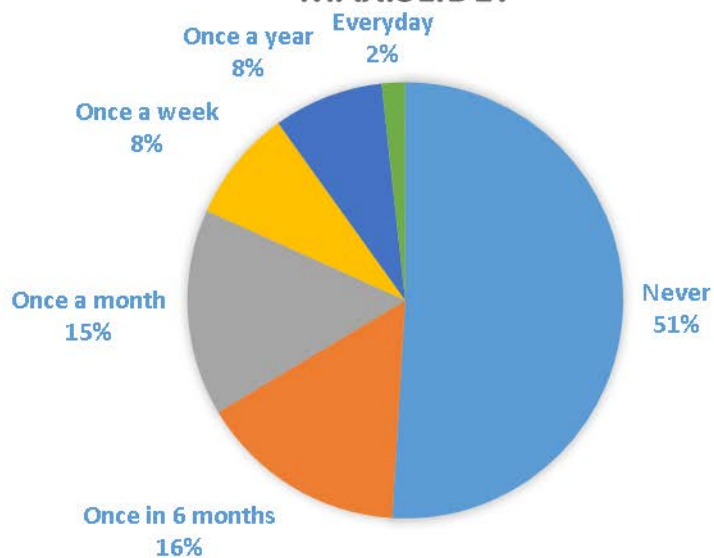


Equipment Frequency Breakdown by Device

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

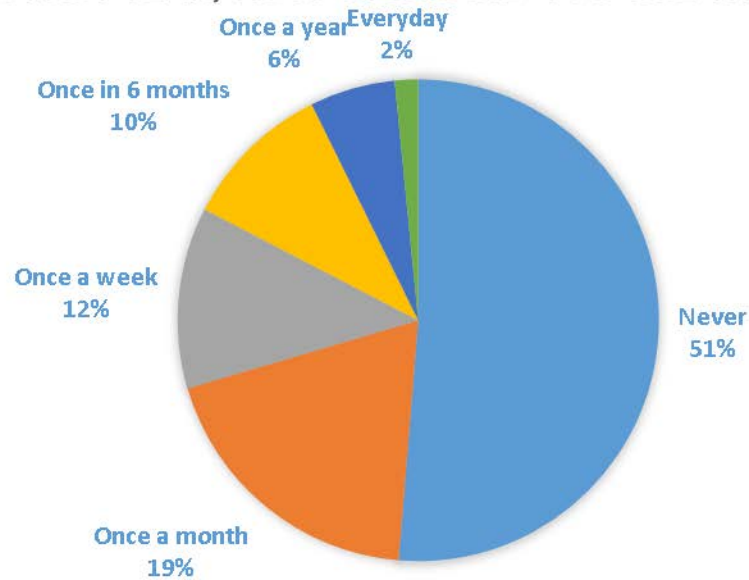


IN THE PAST YEAR, HOW OFTEN DID YOU USE THE MAXISLIDE?



Equipment Frequency Breakdown by Device - continued

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

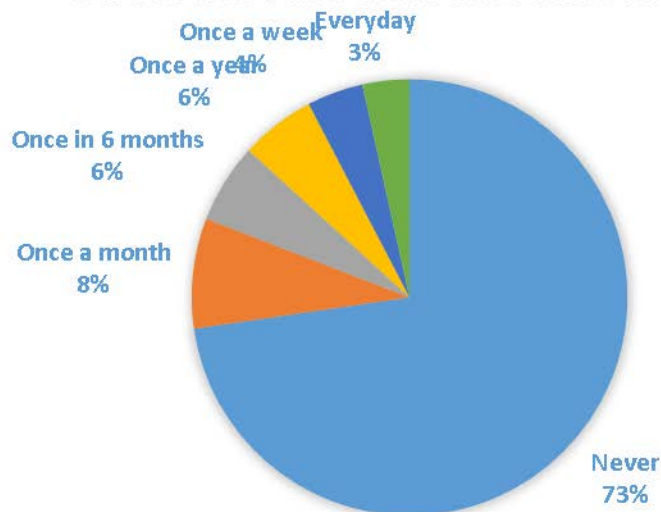


IN THE PAST YEAR, HOW OFTEN DID YOU USE STEDY?

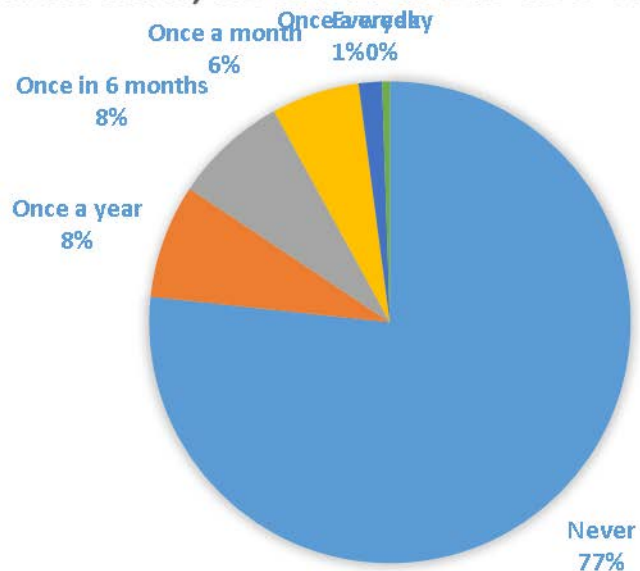


Equipment Frequency Breakdown by Device - continued

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

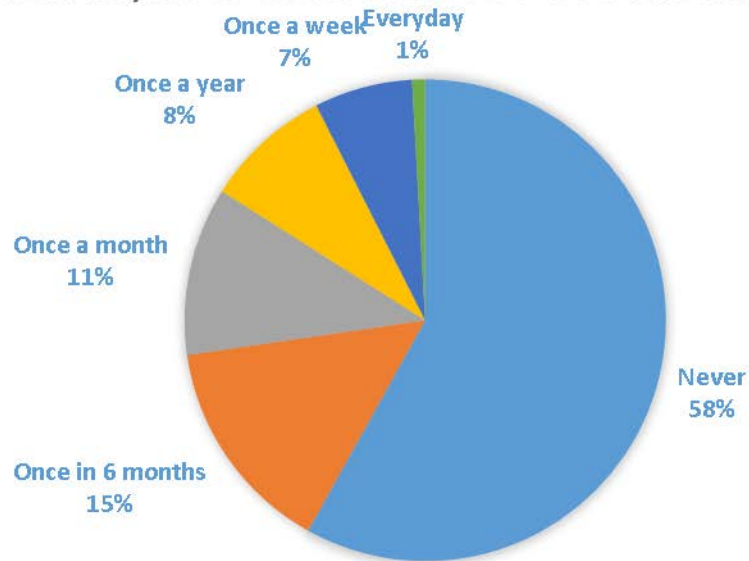


IN THE PAST YEAR, HOW OFTEN DID YOU USE THE GOLVO?



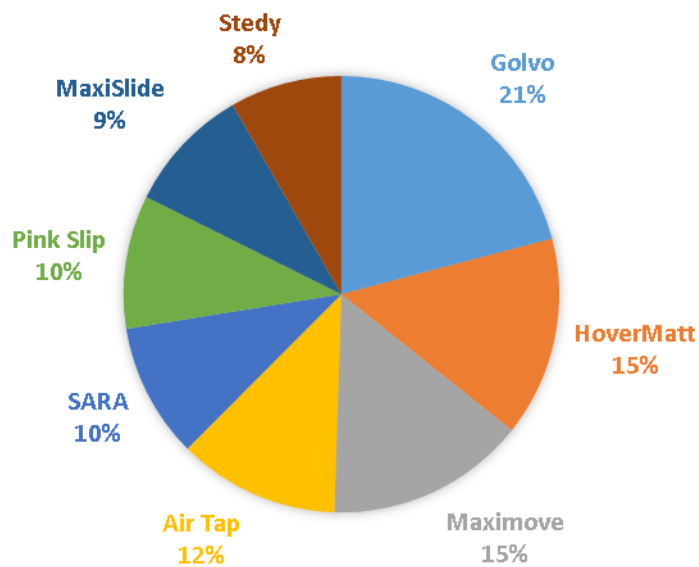
Equipment Frequency Breakdown by Device - continued

IN THE PAST, HOW OFTEN DID YOU USE THE MAXIMOVE?



