The adoption of a new device for
turning, boosting and lateral transfer in critically ill patients

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• BACKGROUND •
Over the past decade increasingly more focus is being placed on worker injury and safe patient handling in acute care settings. As a result, ceiling lifts have become more widely implemented in hospitals. While data support that the use of these devices is safe for patients and can reduce staff injury, numerous studies have reported a lack of compliance among health care workers in using ceiling lifts for all patient handling. This can be referred to as a lack of full adoption. Research to date supports that most health care workers are only partial adopters of ceiling lift devices.

• PURPOSE •
To measure the proportion of full adopters to partial adopters with the use of a new device for turning, boosting in bed, and lateral patient transfer. The device uses a low friction surface and air-assisted technology to decrease staff exertion repositioning moving patients. While the device can be used without the air, the full benefits for reduced healthcare worker exertion are realized when the blower is turned on.

• METHODS •
The new patient repositioning device was implemented in two intensive care units and used for turning, boosting in bed, and lateral patient transfer.

• RESULTS •
Staff were surveyed on the frequency of blower use while repositioning patients in bed. The percent of full adopters was 93% (39/42) and the percent of partial adopters was 7% (3/42). Overall ease-of-use as compared to standard practice was rated highly at 4.68 out of 5.

• CONCLUSIONS •
Critical care nurses are required to reposition patients in bed as often as 6-10 times per shift. Repositioning is a frequent repetitive activity that requires high exertion, awkward posture, and can lead to staff injury over time. Compliance with the intended use of this device was high as the vast majority of staff were full adopters, likely reducing the staff risk for injury.