We Have Your Back
A Worker Safety Collaborative
An Initiative of the Florida Hospital Association

WORKER SAFETY WEDNESDAY WEBINAR SERIES:
PRACTICAL SOLUTIONS TO MOBILIZING THE BARIATRIC POPULATION
THURSDAY, DECEMBER 14, 2017
WHYB: Promoting workforce safety as an organizational priority in our hospitals

FOCUS AREAS:
- Safe patient lifting, handling and mobility
- Sharps injury and blood exposure prevention
- Workplace violence
- Finding solutions to reduce work stress, fatigue and burnout
Special Thanks to Our Sponsors!

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MANAGER, INJURY PREVENTION & LIFT TEAM
TAMPA GENERAL HOSPITAL
Objectives

- Review rate of obesity in the USA and how this affects healthcare workers.
- Describe solutions to mobilize bariatric patients utilizing safe patient handling equipment for various tasks.
- Discuss gaps in technology for the safe mobility of the bariatric patients.

Obesity Trends* Among U.S. Adults
BRFSS, 1990, 2000, 2010
(*BMI ≥30, or about 30 lbs. overweight for 5’4” person)

- 1990: Most States 10-14% obesity rate
- 2000: Most States 20-24%
- 2010: Most states >25%, many >30%

(data from cdc: https://www.cdc.gov/obesity/data/prevalence-maps.html)
2016:
- >1/3 adult Americans are obese (BMI > 30)
- All States > 20% obesity rate
- Most at 30-35% obesity rate
- 5 States > 35%

Rate of obesity in the USA continues to rise
(data from cdc: https://www.cdc.gov/obesity/data/prevalence-maps.html)

How does this affect healthcare?
- Special Equipment (beds, commodes, recliners, gowns, BP cuffs, bedpans, etc.)
- Need more staff and time to care for these patients
- Staff injuries ↑
- Patients not being mobilized (staff fear injury, equipment issues, staffing etc.)
- Increased patient complications
- Increased length of stay
- Poor patient satisfaction
- Discharge Challenges
- ↑ COST
Bariatric safe patient handling program

- Create a bariatric task force/committee to evaluate processes, identify equipment needs, evaluate equipment, develop admission protocol and policies.
- Develop staff training programs for caring of the bariatric patients (equipment and bariatric sensitivity)
- Trained leader on each unit to act as a resource for staff
- Consider a lift team program

Create resources for staff:

- Webpages, videos, order sets, etc.
Bariatric equipment

- Patient care items: beds, stretchers, gowns, BP cuff, bedpans, recliners, slippers, patient lifting equipment, etc.

- Patient lifting equipment:
  - Dependent lifts: ceiling lifts, floor lifts
  - Sit to stand devices
  - Lateral transfer devices
  - Vehicle lifts
  - Bariatric slings
  - Walking devices

Turning

- Ceiling lift or floor lift with:
  - Deflated air assisted matt
  - Full length repo sheet
  - Butterfly slings
Tuning

- Bed in Trendelenburg (if not contraindicated)
- Air assisted technology the best solution
- Full length repo slings with ceiling or floor lift
- Slide sheets: can’t stay under patients (last resort)

Boosting up in bed
Transfers in/out of bed

- Bariatric floor lift and/or ceiling lifts
- Double XL transfer slings

Lateral transfers

- Air assisted technology best option
- Can use full length repo sling with ceiling lift
- Rollboards
- Slide boards or slide sheets
Toileting

- **In bed:**
  - Bariatric bedpan & sling to raise bottom off bed
  - Use bariatric butterfly, bariatric limb sling or transfer sling (legs long and shoulders long)

- **Bedside commodes:**
  - Wide enough and NOT too low to the ground.
  - Drop arm helpful
  - Lift seat available up to 600 pounds

Bariatric care

- **Inserting catheter:**
  - Use a transfer sling and raise only legs (do not cross legs)
  - Or use two limb holding slings in upper thighs (one on each leg)
  - Raise floor or ceiling lift and it will abduct the legs

- **Limb holding:**
  - Use limb holding slings

- **Panus cleaning:**
  - Panus holding slings or use a bed sheet
Stand pivot transfers

- Sit to stand device (not many bariatric options, $$, foot and knee plates too narrow)
- ? Bariatric Non motorized Standing aid - use sit to stand device without the sling so they can pull themselves up.
- Bariatric gait belts - for Stand by assist and balance, not for lifting!
- If sitting edge of bed: may need foot rest to avoid falls off edge of bed (hips need to be leveled with knees)

Walking

- Ceiling lifts with walking sling
- Floor lift with walking bars
- Sit to stand device with footplate removed
- Barimat for standing and walking
**Beds**

- Motorized
- Easy to expand and collapse
- Easy to use
- Egress from foot end for early mobility due to difficulties for some to move from supine to sitting edge of bed.
- If rental: assure timely delivery

**Tilt beds**

- To maximize function (several tilt sessions/day)
- Patient must be motivated
- D/C goal is to stand and pivot for transfer to nursing home or home.
- **Great success at TGH:**
  - 600 pound woman who had not ambulated in 3 years, used tilt bed and she was able to walk 100 feet after 99 days was discharged home.
  - (article published in the International Journal of SPHM Sept 2017)
Gaps in technology

- Sit to stand devices
- Standing aids
- Recliners
- Vehicle lifts: many ones on the market do not extract patients well due to their design. One solution is to have a ceiling lift at one entrance.

Bariatric care

- Having the right equipment to handle the bariatric population not only reduces injuries, but it also:
  - Reduces length of stay
  - Increases patient satisfaction
  - Promotes skin integrity
  - Enhances patient safety
  - Decreases pain
- Develop a task force or committee if needed to develop policies & procedures, evaluate equipment needs and conduct trials etc.
- It takes time and persistence, but is well worth the effort.
- Bariatric patients are all unique and have various barriers (pain, anxiety, pre existing conditions, discharge plans, etc.) but if you have a strong team working together, good P & P it is a win-win for staff and patients.
Questions?

More information or questions?
Contact Manon via e-mail:
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A Look Ahead...

- Planning for 2018
- Focus on WHYB and the Culture of Safety
- Schedule of events coming soon!
- Your input is welcome!
Webinar Evaluation Survey and Continuing Nursing Education

- Eligibility for Nursing CEU requires submission of an evaluation survey for each participant requesting continuing education: [https://www.surveymonkey.com/r/9WZBDY7](https://www.surveymonkey.com/r/9WZBDY7)
- Share this link with all of your participants if viewing today’s webinar as a group
- Be sure to include your contact information and Florida nursing license number
- FHA will report 1.0 credit hour to CE Broker and a certificate will be sent via e-mail
- We would appreciate your feedback even if you are not applying for CEUs!!
- Web participants can stay logged in as the webinar closes to be redirected to the online survey (the link will also be provided in a follow up email)

THANK YOU!
WHYB Questions and Information –
407-841-6230
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