Equipment/Devices Need More Practice or Help

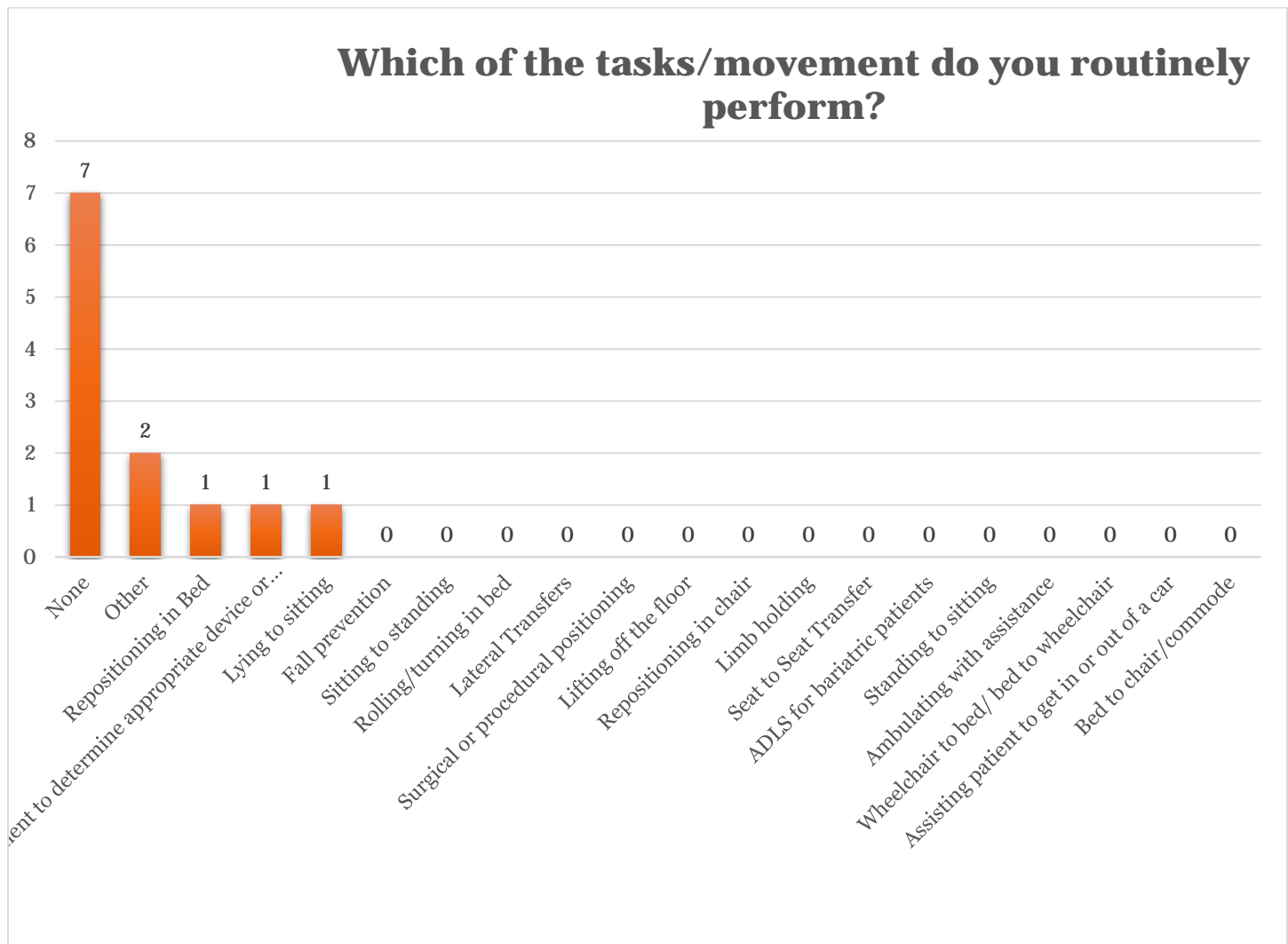
EQUIPMENT/DEVICES FOR WHICH YOU NEED MORE PRACTICE OR HELP TO OPERATE.



Respiratory

Response Count = 10; Response Rate = 45.45%

Tasks Routinely Performed



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

N/A

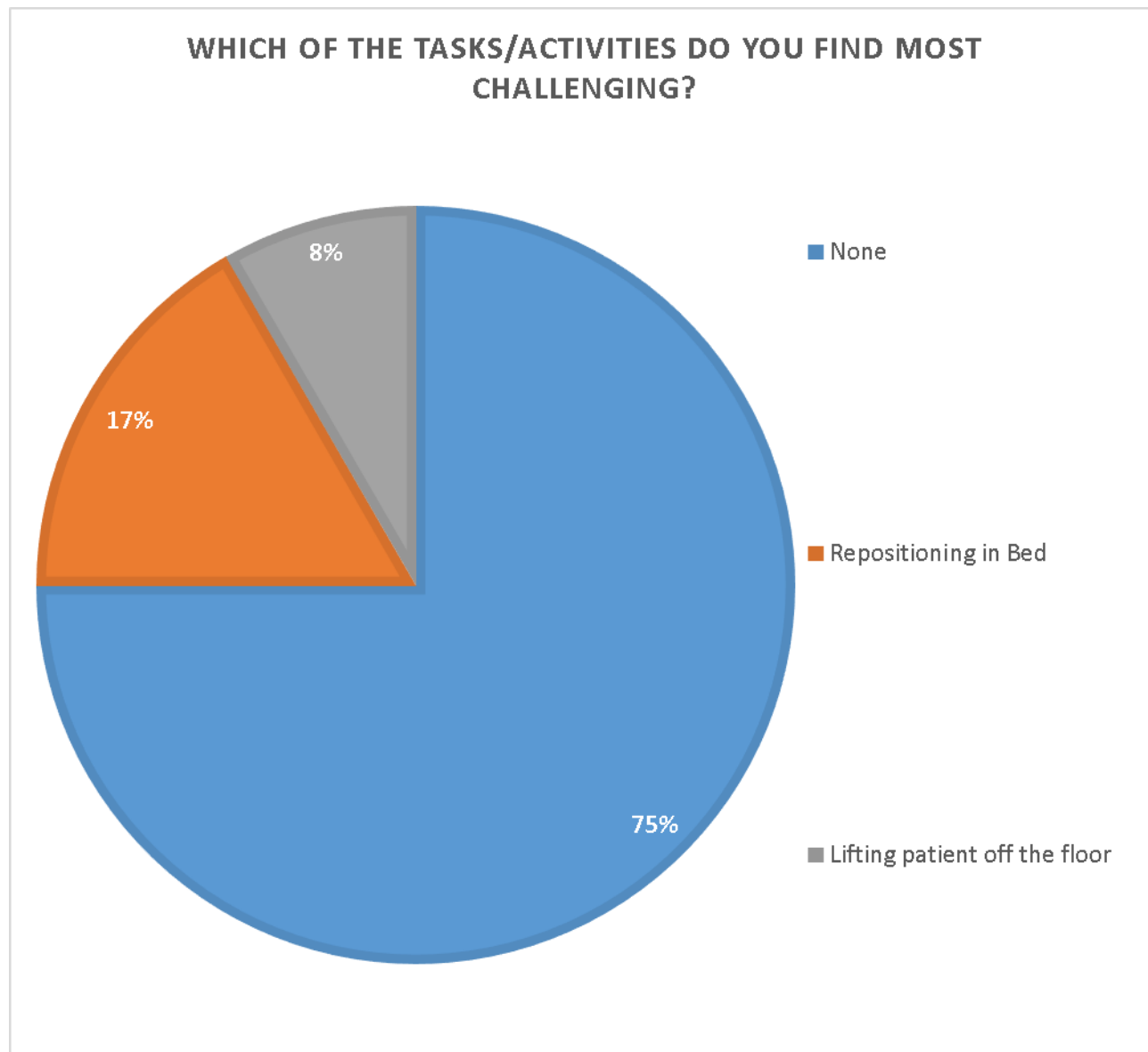
NO

patient assessment for all respiratory needs to include mental status and patent airway

STRETCHER TO BED TRANSFER; THAT IS ALL

taking blood pressures

Tasks/Activities Most Challenging

**Explain why you find those tasks challenging.**

DIFFICULT LIFTING

I answered none

I do not participate in direct patient care at this time.

