

Patient Bed Safety for RN/CP/PT



Objectives

- The learner will understand the importance of bed safety checks and falls.
- Outline the responsibility and accountability of each team member for the following:
 - Setting bed alarms
 - Bed safety reminders
 - Use of ticket to ride
 - Appropriate hand off

It's a "*Team Effort*"

- Accountability starts with anyone who gets the patient in and out of bed:
 - RN
 - CP
 - PT
 - Transporter

Stryker Bed



Zero the Bed Prior to New Admissions Arrival

- Clinical Partners are responsible for zeroing the bed
- Beds alarms will not work properly if bed is not zeroed first
- Do not zero the bed while a patient is in bed
- If the bed exit is armed, you must disarm it before the scale can be zeroed
- Press and hold the ZERO BUTTON
- A hold message will appear on the screen, then zeroing successful message

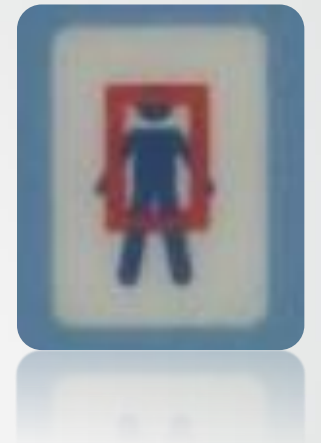


Bed Alarm Zone # 2



Press Zone until middle indicator button lights up, then press Arm to engage the alarm.

Bed Alarm Zone #2



- Zone #2 measures the location of the patient's center of gravity
- If the patient moves more than 6.5 inches to either side of the bed or 13 inches towards the head or foot, the alarm will sound
- **If bed is appropriately connected to the plug in the room**, alarm will also sound in the nurses' station – (*CPs - check bed cable connection daily*)
- RN and/or CP must respond immediately to all bed alarms
- CP/Clerk 5 to escalate to resource/supervisor if alarm continues to sound in nurses' station with no staff member response.

Fall Prevention –Team Responsibility

BED SAFETY CHECKS:

CP/Clerk 5 to conduct bed safety checks at least twice in a shift (in the beginning and if patient leaves the room via bed) and document on the Bed Check Audit Tool.

- Verify bed cable is plugged into the wall and press call light on the bed for confirmation that it rings in the nurses station. (CP/Clerk 5 should answer and document bed check on the Bed Check Audit Tool).
- Troubleshooting- CP/Clerk 5 - Call Biomed if cable is missing or broken for replacement and document on Bed Check Audit Tool.
- If after hours or weekends and Biomed is unavailable, call environmental services (EVS) for a new bed.
- CP - Tag old bed for repair.

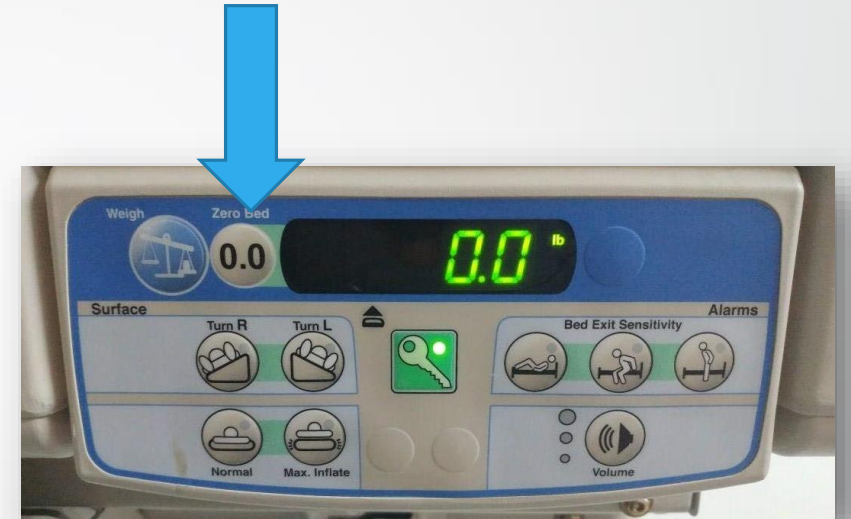
Bed Check Audit						
Date: _____ Shift: _____						
Room#	Call Bell Works?		Comments	Room#	Call Bell Works?	
	Yes	No			Yes	No
3201				3226		
3202				3227		
3203				3228		
3204				3229		
3205				3230		
3206				3231		
3207				3232		
3208				3233		
3209				3234		
3210				3235		
3211				3236		
3212				3237		
3213				3238		
3214				3239		



Hill Rom Versa Care Zeroing the Bed

Zero the bed by pressing the scale icon prior to activation.
(make sure the patient is NOT in the bed).

