EQUIPMENT SELECTION-
DETERMINING AND PRIORITIZING EQUIPMENT NEEDS AND STAFF EDUCATION

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DISCLOSURE

- Neither Sandra or Tucker have any connections or financial affiliations with any of the equipment manufacturers which may be pictured on any of these slides. They are strictly pictured for demonstration of types of equipment available purposes only.

OBJECTIVES

- Understand how to conduct an assessment of SPHM needs
  - Obtain injury data
  - Identify high risk areas
  - Determine types and amounts of equipment needed in all areas where lifting, transferring, repositioning and mobilizing occurs
- Recognize the types of equipment available for use in hospitals to decrease or eliminate manual mobilization
- Understand equipment planning considerations
- Learn how to address the mobility needs of special patient populations

ASSESSING FOR SPHM NEEDS

- Collect and review injury data related to patient handling and mobility

- Determine high risk areas and tasks

- Identify high-risk patient handling activities based upon clinical setting (i.e. ICU's, OB, OR, ER, Acute Medical, Outpatient, Clinics etc.)

- Conduct inventory of existing patient handling equipment for all areas

- Perform Ergonomic Assessment of each unit

- Speak with staff regarding their patient handling concerns

EQUIPMENT

- Availability of appropriate amounts and types of accessible, well-maintained SPHM Equipment is _central_ to having a well functioning program

- **Without appropriate amounts and types of equipment you can't have a program!**

PLANNING CONSIDERATIONS

- Equipment Applications

- Approximate Size

- Clearance Recommendations

- Clearance Considerations

- Number Recommended per Clinical Unit/Area

- Storage Locations

- General Design Considerations

- Additional System/Support Considerations

SELECTION

- Involve
  - Front-Line Staff/Direct Care Workers (KEY!)
  - Additional Departments/Areas
    - Clinical Education
    - Fall Prevention SME
    - Skin Care/Pressure Injury SME
    - Biomedical/Clinical Engineering
    - Facilities/Engineering
    - Materials Management/Supply Chain
- Consider Equipment/Vendor Fairs
- Consider Equipment Trials
- Standardize When Possible

OVERHEAD LIFTS
CEILING MOUNTED, WALL-MOUNTED, FREE STANDING

- Seated & Lateral Transfers/Ambulation/ Limb Support/Repositioning in Bed/Toileting/Weighing Patients
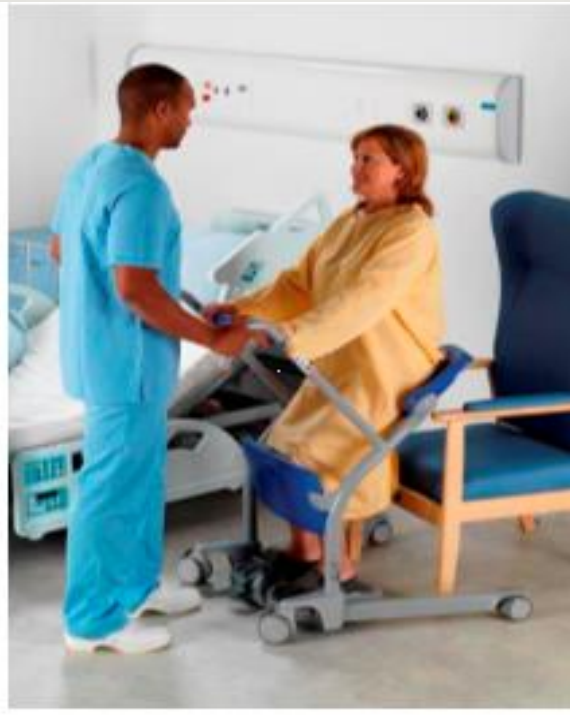- X-Y (Full-Room) or Straight-line Configuration

FLOOR-BASED LIFTS
SIT-TO-STAND, STAND AID, FULL BODY LIFTS

GAIT TRAINING SLINGS
OVERHEAD AND FLOOR-BASED LIFTS, SIT-TO-STAND LIFT WITH AMBULATION CAPABILITY

TRANSFER AIDS/POSITIONING DEVICES

FRICTION REDUCING DEVICES, AIR-ASSISTED LIFTING DEVICES, AIR-ASSISTED LATERAL TRANSFER AND POSITIONING DEVICES, STRETCHER CHAIR