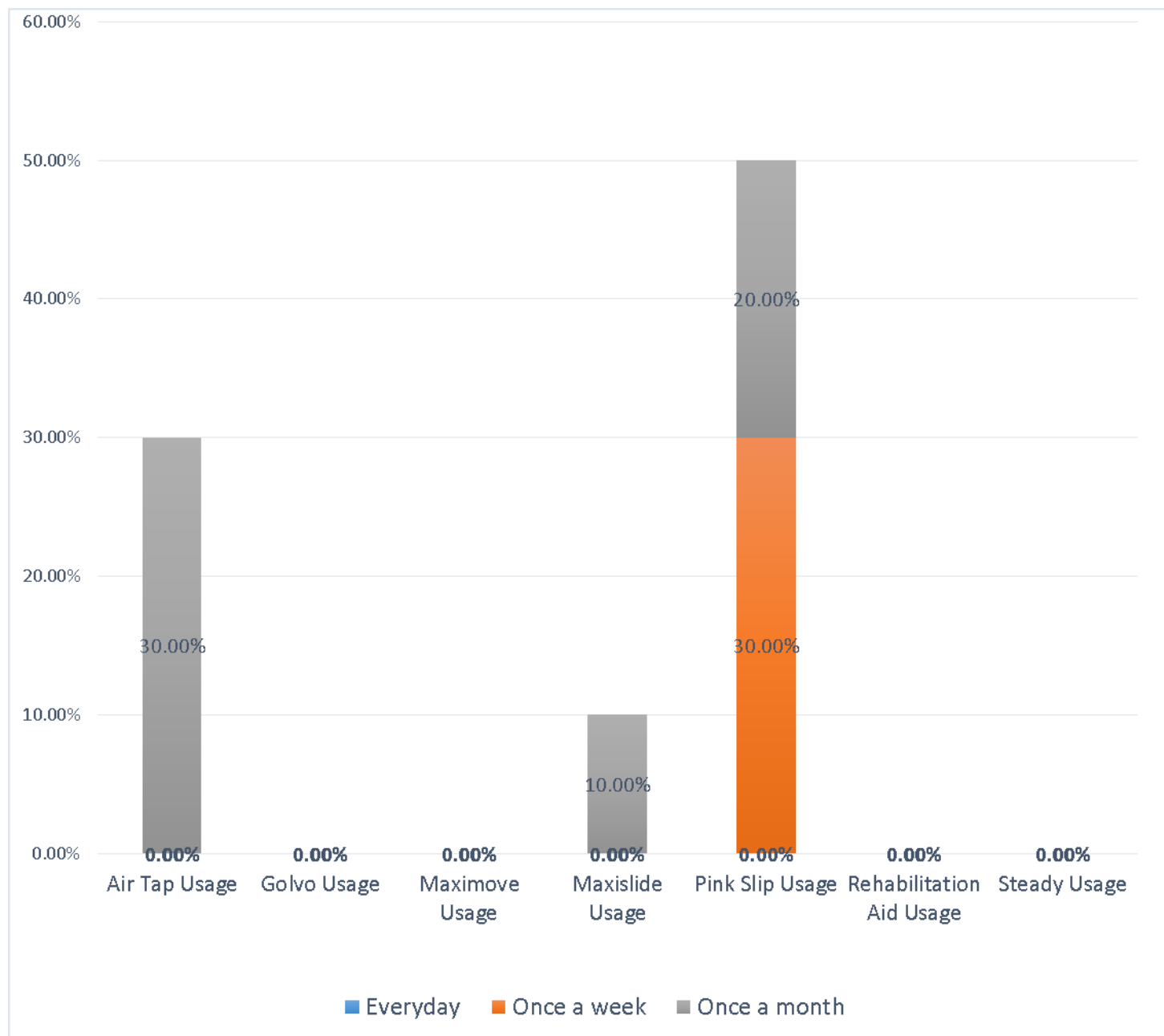
N/A

N/A BECAUSE WE DO NOT PERFORM ANY OF THESE TASKS

our department never use it

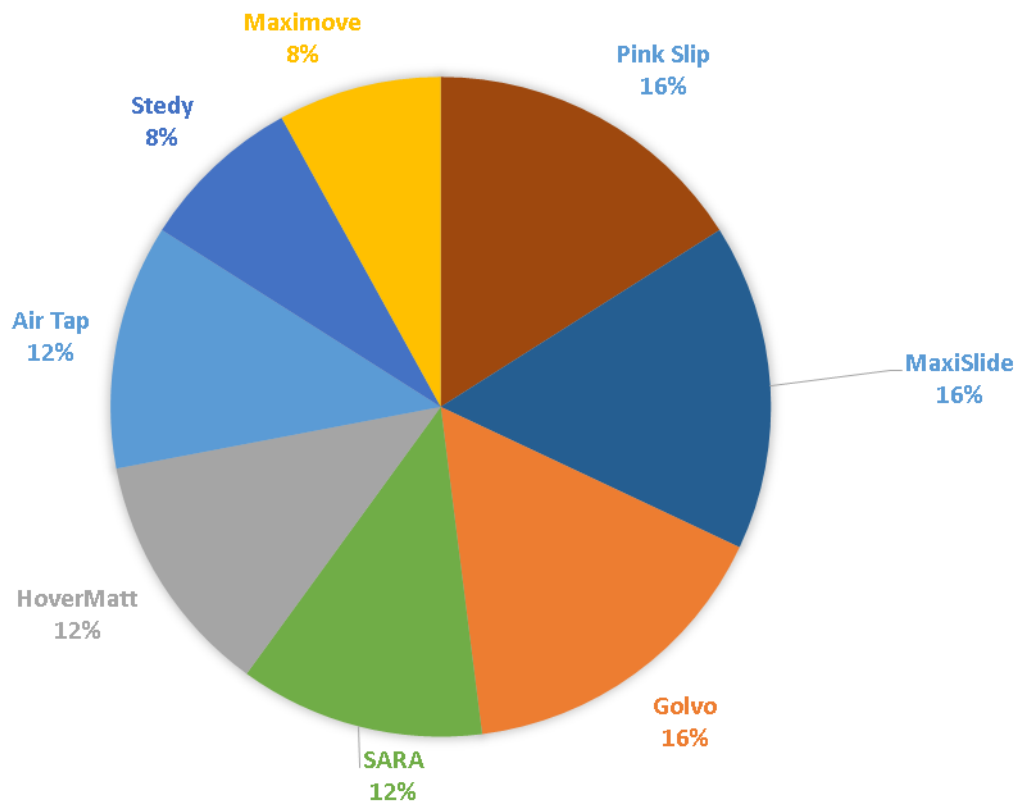
Equipment Frequently Used

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



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

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

I do not move take care of patients in my role

I work with cardio and pulmonary outpatients

IN OUR PRACTICE WE DO NOT DO THESE TASKS

N/A

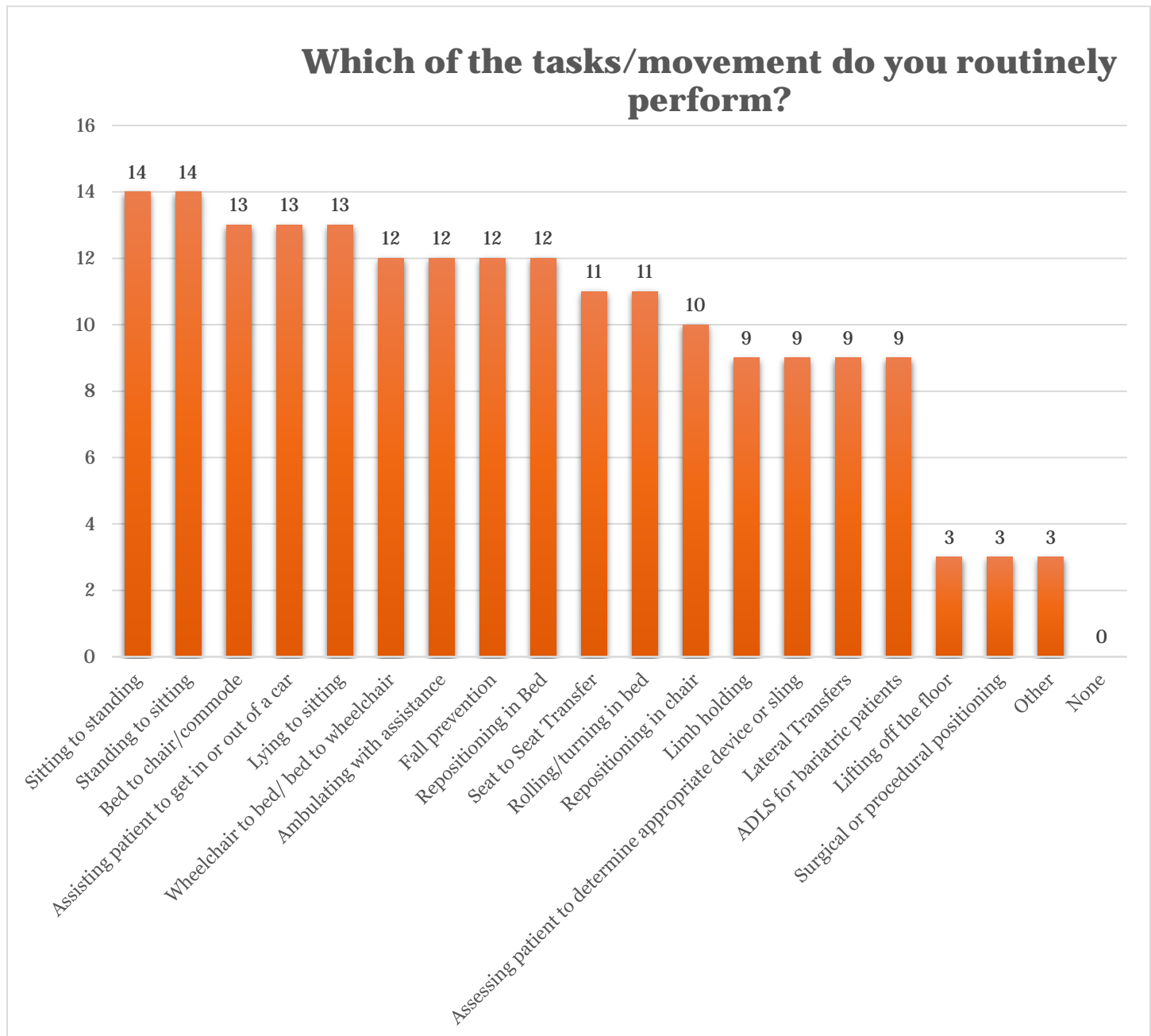
N/A BECAUSE WE DO NOT UTILIZED A MAJORITY OF THESE DEVICES