- Ensure common articles such as linens, pillows and all equipment remain on the bed.
- Press the enable control.
- Press and hold the Zero Control until 00.0 is shown.
(HOLD will be displayed until 00.0 is shown) and then release the control.
- **NOTE:** After releasing the control, the scale display will show 'CALC'. Do not touch the bed until the display stops flashing 'CALC' and shows 0.0.



Hill ROM Step by Step Instructions

Setting up the Alarm ON:

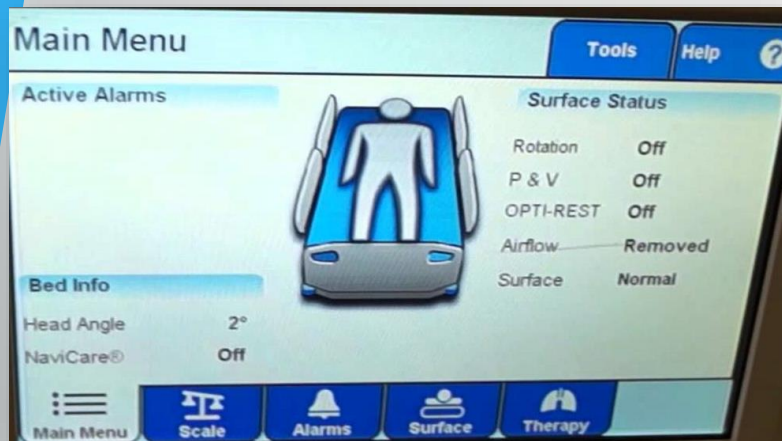
- Align the patient in the center of the bed using the hip locator
- Press the enable control until the indicator illuminates.
- Press the desired bed exit mode control. When the system beeps one time and the indicator stays on solid, the system is armed (the indicator flashes until the system is armed).



Hill Rom Versa –Sport Bed (Step Down Bed)

Zero the bed by accessing the **Main Menu** and pressing the **Scale** tab on the Graphical Caregiver Interface (GCI) and press **Accept**

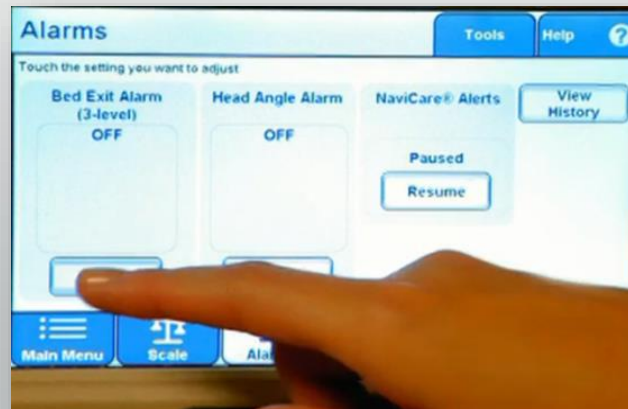
- Makes sure the patient is NOT in the bed.
- Ensure common articles such as linens, pillows, and equipment remains on the bed.



Hill Rom Versa –Sport Bed (Step Down Bed)

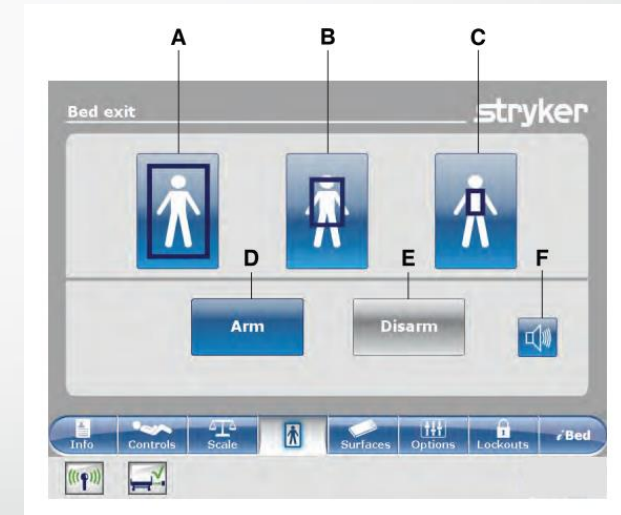
Setting Up The **Alarm ON:**

- Align the patient in the center of the bed using the hip locator.
- Press the **Scale** tab on the GCI and press **Accept**.
- Press **Weigh Patient** and press **Accept**.
- Press **Alarms** tab on the GCI in order to activate Bed Exit Alarm by pressing **Change**.
- Activate Head **Angle Alarm** by pressing the desired **On 30°** or **On 45°** option.



