

CINDRR Circular

Center of Innovation on Disability and Rehabilitation Research

VA Health Services Research & Development

North Florida/South Georgia Veterans Health System, Gainesville FL James A. Haley Veterans' Hospital, Tampa FL

July 2017

CINDRR in the News

18th Annual Safe Patient Handling and Mobility Conference, April 10-14, 2017



Conference attendees working with a facilitator during a hands-on training class. They are utilizing a bed that can lift the patient to a standing position and then using a floorbased lift to transfer them from the bed safety without manual lifting. Reaching for Excellence in Safe Patient Handling and Mobility

Injuries due to lifting, transferring, and providing physical assistance to patients are the leading causes of musculoskeletal injuries among healthcare workers, particularly nurses, nursing assistants, and first responders. These injuries result in lost work days, pain, suffering, loss of these workers to the workforce, and a significant resource burden to the industry. The success of ergonomics-based Safe Patient Handling and Mobility (SPHM) programs, which have evolved since the mid-1990s, is a function of the capabilities of the patient, the patient care task being performed, access to the appropriate patient handling equipment, the physical environment, and the organizational context (e.g., culture of safety).

SPHM is inextricably linked to patient safety through a common vision of a culture of safety. SPHM decreases the incidence and severity of musculoskeletal injuries to direct care providers caused by providing mobility assistance to patients. SPHM safely improves patient mobility, improving function and decreasing the risk of complications associated with immobility in hospitalized patients such as pneumonia, thrombophlebitis, constipation, urinary stasis, and delirium. SPHM Programs have been shown to provide a return on investment in 3 to 5 years from the initial capital outlay for patient handling equipment, by decreasing worker compensation costs and lost work days.

The 18th Annual Safe Patient and Handling and Mobility Conference: Reaching for Excellence in Safe Patient Handling and Mobility--Implementing Culture Change with Special Emphasis on Falls, Pressure Ulcers and Mobility was held April 10-14, 2017. The conference is sponsored by the Tampa VA Research and Education

Foundation, Inc. (TVAREF), a non-profit organization established to advance research and education missions of the Department of Veterans Affairs at The James A. Haley VA Healthcare System and other VA entities in the region. There were 350 attendees including nurses, physical therapists,

CINDRR in the News

Symposium on Advanced Wound Care (SAWC), April 5-9, 2017

The Symposium on Advanced Wound Care (SAWC) Conference is a national conference with international attendees from every medical profession. At this year's Spring conference in San Diego, CA, Linda Cowan, PhD, ARNP, FNP-BC, CWS, seated center in photo below, helped organize a VA specific Networking Meeting. Attendees at the Networking Meeting are pictured below. The Association for the Advancement of Wound Care (AAWC) hopes to make the VA Networking Meeting a regular event at the wound care conference. The SAWC Fall conference is held October 20-22, 2017, in Las Vegas, NV and next year's Spring conference will be held April 25-29, 2018, in Charlotte, NC.

The 2017 conference was especially memorable for Dr. Cowan, since she received the "Distinguished Member Award" during the SAWC.

Dr. Cowan was also recognized for her participation on the AAWC Board of Directors (Research Board Member) and as Co-Chair of the Research Task Force from 2013-2017, with the receipt of a plaque presented at the AAWC membership meeting. Dr. Cowan stepped down from the AAWC Board of Directors to accept the position of Co-Chair with Dr. Aimee Garcia, Houston VA, to lead the International Consolidated Pressure Ulcer Guideline (ICPUG) Task Force.

Dr. Cowan has recently relocated to the TAMPA CINDRR site to become the Associate Chief of Nursing Service/Research (ACNSR) for CINDRR at the James A. Haley Veterans' Hospital in Tampa, Florida. The position will be 50% research (continuing her wound, ostomy, and pressure ulcer prevention research) and 50% working with Dr. Tatjana Bulat focusing on the Patient Safety Center of Inquiry (PSCI). The Tampa PSCI is well known for their work in safe patient handling and mobility (SPHM), especially falls and fall injury prevention, and plans to add pressure injury prevention to the portfolio.



Attendees of the VA Networking Meeting, 2017 SAWC Conference.

CINDRR New Research, Gainesville Nursing Unit Design and Hospital Falls, Ronald Shorr, MD, PI

Patient falls are the most common adverse events reported in hospitals. Each year, roughly one million patient falls occur in United States (US) hospitals, resulting in over 250,000 injuries and 11,000 deaths. Patient falls cost hospitals due to increased lengths of stay, health care expenditures, and litigation. As of March 2015, the Department of Veterans Affairs (VA) National Center for Patient Safety (NCPS) Patient Safety Information System, a confidential and non-punitive reporting system, showed that falls were the most frequently reported category of patient harm across the VA system of care.

Although it is well understood that the physical hospital environment contributes to nearly 40% of severe or fatal hospital falls, there are significant gaps in our knowledge about the relationship between inpatient unit design and fall rates. The few studies that have examined unit design have been conducted in a single hospital or a small number of inpatient units, limiting generalizability. Furthermore, there have been no studies focused on unit design and falls in VA medical centers (VAMCs).