we do not use any

Occupational Therapy

Response Count = 14; Response Rate = 93.33%

Tasks Routinely Performed

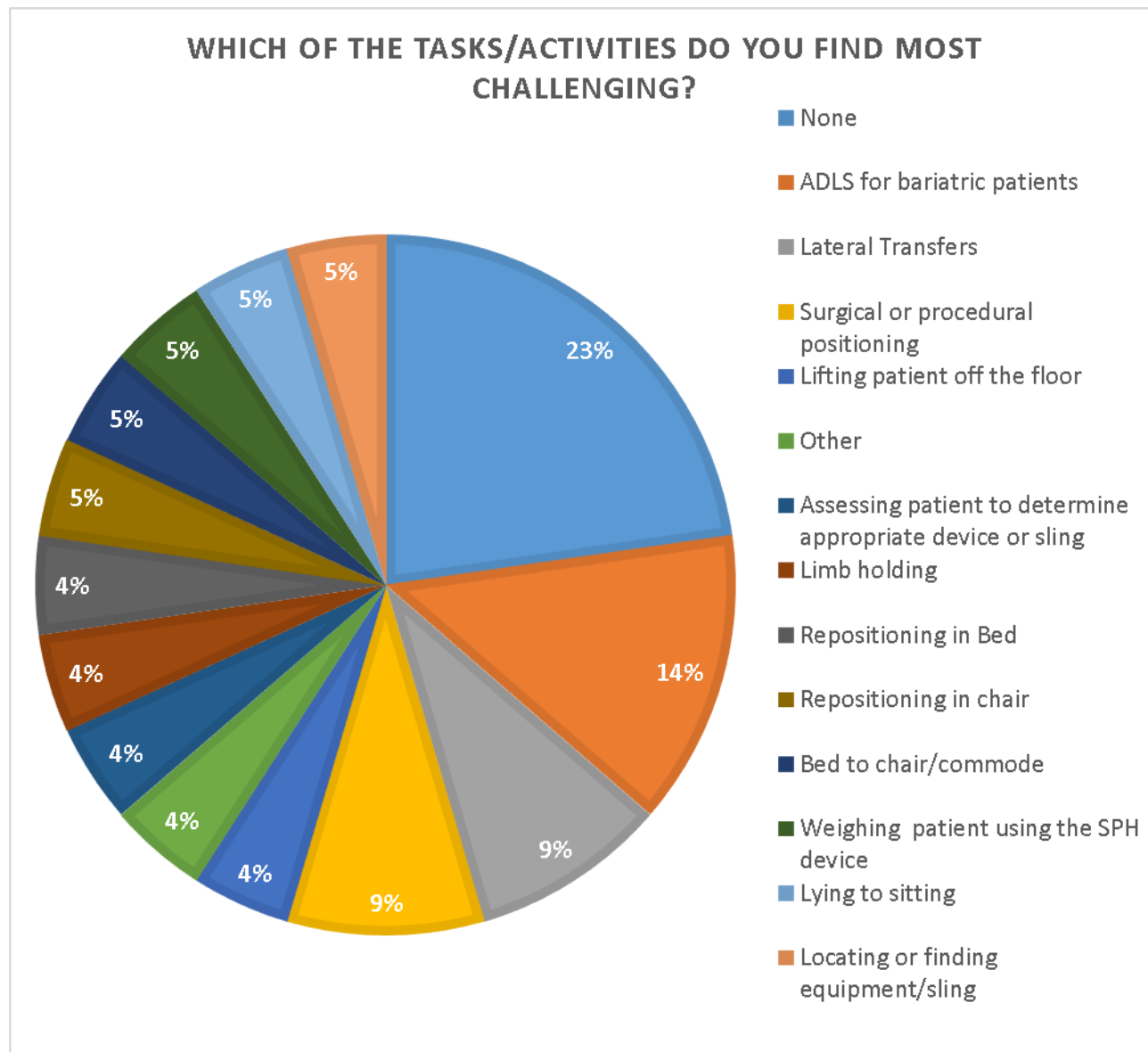


Tasks Routinely Performed - Continued

UNIT	OT
ITEM NUMBER	5

Row Labels
Are there other tasks that you routinely perform not listed above?
ADL's for all patients
ADLs for all patients, not just bariatric; pt safety for transporting goods, bending and reaching; safe management of walking device around household surfaces such as toilet and chairs
ADLs with rehab/acute/ortho patients
Bathroom safety
Many, perform therapy for UE strength, coordination, balance, instruct/adapt in adaptive aids and in doing ADL's for self, cognitive tx, visual tx, according to pt dx, hand therapy, not able to list it all
mechanical lift transfers
N/A
NO
None
orthotic fabrication
orthotic fabrication.

Tasks/Activities Most Challenging



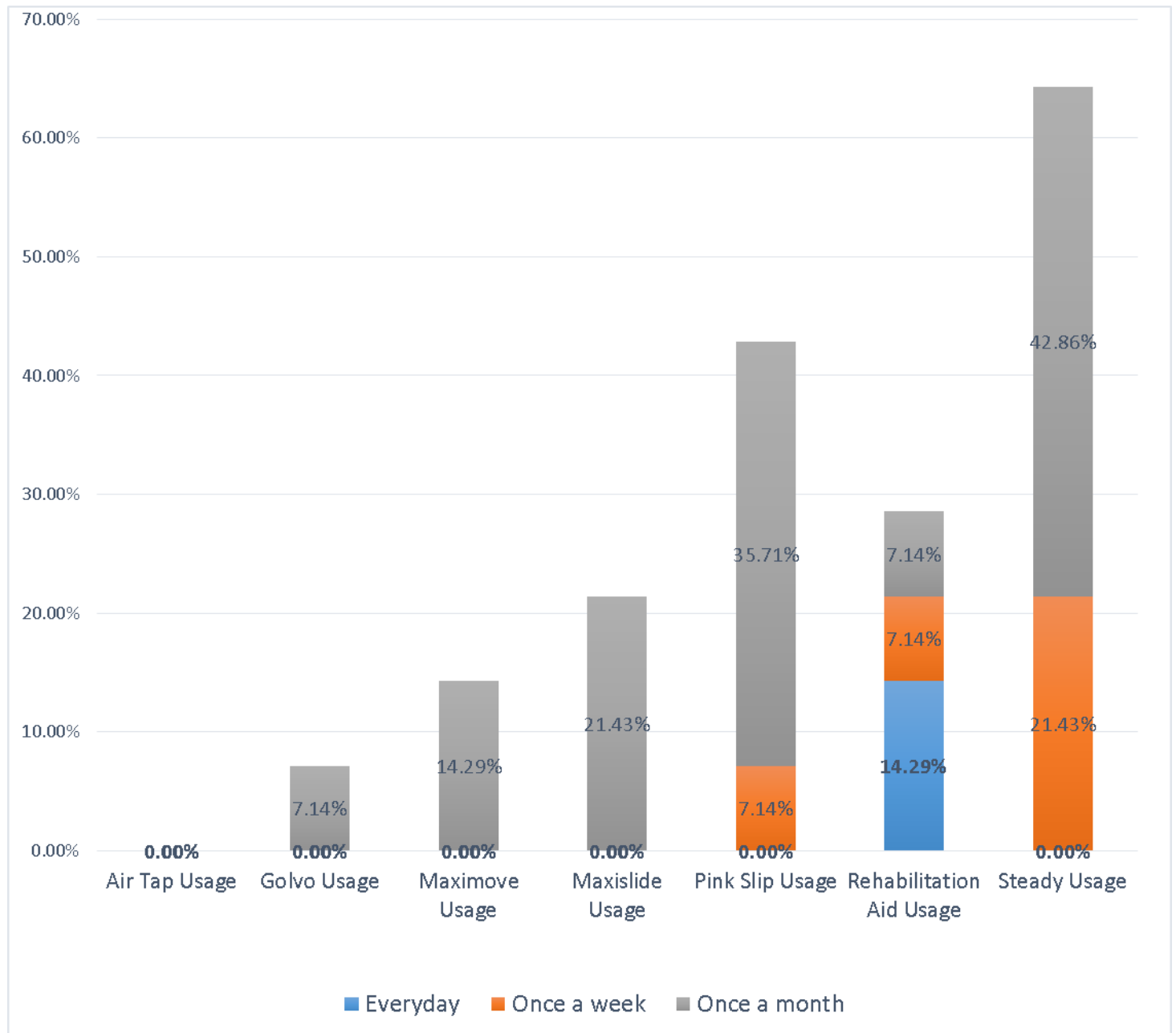
Tasks/Activities Most Challenging - Continued

UNIT	OT
ITEM NUMBER	7
Row Labels	
Explain why you find those tasks challenging.	
ADL's for bariatric patients can be challenging as you need to make sure that you have appropriate DME that can handle their weight and you other need multiple therapists/aides to assist	
Dependent on the functional level of the patient and their comprehension.	
Don't do them often	
if patients do not help, have high pain, or are resistive to care it is difficult. The equipment helps, but just to get it under can be a challenge	
N/A	
na	
None	
none are too challenging	
Not always readily available, or easy to locate some equipment. Also not always staff available to assist with transfers at time needed, eventually can get help.	
Precautions and weight	
protocol	
Repositioning in a chair is typically accomplished by 2 people with a slight lift; it requires some feel of the weight shifting of the patient to do it effectively so it is difficult to use lift equipment for this purpose. The issue is more frequent with patients who are sliding down in the chair while sitting.	
The increased risk to self with bariatric or TA (dependent x 2) Pts especially when they fatigue out (starting with one level of assist) and then during mobilization rapidly deteriorate to next level assist required.	

