



CASE STUDY

HENRY MAYO NEWHALL MEMORIAL HOSPITAL

23845 McBean Parkway, Valencia, CA 33612

HoverTech HELPSM Program Assists in Enhancing and Building Sustainability into an Existing Safe Patient Handling Program

Situation

Facility wants to enhance and ensure the sustainability of their Safe Patient Handling Program

Henry Mayo Newhall Memorial Hospital is a 238-bed short term acute care hospital designated a Level II Trauma Center. Administration had established a basic Safe Patient Handling Program founded on OSHA requirements. The associated policies and procedures were generally focused on the proper use of patient handling equipment as per the manufacturer’s instructions. A policy was included that provides for annual staff training. The facility’s challenge was to take their basic program to the next level in order to:

- 1) increase staff compliance using the equipment,
- 2) ensure that they have the proper Safe Patient Handling devices in adequate supply, and
- 3) develop a suite of policies and procedures that will support and sustain the enhanced program.

Understanding the needs of the entire facility and establishing priorities to begin enhancing the program was problematic for the staff due to the resources and expertise required to properly analyze each care area’s risks and needs.

Implementation

HoverTech conducts a risk assessment and policy and procedure workshop

The first step in the process was to conduct a risk assessment in which qualitative interviews and quantitative research were conducted. Key data points were documented from 2010–2011 to determine priorities for equipment and policies and procedures.

Caregiver injury and prevalence documentation was reviewed and analyzed to identify the top injuries by task. Summarized below are the rankings with 1 being the greatest area of injury and risk, and 6 the least. (Figure 1)

Lost and restricted work days by cause of injury were assessed as a means to prioritize equipment and training needs. The chart illustrates the tasks associated with the greatest loss in nursing time. (Figure 2)

TASK	RANKING
Repositioning in Bed	1
Bed to Chair	2
Ambulate	3
Lift from Floor	4
Lateral Transfer	5
Toilet/Bath	6

Figure 1

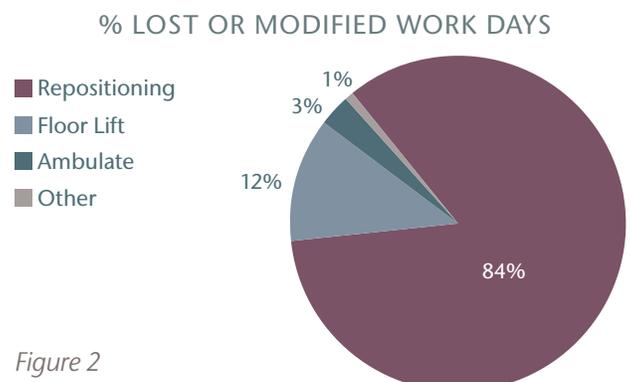


Figure 2



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Patient dependency was assessed by unit. These data provided the information necessary to determine the quantity of equipment required for each area. The following chart (Figure 3) illustrates the percentage of patients requiring assistance for transfers and repositioning.

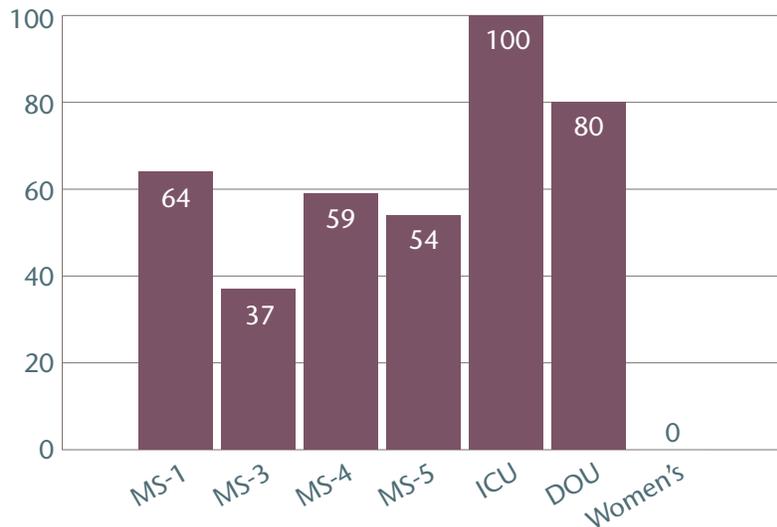


Figure 3

The final part of the assessment included analyzing the current equipment in the facility. Equipment type and quantity was inventoried by unit. Most units shared equipment and had the following products available:

- Slider boards
- Sling lifts
- Ceiling lifts
- Powered stretchers

The data collected from the assessment helped the staff to develop a revised Safe Patient Handling Program that allows each care area to have dedicated equipment based on the needs of the patient population in that unit and injury data. Additionally, the facility will be incorporating HoverMatt® Air Transfer Systems and a HoverJack® Air Patient Lift, which will impact the causes of the highest number of injuries and lost work days.

Secondary to the risk assessment, the facility conducted a Policy and Procedure workshop. All major stakeholders attended, including Nurse Managers, Physical Therapy, Transport-Safety Officer, Director of Nursing, and the Workers' Compensation Insurance Company Loss Control Specialist. Having key personnel involved facilitated buy-in and collaboration across the various departments.

Conclusion

Assessment and workshop empower stakeholders to develop more robust Safe Patient Handling Program

As stated by Jeanne Schnell, Employee Health Coordinator, the HELPSM program “really helped us with identifying the basic elements of our Safe Patient Handling Program: risk assessment, policy development, equipment purchase, education and evaluation. The process helped our team focus on areas of greatest impact and broke down steps to achievable action items. This allowed us to move forward while we maintained control of the program.”

Based on the results of the interviews and research, the primary recommendation was to focus on repositioning patients in bed and lifting patients who have fallen on the floor. This was a manageable starting point that would have the greatest impact on reducing injuries in the facility while working with a budget that would allow for the purchase of HoverMatts and HoverJacks.

Through the Policy and Procedure workshop, policies were developed taking into consideration patient care algorithms and the patient care needs specific to each clinical area. The group was then able to agree on a blended approach incorporating nursing, transport and physical therapy. Additionally, a budget was established that included funds to have staff attend roll-out committee meetings to ensure proper implementation and sustainability.

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