6 Hope Bed (Stryker Intouch)

- Zero the bed first if possible
- Tap the desired zone (Zone 2)
- Tap Arm



Patient Pick Up

**THE USE OF A STRETCHER IS THE EXPECTATION FOR
TRANSFER AT ALL TIMES**

BED TRANSFERS

- Increases risk for staff injury
- Causes disconnection of the bed cable
- If not reconnected patient is unable to call the nurses station

SPECIAL CIRCUMSTANCES for BED vs STRETCHER

- Ortho patient (Ex. Hip fracture)
- Complex spine cases (Ex. C1-C7 fracture – neuro patients)
- ICU patients
- Medically necessary (MD/RN assessment)
 - Being too busy to assist transporter/ total care patient, are not valid reasons to transport via bed

Patient Pick Up

REGISTERED NURSES

FYI....Transporters only have 20 minutes to move patients from one location to another.

- Prepare patient for transfer ahead of time
 - Have paperwork ready (Ex. Surgical consents, valuables to security, MRI paperwork, etc.)

TRANSPORTER

- Notify nurse of arrival prior to entering patients room. **If RN does not arrive within 2 minutes, escalate to supervisor/resource RN**
- All patient transport must have a signed ticket to ride. (Obtain RN signature in room)
- Verify two patient identifiers prior to placing the patient on the stretcher (Name and Date of Birth)
- Ask for assistance for patient transfer if necessary and never leave a patient alone during the transport process
 - This increases the risk of falls and possible injury

Transporter/RN Handoff

Patient Return:

- Place patient in room and verify bed cable is attached to the wall.
- Push call light on bed to confirm bed is plugged in and operating; this will also inform CP/Clerk 5 that patient has arrived.
- Meet RN in room to sign ticket to ride and together determine that bed is plugged in and call light is functional.
- If RN does not arrive within 2 minutes, escalate to supervisor/resource RN

TRANSPORT TICKET TO RIDE (TO)	
S	Date: _____ Time: _____ <input type="checkbox"/> RN Transport/face to face report <input type="checkbox"/> Report called
	B Code Status Stratified: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Undetermined (ED patients only)
A	Pain: <input type="checkbox"/> Yes <input type="checkbox"/> No Medicated: <input type="checkbox"/> Yes <input type="checkbox"/> No Time: _____
	Altered Mental Status: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Cardiac Monitor: <input type="checkbox"/> No <input type="checkbox"/> Yes; Box #: _____ Rhythm: _____
	Central tele notified of patient's destination: <input type="checkbox"/> Yes <input type="checkbox"/> No
	ID band has been verified with label and chart: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Isolation: <input type="checkbox"/> Standard <input type="checkbox"/> Airborne <input type="checkbox"/> Contact <input type="checkbox"/> Droplet
	Oxygen: <input type="checkbox"/> Yes <input type="checkbox"/> No Type: _____ Amount: _____
	Precautions/ activity order: _____ <input type="checkbox"/> Fall Precautions
R	Meds sent with patient: <input type="checkbox"/> Yes <input type="checkbox"/> No IV fluid type: _____ Rate: _____
	ID band has been verified with label and chart
	RN Name: _____ Ext.: _____ (print first & last name)
Transporter Name: _____	

Form #4311 Rev. 10/4/19

TRANSPORT TICKET TO RIDE (FROM)	
ID Band Verified with label and chart: <input type="checkbox"/> Yes	
Changes to Report: <input type="checkbox"/> No <input type="checkbox"/> Yes	Central Tele. Phone #'s
Central tele notified of patient's return: <input type="checkbox"/> No <input type="checkbox"/> Yes	Box 1 - 100ext: 66543
	Box 101 - 196ext: 66617
	Box 200 - 396ext: 57849
RN/Tech Name: _____	Ext: _____
RN/Tech Name: _____	Ext: _____
Transporter Name: _____	Receiving RN: _____
Transporter Name: _____	Receiving RN: _____
LABEL	

Rental Bed Reminder

ALL STRYKER BEDS can be used as a low airloss surface for patients at high risk for pressure ulcers.

- It is recommended to use the Isogel air pumps before renting low air loss beds. (Ex. Agiliti)

REMINDER:

- RN/CP/PT/OT - Avoid positioning level of mattress higher than the side rails if using Agiliti rental low air loss



We All Play A Role In Patient Safety!