Equipment Frequently Used

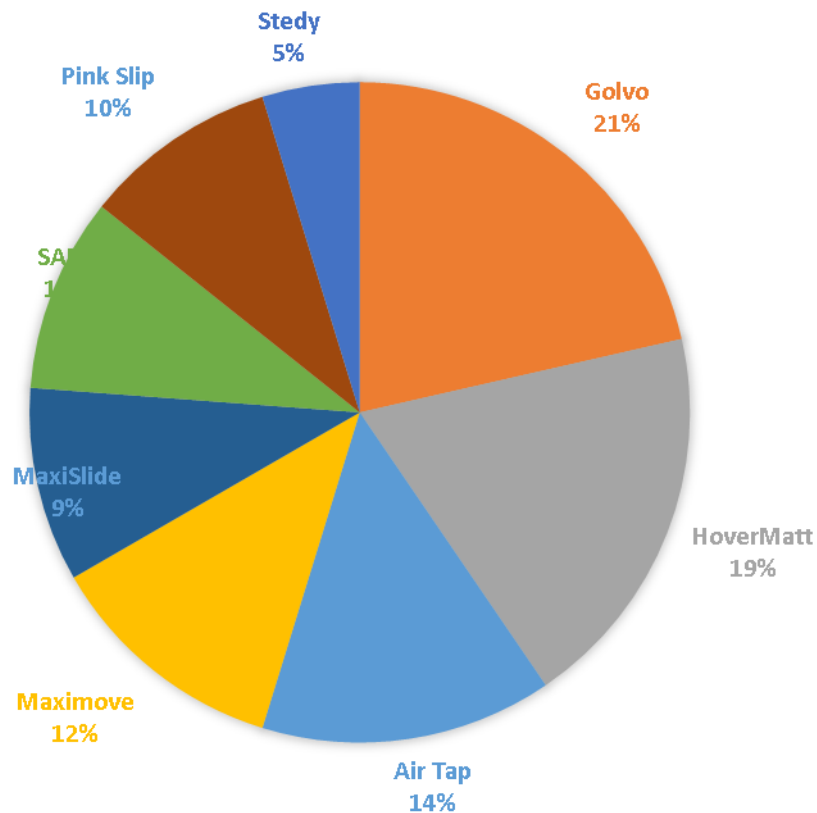
Q) In the past year, how often did you use the following products?

OT



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

OT

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.

attempted to transfer a patient from chair to bed using a lift only to find the battery was dead

easier access to SARA pt slips as the SARA & Golvo slips look similar.

Feel the review for the equipment I used is helpful since I don't used to marked off equipment often. I have always gone to those who use it more frequently if I am not sure and they help so I know it is done safely and correctly.

I can't recall anything specifically.

I could have used a SARA when they Pt had limited ability to stand unassisted instead of relying on human (therapist) support

I feel comfortable with lift equipment and transferring patients

I have not had any patients in the past year that were difficult or too heavy to move. 99% of time is spent in outpatient with patients who ambulate and transfer independently. Low percentage of time spent in-patient on weekend coverage on acute rehab where I have not encountered a patient requiring lift equipment.

I mainly work in out patient and do not need these things often. As a therapist we are working to get people to be independent and show them or their family how to get them moving.

In acute rehab, we have had low functioning patients that require the use of lift equipment for patient handling; I feel very comfortable using equipment that is readily available such as the Sara, Stedy, Air tap/hovermatt and pink slip.

N/A

None

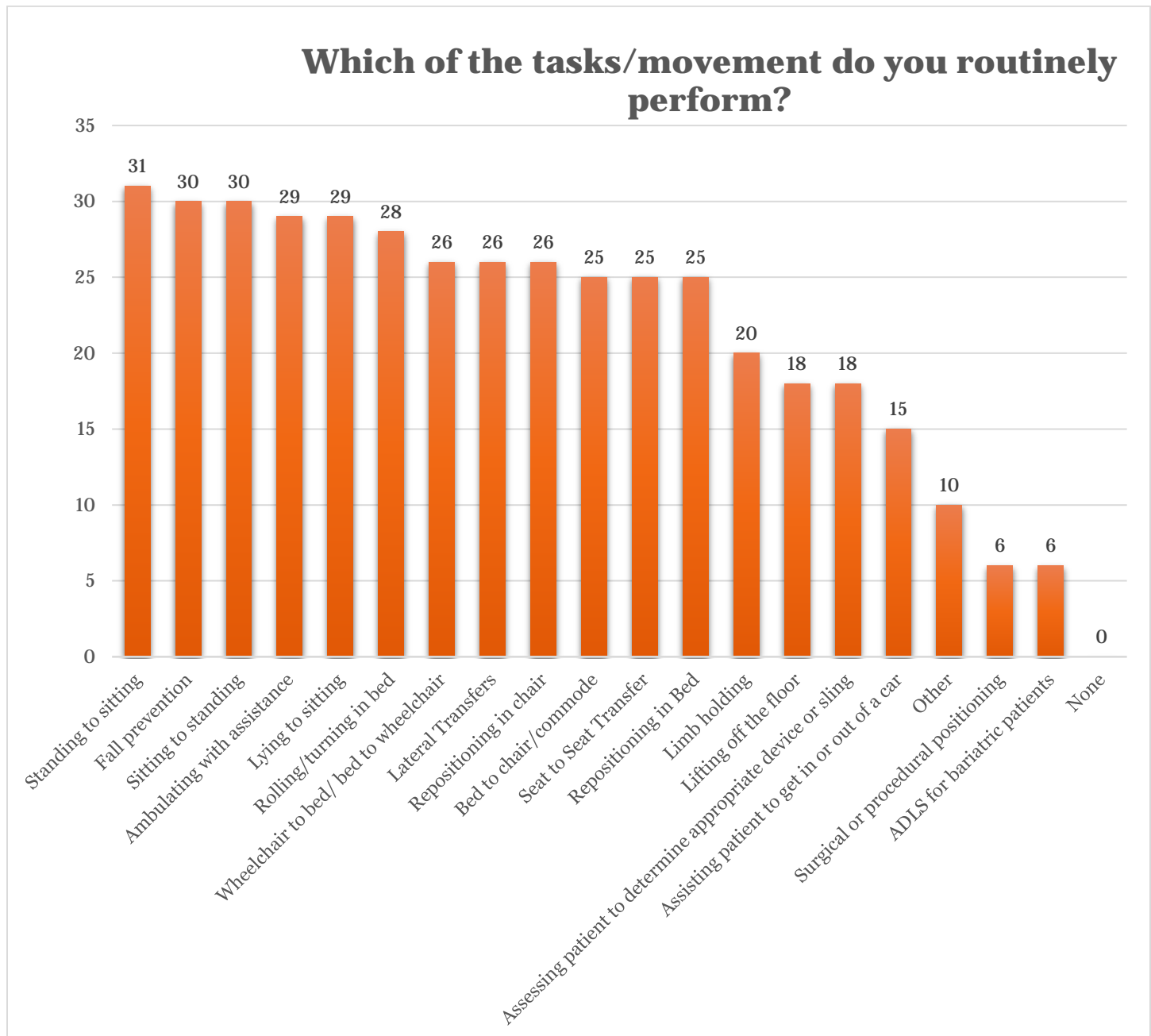
None specific. I work mostly in out-patients who are mostly independent and self ambulatory.

working per diem, I do not encounter tough patient handing situations too often - when I do, I often need review as it has most likely been a long while since I have last used the needed equipment- my co-workers always assist and help review the use of the equipment with me - therefore, I do feel that I have been prepared for all patient handling situations, with the assist of my co-workers (OT's, PT's, 2C nurses)

PHYSICAL THERAPY

Response Count = 32; Response Rate = 91.43%

Tasks Routinely Performed



Tasks Routinely Performed - Continued

UNIT	PT
ITEM NUMBER	5

Row Labels

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

all listed

Assisting Endoscopy Procedures and cleaning/reprocessing endoscopy scopes

assisting with exercise

checking closet supplies, finding and placing patient charts

Cleaning splint pan/fold towels

clerical

compression bandaging for limb volume reduction

i am a physical therapist

Manual theapy, therapeutic exercise, therapeutic activities, balance-gait training

N/A

NO

None

Outpatient Physical Therapy services

outpatient PT: modalities, CDP, pediatric handling, charting, using infrared goggles for vestibular

