

Washington Hospital Services Workers Compensation Program Safe Patient Handling Review Check List

Instructions: Use the following checklist to rate and score your Zero Lift or Safe Patient Handling Program. If your hospital is beginning a Program, complete this form every quarter for the first year. At a minimum, complete the evaluation annually. The evaluation is divided into two parts. Part I is this written assessment of the program. Part II is the quality improvement plan for the program, including goal setting and program changes.

Part I consists of “best practice” questions for a Zero Lift or Safe Patient Handling annual program evaluation. Each “best practice” has a total value of 3.3 points. A perfect score is 100 points. This tool can be used to measure process improvement from year to year. Recommended materials and resources needed for the evaluation include the following: (1) copy of the Safe Patient Handling or Zero Lift Policy and Procedures (2) employee and patient injury data relating to patient handling activities (3) employee training materials and records (4) physical inspection of the facility (5) “walk around” interviews with patient care staff. Key or essential “best practices” are highlighted in gray.

Part II of the evaluation is a structured review of the results of this evaluation tool plus a goal setting meeting with hospital administration or hospital leadership. If you need assistance with this two-part evaluation in any way, call your Loss Control Coordinator. For more resources, **see the worksheet, “Developing a Safe Patient Handling Action Plan”**.

Best Practice or Review Item	Tool or Review Question	Measurement	Evaluator Comments	Points (3.3 points each item)
Written policies & procedures review by committee	Committee or task force reviews signed & dated copy	Policy fully implemented & available to all affected employees, all shifts?		
	Are policies hospital wide or only in some departments? Is this policy integrated with others?	Review for consistency and application to all shifts and departments. Program must be in place by Dec 1, 2007 .		
	Does policy require conducting patient handling assessments for safe movement?	Assessment form or procedure in policy		
	Does the policy include new and mandatory “right of refusal” and construction/ architectural review	Review RCW and language of SB 1672		
	Safe Patient Handling	Committee must be formed		

Item	Tool	Measure	Comments	Points
	Committee has at least 50% of its members who are front line non-managerial employees that provide direct care to patients.	by Feb 1, 2007 . Membership list and minutes of meetings		
	Any incidents, practices, new equipment, changes (documented or undocumented) indicate program needs to be reviewed more often?	Review for procedures or equipment changes Review whenever an injury of patient or employee occurs due to patient handling or movement		
	Does the policy call for an annual performance evaluation to be provided to safe patient handling committee?	Copy of annual performance review.		
Employee & Patient Injury Data Review by committee	Quarterly Reports & Dashboards	Analyze number, severity, type of injury, etc, for trends		
Are employees reporting Injuries & incidents?	Review of loss report & procedures	Does Work Comp Program & Risk know of every injury?		
Supervisors Investigation Reports?	Review each report	Are reports completed & action taken?		
Root Cause Analysis completed for each patient handling injury?	Review Root Cause Analysis reports – one for each patient handling claim?	Are reports completed, action taken and reported to safety committee?		
Equipment Review (includes slings, batteries)	Check Inventory & repair logs	Adequate amount in use or on order? Any service/repair issues?		
Is there budgeting for new equipment?	Budget Review: Is needed equipment purchased or replaced?	Check line items identified for new & replacement equipment		
	Is there one readily available lift per acute care unit or 1 lift per 10 beds? Jan 30, 2010	Inventory of types and locations of equipment, compare with SHB1672 minimum standards.		
Is equipment	Inspect units (a) prior to	Can equipment fit through		

Item	Tool	Measure	Comments	Points
appropriate for space? Is there storage space for equipment?	purchase and (b) during "walk around".	doors, around corners, in assigned storage area?		
Does the equipment meet the current needs of patient care? (Bariatric, OB, ICU, pediatric, etc)	Review patient census and employee injury data	Are there any patient populations that are not safely served? Are employee/patient injuries indicating there is need for specialized equipment or slings?		
Review training effectiveness & outcomes	Training records	Compare number of trained/total staff with patient handling duties. Staff must be trained annually.		
	Conduct random interviews for competency in units	Can employees demonstrate competency?		
Does New Employee Orientation include ZL?	Training records and new hire lists	What is length of employment before training provided?		
Are competency results reviewed for future improvements?	Zero Lift or Safe Patient Handling Committee minutes	Are training outcomes documented?		
Is training done for new equipment? Are vendors providing training?	Purchasing department protocol (vendor support requirements) & training records	Can employees demonstrate competency before equipment is used on patients?		
Are all types of training analyzed for effectiveness?	If using only computer based training, are demonstrated competency checks being made?	Are training outcomes documented?		
Program effectiveness	Walk around + Interviews random staff and ZL team	Employee opinion of overall effectiveness		
Is practice consistent with written policy & procedures?	Walk around + Interviews random staff and ZL team	Construct simple chart for walk around & interview process		
Internal promotion?	Are there materials used	Are these items or any others		

