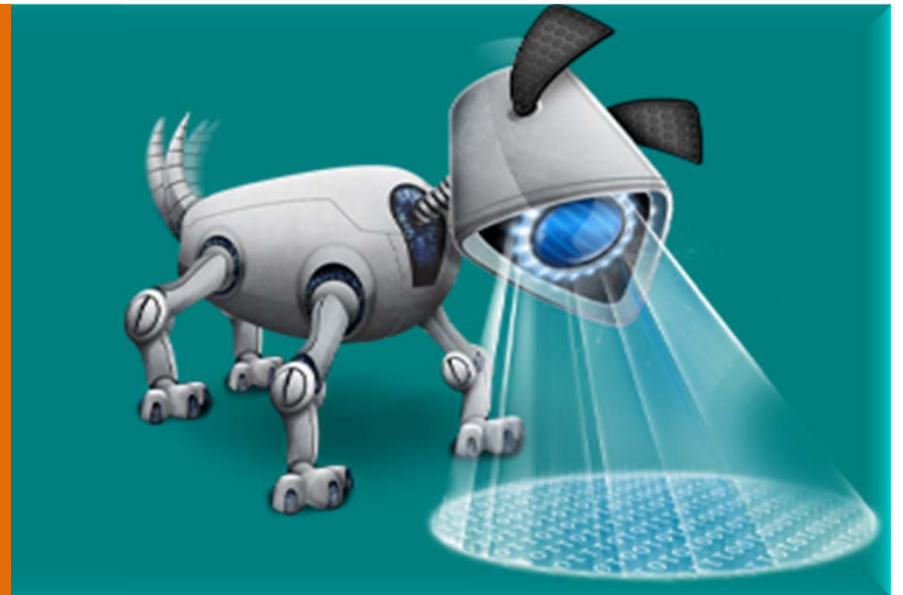


A DATA HOUND CHALLENGE

Evaluating Your Safe Patient Handling Program



Laurette R Wright, RN, MPH, COHN-S
Challenging the Boundaries
21-23 March 2012
Aotea Centre, Auckland NZ

OUTLINE

- **Setting the Scene – WHY Evaluate?**
 - SPH Program Goals
- **Types of Evaluations**
 - Outcome vs Process
- **Choosing Metrics for Evaluation**
 - Lagging vs Leading Indicators
- **Evaluation Tools**
- **Take Home Assignment**

STRONGEST LEVEL OF EVIDENCE

Multi-factorial Interventions

Administrative – Foundation for success

- *Policy*
- *Patient Assessment/Algorithms*
- *Risk Assessment*
- *Job Rotation*

Engineering – Tools to reduce risk

- *Various Equipment/Devices*
- *Environmental Design/Layout*

Work Practice – Behavior Change

- *Staff Competency*
- *Peer Leaders*

SUCCESS

How do you define success in your current
SPH program?



GROUP ACTIVITY

Your facility has applied for a certification/accreditation program (e.g. Magnet, JCAHO) and you have been informed that they will be evaluating your patient handling program. They indicate that they will be looking at records, observing activities and talking with staff on the units as part of their visit.

↵ How do you
prepare for
the visit?

↵ What metrics
will you
ensure are
available for
review?

WHY EVALUATE?

Healthcare Provider Challenges

- Improving Patient Safety
- Improving Clinical Outcomes through Error Reduction and Process Automation
- Improving Communications and Trust between Physicians and Hospitals
- Reduction in costs of healthcare
- Making Hospitals more Operationally Efficient
- Strategies for Curbing Hospital Acquired Conditions
- Incorporating Technology into Medicine

WHY EVALUATE?

Bureau of Labor Statistics 2009:
OCCUPATIONAL INJURIES AND ILLNESSES
REQUIRING DAYS AWAY FROM WORK INVOLVING MSD

Rank	Occupation
#1	Nursing Aides, Orderlies, and Attendants (25,160)
#2	Laborers and Freight – Stock and Material Movers (23,350)
#3	Janitors & Cleaners, except maids/housekeeping (15,920)
#4	Truck Drivers – Heavy and Tractor-Trailer (13,040)
#5	Truck Drivers – Light or Delivery Services (10,500)
#6	Registered Nurses (10,480)
#7	Retail Salespersons (8,200)
#8	Production Workers – all other (8,180)
#9	Stock clerks and order fillers (8,000)
#10	Maintenance and repair workers, general (6,270)
	<i>(BLS data, 2009 www.bls.gov/news.release/pdf/osh2.pdf)</i>

WHY EVALUATE?

“It is important to recognize that handling patients is a major component of many clinical tasks and should be subject to the same high standards and scrutiny as all clinical procedures.”

Dr. Sue Hignett
Evidence-based patient handling: systematic review
Nursing Standard, vol17, no33, 2003

WHY EVALUATE?