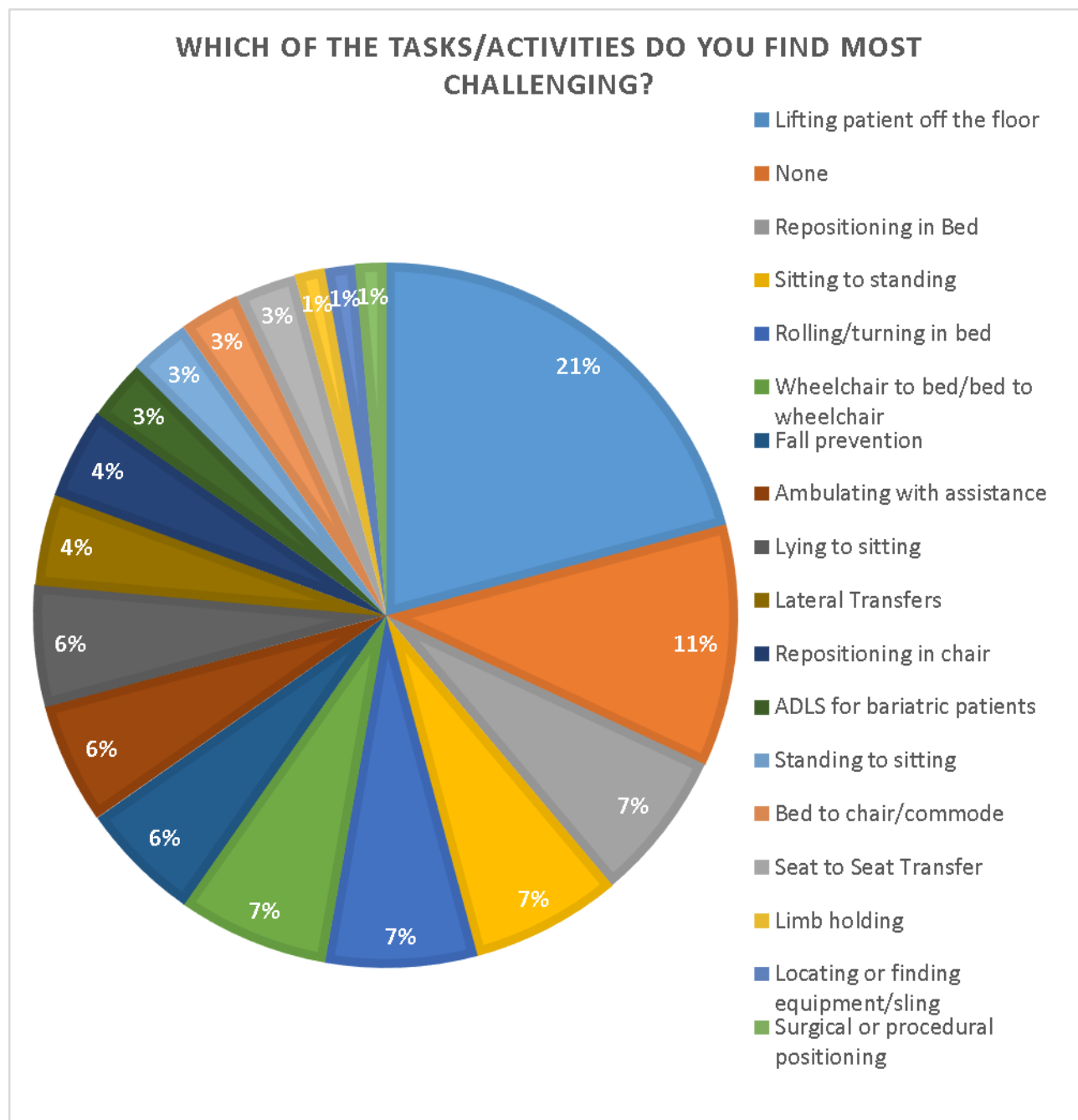
Postural Education

Stair training

yes

Yews, administrative ONLY

Tasks/Activities Most Challenging



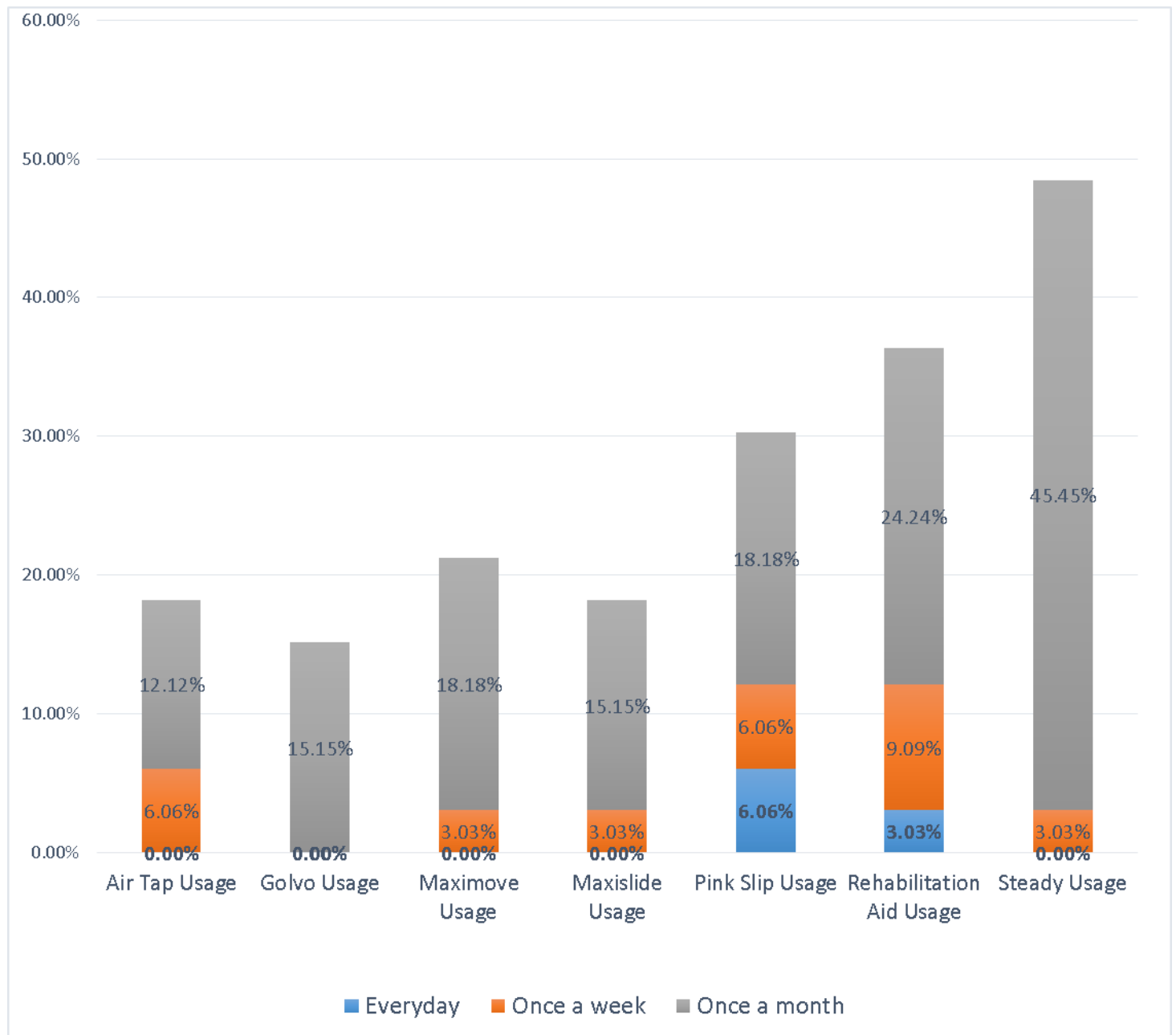
Tasks/Activities Most Challenging - Continued

UNIT	PT
ITEM NUMBER	7

Row Labels
Explain why you find those tasks challenging.
A lot of physical effort to accomplish task.
Because so many patients are heavy
Deconditioned patients have difficulty mobilizing in hospital beds, especially when on pressure relief mattresses.
Depends how big and how dependent the patient is. I am 4'11" and 112 pounds. If the patient needs a lot of assistance, but not enough to use a lift, this may be difficult for me.
Due to unpredictable variables
have not had to do it, but I may be nervous about the transfer
I am usually the first person to assess mobility after being on bed rest when the patient is deconditioned
I do not find any particular task challenging
if pts are very weak or obese difficult to mobilize
If the patient has pain, decreased strength, decreased safety awareness, decreased attention skills, decreased balance.
It usually depends on the cognition of the patient being educated.
Judging between the correct equipment to use to lift the patient without causing any pain or injuries to the patient.
More challenging
None
Patient might be too heavy.
patients are heavy
Patients were unable to hold themselves up requiring max effort to sit.
positioning is never great
Pt comprehension and willingness
Pts body weight and joint pain poses challenges
Some may prove to be a bit more difficult but with help can be done with ease.
Tasks can be challenging due to not having enough assistance or patient is not able to help themselves in assessing needs.
The level of assistance can vary. The pt may be non weight bearing. The pt may be flaccid on one side.
These tasks are challenging when Patient is on High medication & confused & put on fall prevention and transfer from bed to chair.
These transfers can be challenging depending on the patient's ability to understand instructions.
Weak upper body strength
weight of patient excessive
Working for so many years I find those tasks are not as challenging as before.

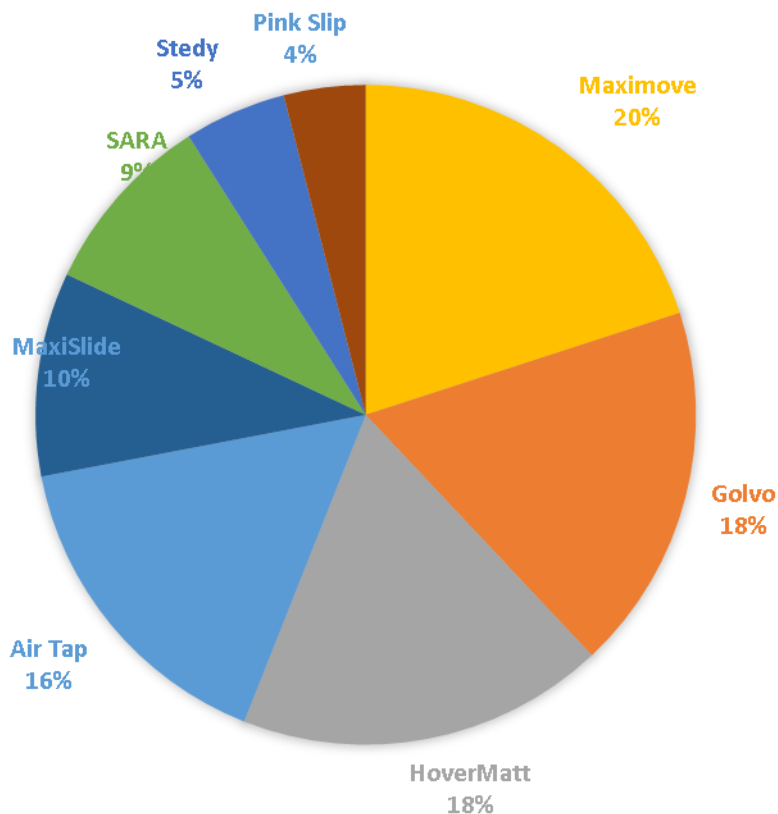
Equipment Frequently Used

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



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

PT

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.