Nursing Unit Design and Hospital Falls, a recently approved HSR&D Merit project, uses a mixed methods framework to investigate factors associated with falls in 12 VA medical/ surgical units in Malcom Randall VAMC, Lake City VAH, and James A. Haley VAH. The project uses a qualitative approach to investigate staff and management perceptions and experience with unit design factors that contribute to patient falls. In the quantitative portion of the project, study, data analysis will identify 50 units that are high (25) and low (25) variants in terms of risk-



Ronald Shorr, MD

adjusted fall rates. Using digitized floor plans and data from an environmental inventory of these units, the team will use innovative spatial network analyses to measure several design factors that characterize the units. Using both qualitative and quantitative data and a facility survey will highlight previously uninvestigated low fall rate unit characteristics.

Recent CINDRR Publications and Presentations

Latricia Allen, DPM, MPH, FACFOAM; Gail Powell-Cope, PhD, ARNP, FAAN; Alfred Mbah, PhD; Tatjana Bulat, MD, CMD; and Eni Njoh, MPH (2017). A Retrospective Review of Adverse Events Related to Diabetic Foot Ulcers, Ostomy Wound Management 2017;63(6):30. <u>http://www.o-wm.com/article/retrospective-review-adverse-events-related-diabetic-foot-ulcers</u>

Graf, R., LeLaurin, J., Schmitzberger, M., Freytes, I.M., Orozco, T., Dang, S., & Uphold, C.R. (2017). The Stroke Caregiving Trajectory in Relation to Caregiver Depressive Symptoms, Burden, and Intervention Outcomes, *Topics in Stroke Rehabilitation*. <u>http://dx.doi.org/10.1080/10749357.2017.1338371</u>

Shahnaz Sultan, Melissa R Partin, Phalgoon Shah, Jennifer LeLaurin, Ivette Magaly Freytes, Chandylen LNightingale, Susan F Fesperman, Barbara A Curbow, and Rebecca J Beyth, (2017). Barriers and Facilitators Associated with Colonoscopy Completion in Individuals with Multiple Chronic Conditions: A Qualitative Study, Patient Preference and Adherence. 2017:11 985-994.

Sergio Romero, Mi Jung Lee, Ivana Simic, Charles Levy, and Jon Sanford (2017). Development and Validation of a Remote Home Safety Protocol, *Journal of Disability and Rehabilitation: Assistive Technology*. Pages 1-7 | Published online: 22 Mar 2017. http://www.tandfonline.com/doi/full/10.1080/17483107.2017.1300345

Dillahunt-Aspillaga C, Pugh MJ, Cotner BA, Silva MA, Haskin A, Tang X, Saylors ME, Nakase- Richardson R. (2017). Employment Stability in Veterans and Service Members with Traumatic Brain Injury: A VA Traumatic Brain Injury Model Systems Study, *Archives of Physical Medicine and Rehabilitation*, doi: 10.1016/ j.apmr.2017.05.012.

Cotner, B. A., Ottomanelli, L., O'Connor, D. R., & Trainor, J. T. (2017). Strategies to Address Provider-identified Barriers and Facilitators to Implementing a Supported Employment Program in Spinal Cord Injury Centers. *Disability and Rehabilitation*. http://dx.doi.org/10.1080/09638288.2017.1294209

occupational therapists, LPNs, engineers, and other specialists in the areas of safe patient handling and falls. The latest technologies were exhibited in the hotel's 30,000 sq. ft. event center. Over 70 vendors showcased technology and cutting edge solutions to provide the best patient care and the safest options for clinicians from all disciplines.

The main program opened with a keynote presentation by Pam Cipriano, PhD, RN, FAAN, President of the American Nurses Association (ANA), who related SPHM into the framework of the ANA's 2017 Year of the Healthy Nurse Initiative. Educational sessions included plenary, concurrent, and hands-on sessions. There was a full-day offering of pre-conferences and post conferences but yet, the end of the 10 hour days still found attendees working on solutions to questions posed during the meeting.



From left: Pam Cipriano, PhD, RN, NEA-BC, FAAN, president of the American Nurses Association, and Gail Powell-Cope, PhD, ARNP, FAAN, CINDRR

Dr. Powell-Cope notes that "the attendees, faculty, exhibitors, and staff give the conference an "electricity" (a description shared by many outside observers of our group at the venue) that is hard to find elsewhere. This is a very specialized group of people who are interested in learning about issues and solutions and who come back, year after year, to share their successes (and failures), and to give and get answers to questions that arise throughout the average day in the wide world of healthcare. They are there to support each other and strive toward a goal of universal safe patient handling and mobility, making healthcare safer for healthcare workers and for patients."

2017 sponsors included the American Nurses Association, the Association of Safe Patient Handling Professionals (ASPHP); the International Journal of Safe Patient Handling and Mobility; AON; and the Centers for Disease Control/National Institute for Occupational Safety and Health (NIOSH). The sponsors offer not only financial support to offset the costs of the conference, but also help with advertising and marketing the conference throughout the year and sponsoring faculty.