Make changes or improvement



Provide justification for new or on-going support



Provide staff feedback



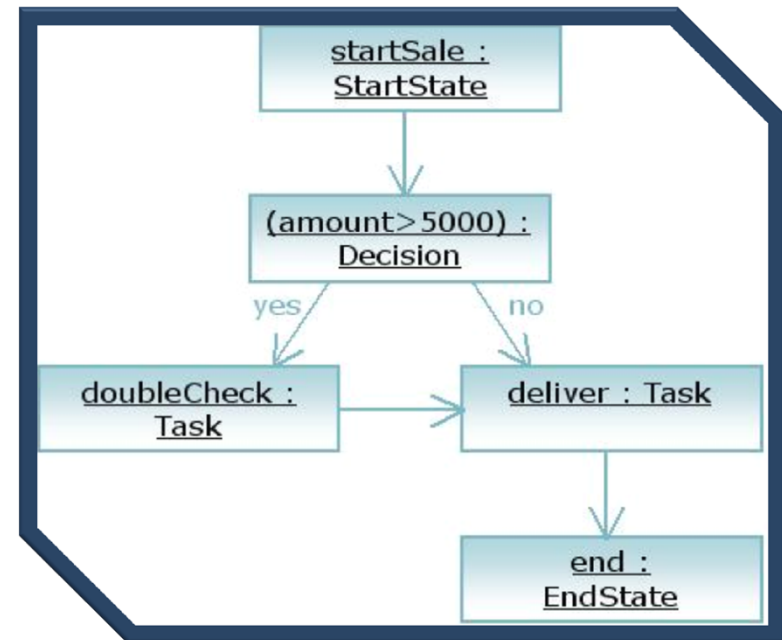
Substantiate program for others who are interested in implementing a SPH program

OUTCOME vs PROCESS EVALUATION



Outcome

Process



Safe Patient Handling Program



TYPES OF METRICS

LAGGING

(Reactive)

- Measures what has already happened - historical
- No direct correlation to daily activities
- “Hard numbers” – fact based, verifiable
- Lack of ability to directly influence or control

LEADING

(Proactive)

- Insight as to what may happen in the future
- Direct correlation to work activities
- Easy to influence/control

EXAMPLES:

LAGGING Metrics

- Injury and severity rate
- Workers comp \$\$\$\$
- First Aid cases
- Staff Turnover
- Patient fall rates related to patient handling
- Pressure Ulcers Incidence
- Cost of equipment to cost of injuries ratio

LEADING Metrics

- % employees trained
- Physical Symptom Surveys
- Ergonomics risk assessment
- Satisfaction Surveys
- Floor lifts per patient unit
- % units with peer leaders
- Par Levels

GET HELP – ALL STAKEHOLDERS



STAFF- INDICATORS

Staff Satisfaction

- Job Satisfaction
- Pain/Discomfort



Staff Acceptance

- # of Peer Leaders
- % usage of Equipment
- Satisfaction



EQUIPMENT - INDICATORS

- *Usage*

- Equipment use survey
- Equipment counters
- # vendor visits
- # days equipment broken/# times maintenance required

- *Procurement*

- # equipment obtained relative to identified need
- Available equipment per unit/bed/patient

SPH POLICY - INDICATORS

of right-of-refusals (staff)

injuries from misuse/non-use

warnings, infractions, retraining due to non-adherence

Reasons for non-adherence



ADDITIONAL OTHER - INDICATORS

- # of committee meeting cancellations
- # of management rounds
- # staff trained, # sessions held
- Training effectiveness
- # patient refusal
- Patient perception of comfort & safety



SUCCESS

How do you define success in your current
SPH program?



EVALUATION TOOLS

- **Safe Patient Handling in Washington State**
[Http://www.washingtonsafepatienthandling.org/resources.html](http://www.washingtonsafepatienthandling.org/resources.html)
- **Occupational Health & Safety Agency for Healthcare in BC**
– Ceiling Lift Program Guide
- **Mager and Pipe – Performance Analysis Flow Diagram**
<http://jonesfam.wetpaint.com/page/Performance+Analysis+Flow+Diagram>
- **Bureau of Labor Statistics (BLS)**
<http://data.bls.gov/iirc/>
- **Incident Rate Calculator and Comparison Tool**

EVALUATION TOOLS (cont)

- **Safety Huddles**

http://www.visn8.va.gov/PatientSafetyCenter/safePtHandling/safetyhuddle_021110.pdf

- **VISN 8 Patient Safety Center of Inquiry, Tampa (VA)**

<http://www.visn8.va.gov/patientsafetycenter/>

- Patient Care Ergonomics Resource Guide,
 - Nursing Satisfaction Survey
 - Patient Care Equipment Use Survey

- **Safety & Health Assessment & Research for Prevention (SHARP) in Washington State**

<http://www.lni.wa.gov/safety/research/>

EVALUATION TOOLS (cont)

- **ANA Handle with Care Recognition Program – Application Manual**

<http://nursingworld.org/MainMenuCategories/OccupationalandEnvironmental/occupationalhealth/handlewithcare/Recognition-Program/Application/manual.aspx>

TAKE HOME ASSIGNMENT

What are the three most important activities of the SPH Program you want to evaluate?

- 1.
- 2.
- 3.

List at least 5 different metrics to evaluate these activities:

- 1.
- 2.
- 3.
- 4.
- 5.

LESSONS LEARNED



- Understand the business from senior management's perspective
- Include "leading" and "lagging" indicators in your evaluation reports
- Prioritize – Know capital expense policy and planning cycle
- Know how KPIs are presented at your facility – key measures of success

LESSONS LEARNED



- Define all Gaps
- Clarify the costs
- Look for Causes, Enablers, and Obstacles
- Focus on Facts and Results
- Get assistance from ALL stakeholders
- Resistance is often a sign of an issue of clarity
- Fear retards the flow of information

Building Commitment to & Measuring the Benefits of SPH Programs

Culture – The Way We
Work Around Here



CLOSING THOUGHTS

“Pit a good employee against a bad system and the system will win most every time.

Geary Rummler, 1983

QUESTIONS