Am a manger and handle SPH reports for staff incidents--am always advocating for SPH with all staff, no unprepared situations encountered, I am primarily administrative.

being prepared to use the golvo

Difficulty finding right equipment in timely manner, as certain pieces maybe in use on other floors.

Having chairs or assistance close by to assist in preventing falls.

I am always prepared for handling

I am primarily an outpatient PT. I work inpatients ranging from 2x per month, to once every 2 months (infrequently). I use the equipment so rarely, that when I do need to use the equipment, I usually ask someone to help.

I cannot recall a time where I felt unprepared in regard to safe patient handling in the past year.

I had a patient in 2 center with significant swelling to both legs. We tried using the Golvo and other lift equipment to help elevate the legs in order to apply compression bandaging, however, non of the mechanical lift equipment worked. I felt like there could have been someway to lift the patient's legs to have it wrapped appropriately but I was not aware of all the options.

I have been trained in Golvo, Maximove, and Maxislide but I don't treat bedside and inpatient so don't get the practice to use these equipment.

I mostly work in outpatient facility where everyone is mobile and have used equipment very little. As therapist we attempt to mobilize patient and only use equipment when necessary

I only need to be prepared for the unknown and unexpected.

I think I am always prepared to deal with all kinds of unpredictable and challenging situations but I guess you can never be one hundred percent prepared all the time. It is hard to say how exactly I'd wanted to be better prepared, but I know for sure that every day I learn something new and more prepared for new challenges.

I was transferring a patient during an evaluation, Patient was debilitated, on vent (chronically) with trach, increased tone, specialized w/c , walks with walker with high bil platforms previously. Patient stood with mod x 2 assist, started to ambulate and quickly became out of breath on ventilator. patient started to give out and barely made it back to bed, requiring Max x 2 assist to make it back. (patient only took 3 steps.)

I work mostly in outpatients

I would check first how much patient can able to perform the task and how much assistance require to complete the task safely. And then if I need to utilize any device/equipment as mentioned above I will use it as requires with proper assistance from others.

more education

More practice with machines

N/A

New hire have not been employed for a year.

No recent situations I remembered.

None

Patient fell to the floor - maxmove did not help our team lift patient

pt fell in the hallway, needed hoist to pick her up, needed more staff versed with it

Should have used better body mechanics to help pt during rolling in bed.

Sometimes it is difficult to locate the lifting devices on the floor when they are being used.

The transfer of a patient from her wheel chair to the power operated lift into the pool was difficult due to the height difference of the patients wheel chair and power operated chair lift. Slide board was ineffective and transfers via equipment is not easy due to wet floor and patient.

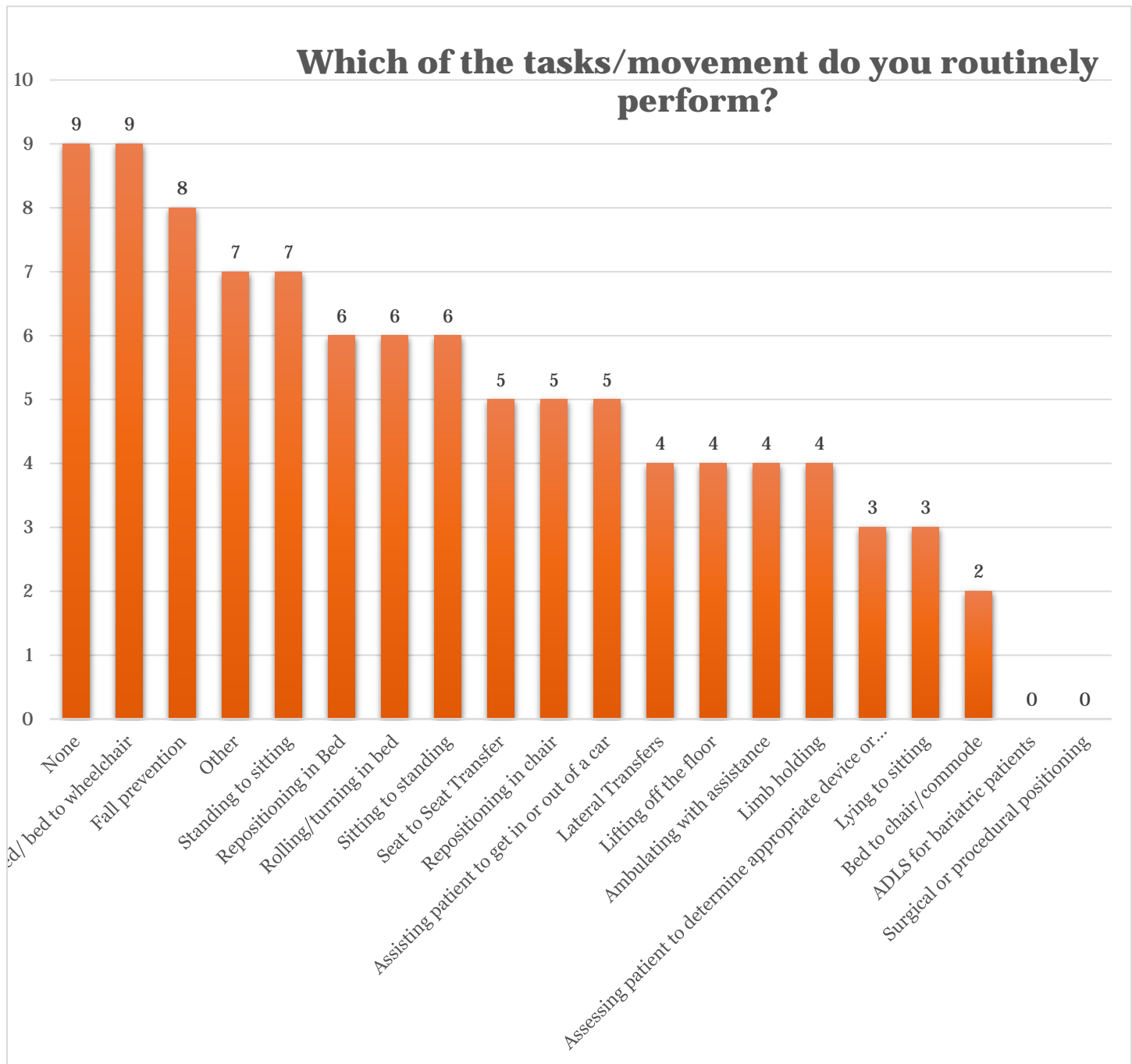
using the maxmove with an outpt pt that I wasn't prepared for

Using the pink slip more often and knowing where to locate it on the floors.

