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Use High-Definition Video Recordings & Slow-motion Clinical-skill Analysis to Identify Possible Patient-injury-risk(s) of Bed-to-Bath-Trolley Transfer Procedure

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Introduction

There is assumption that nurses and clinical supporting staff (CSS) have adequate knowledge and skills to prevent patient injuries associated with bedside patient care after basic training and work practice. Two incidents of patient-fall from bath trolleys occurred in Oct 2016 & January 2017 respectively. A CQI programme is launched to prevent further patient-injury.

Objectives

This CQI programme has the focus on risk(s) associated with bed-to-bath-trolley transfer procedure that can be identified by using high-definition (HD) video recordings & slow motion clinical-skill analysis.

Methodology

HD video recordings were taken on bed-to-bath-trolley transfer procedure performed by nurses & CSS. Slow motion clinical-skill analysis was conducted to identify possible patient-injury-risk(s). The video clips were   played in slow-motion mode & viewed by one experienced nursing officer whom had excellent clinical experiences on this procedure.

Result

16 possible patient-injury-risks are identified from 21 samples of HD video clips on bed-to-bath-trolley transfer procedure. The compliance of nurses & CSS to the 16 possible-injury-risks were analyzed and low compliance percentage was specified as at or smaller than 90% per item. (Refer to Appendix I for the details of the analysis of ward staff's compliance to the 16 possible patient-injury-risks.) Patient injury prevention (associated with bed-to-bath-trolley transfer procedure) training for nurses and CSS was commenced on Oct 2016 onwards. 92% of CSS and 80% of nurses received this training as at November 2017. There is more than 360 days since last incident with no new incident of patient injury associated with bed-to-bath-trolley transfer.