TRANSPORT ASSISTIVE DEVICES AND POWER ADD-ONS

- Motorized Beds/Stretchers, Battery-powered Bed Pushers, Battery-powered Wheelchair Pushers, Stretcher Chairs

ERGONOMIC BATHING, SHOWERING, AND HYGIENE ASSISTIVE DEVICES

EMERGENCY EVACUATION/VEHICLE EXTRACTION

HEIGHT-ADJUSTABLE
POWERED EXAM TABLE

SPECIAL PATIENT POPULATIONS

- Bariatric Patients

- Patients with Disabilities

- Pediatric Patients

- Patients with Acute Psychiatric Conditions

PERSONS OF SIZE/BARIATRIC PATIENTS

- Overhead Lifts/Slings

- Motorized rolling equipment

- Expanded capacity equipment, beds, exam tables, stretchers, wheelchairs, toilets, commodes, floor lifts

- Room design

- Room assignment/placement

PATIENTS WITH DISABILITIES
TEMPORARY OR PERMANENT

- Remove barriers, improve access and facilitate independence

- Treatment areas and patient rooms designed free from physical and architectural barriers

- Adequate room to enter, exit and move about in the space as needed in wheelchair and accompanied by visitor/parent/companion and/or additional equipment

- Install accessible equipment such as power/height adjustable exam tables, ceiling lifts and portable assistive devices
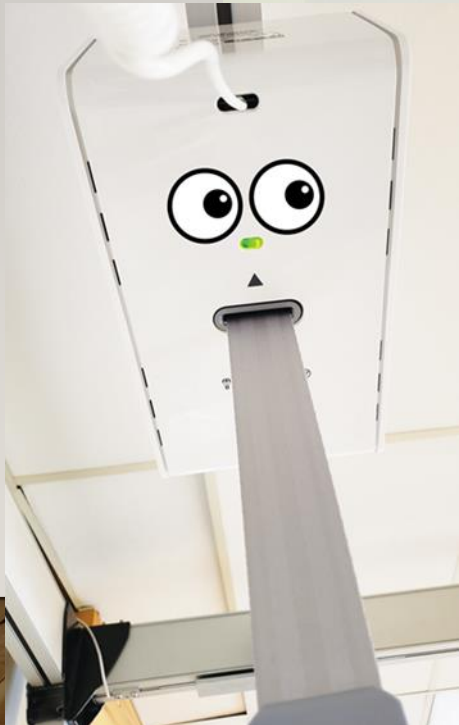
PEDIATRIC PATIENTS

- Remove barriers, improve access and facilitate independence

- Treatment areas and patient rooms designed free from physical and architectural barriers

- Adequate room to enter, exit and move about in the space as needed in wheelchair and accompanied by visitor/parent/companion and/or additional equipment

- Install accessible equipment such as power/height adjustable exam tables, ceiling lifts and portable assistive devices

PEDIATRIC PATIENTS

- Can be intimidating to both parents/guardians and patients
- Make it fun!
- May need to size down slings and equipment
- Plan equipment use in advance
  - Clear paths for transfers
  - Proper sizing of slings
  - Discussion with parents/guardians

PATIENTS WITH PSYCHIATRIC CONDITIONS

ADDITIONAL CONSIDERATIONS

- Sling Management
  - Laundered vs Disposable
  - Inventory, Storage, Par Levels
- Repair/Maintenance
- "Who To Call For What"
- Quick Reference Instruction Cards

CASE STUDY

- 130 kg/287 lb patient admitted from the Cardiac OR requiring frequent interventions to maintain hemodynamic stability. At 6 p.m. that day, the patient was ready to get a chest x-ray. *How might staff position the patient so that they can place the x-ray cassette underneath?*

CASE STUDY

- A male patient is scheduled to be seen in the outpatient cerebral palsy clinic. The patient arrives in a wheelchair. The exam table is fixed height and does not adjust up or down. *How might staff assist the patient from his wheelchair to the fixed height exam table? Is there another option that the clinic could use to facilitate the patient transferring from his wheelchair to an exam table?*

SUMMARY

- Appropriate amounts and types of equipment are key to the success of any safe patient handling program
- Ensure:
  - Front-line/direct care staff are involved in selection
  - Equipment is easily accessible
  - Equipment provided matches tasks performed
  - Systems are established to facilitate use and guarantee availability
  - High-risk areas are identified and prioritized

QUESTIONS