HOSPITALITY

Response Count = 24; Response Rate = 92.31%

Tasks Routinely Performed

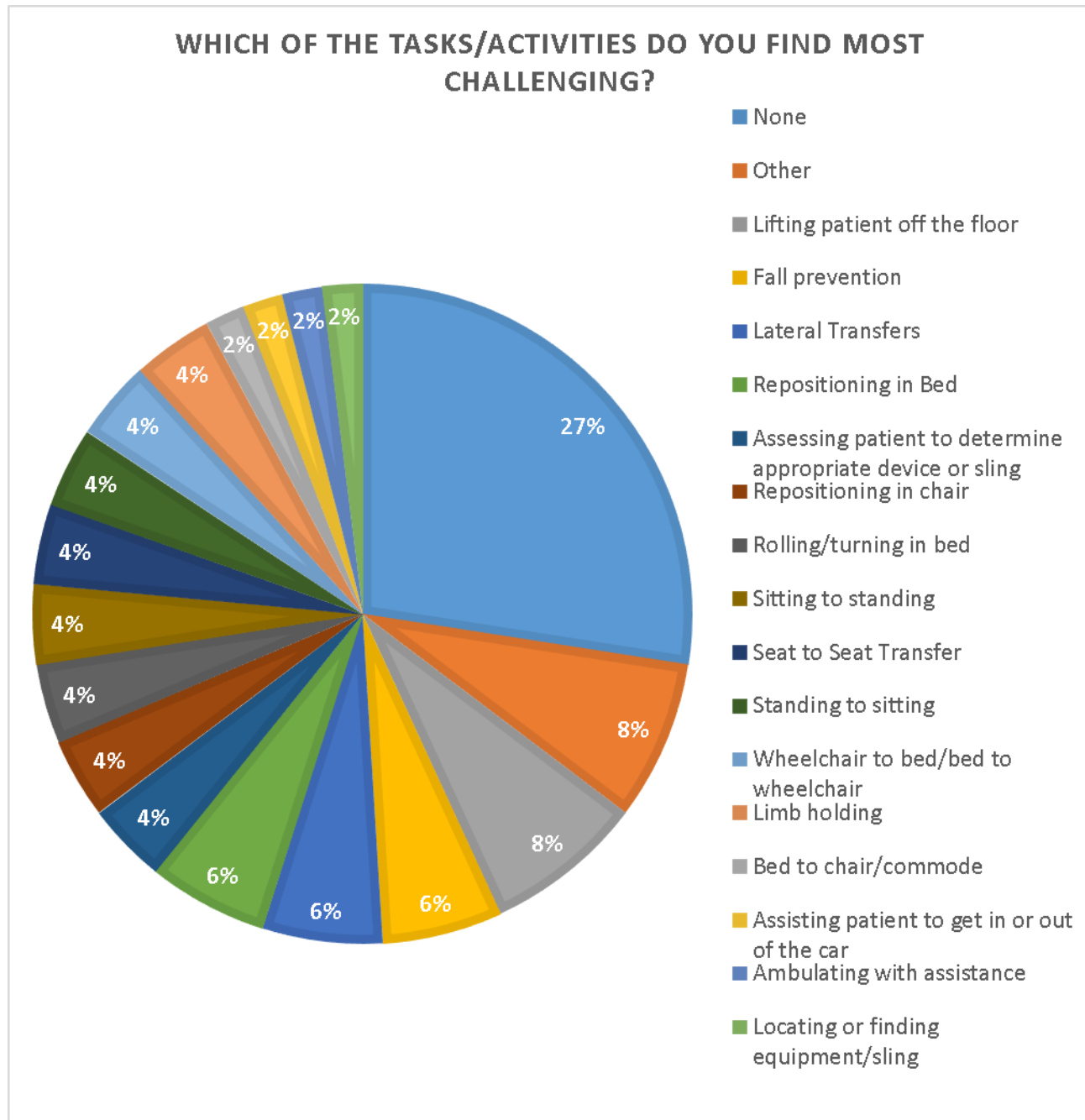


Tasks Routinely Performed - Continued

UNIT	Hospitality
ITEM NUMBER	5

Row Labels
Are there other tasks that you routinely perform not listed above?
assist w/food
assist with serving patient meals , visit patients to review, resolve issues.and perform service recovery.
Assisting patients with directions throughout the hospital and issuing guest passes
Bed to stretcher and vice versa
deliver specimens to the labs
feeding patients, provide comfort and care
Food service
Helping set up tray for patient, preparing their food.
I do not move patients. I act as a liasion for the patient and contact staff when patient needs to be moved.
Manage the staff,
N/A
NO
None
nope
Positioning tray table with patient
Pushing food trucks over 300 times a day all day. Lifting food tray all day can be over 150 trays a day
Taking food orders for breakfast, lunch, and dinner, Passing trays, indentifying diets, charting for fluid intake when applicable, and restocking beverages in mini refrigerators.
transporting patient to destination
yes

Tasks/Activities Most Challenging



Tasks/Activities Most Challenging - Continued

UNIT

Hospitality

ITEM NUMBER

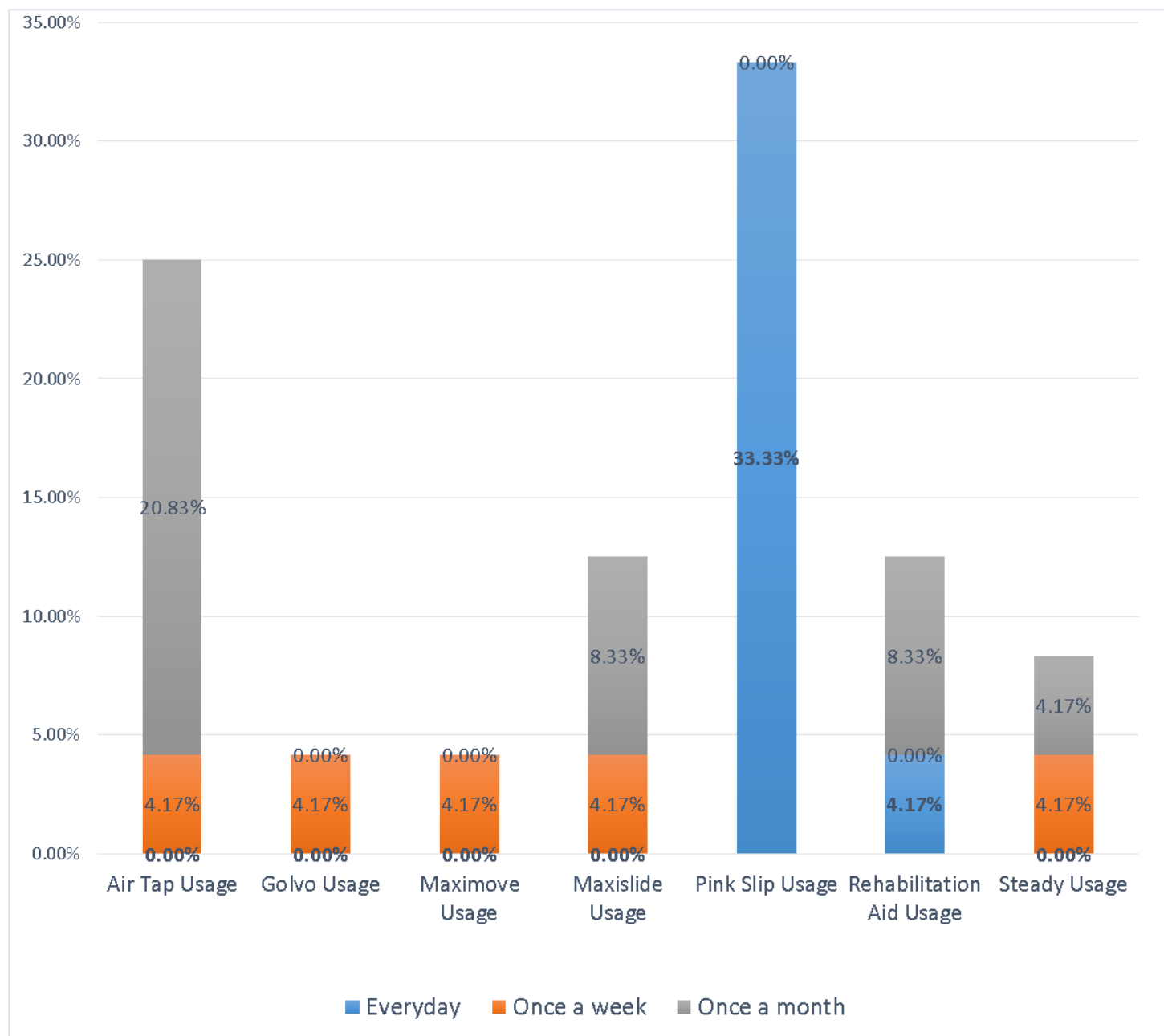
7

Row Labels
Explain why you find those tasks challenging.
Because all those tasks require 2 people all of the time. Finding a machine to assist is impossible because they are hard to find and is all over the place. There is no equipment room.
because some times a patient my have an injury and I don't want to move them the wrong way
Bed or tables could be malfunctioning or old to use , making it more difficult to set up patient
Heavy patients or patients in significant pain require very careful handling
help occasionally
I am nonclinical and I am not allowed to touch the patient.
I do not perform these tasks
I don't do those tasks
larger patients become difficult when doing excessive amount of transporting.
N/A
None
None of these tasks where challenging
The scenarios in which those tasks present themselves are exactly when the patients are most prone to incidents and safety has to be the critical procedural objective from a transporter perspective and anyone involved during that task in question.
the tasks help you get use to what equipment to use

Equipment Frequently Used

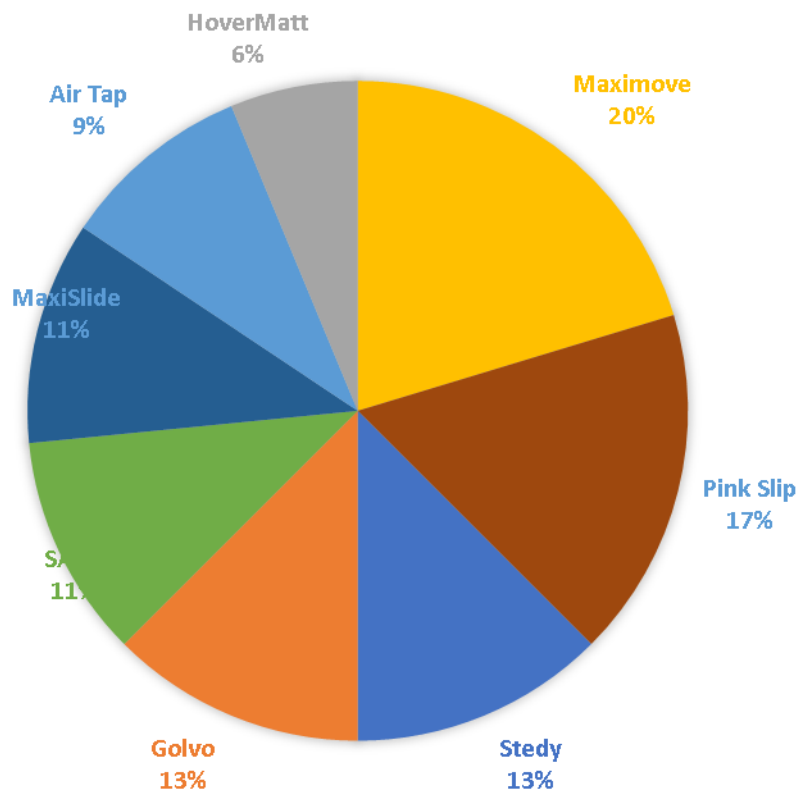
Q) In the past year, how often did you use the following products?

HOSPITALITY



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

Hospitality

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.

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