# **Posey<sup>®</sup> Bed 8070** Training Manual



Only for Invacare SC900DLX Bed modified for the Posey Bed



Rx ONLY U.S. Patent No.7,735,167

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## **SECTION 1: OVERVIEW**

#### ABOUT THE POSEY BED

The Posey Bed 8070 is a hospital bed, canopy, and mattress system designed to help provide a safe, controlled environment for patients at extreme risk of injury from a fall or unassisted bed exit. Because the bed is a classified by the FDA as a protective restraint, its use must be prescribed by a licensed physician. No one may interact with the bed until he or she receives the proper training as mandated by these instructions.

#### ABOUT THIS TRAINER'S GUIDE

This trainer's guide is designed to help you train caregivers, including nurses, nurses' aides, occupational therapists, etc. in facilities which use the Posey Bed 8070, and home care users. This guide is designed using performance-based instructional methods; this means the caregiver must perform each task and each step that the training program requires. Rather than expecting potential users to remember what you say during the training, it is critical that he or she uses the user manual throughout training. He or she will not be able to pass the performance-checkout and, therefore, wll not be certified to interact with the bed unless using the user manual throughout this training.

More than 40 years of research has demonstrated that reliance on a person's memory contributes to use-related errors. The overwhelming factor contributing to use-related errors involves cognitive failures. People simply forget. If caregivers learn to use their user guide during the training, he or she is more likely to remember how to correctly interact with the bed after training.

Whether you are an experienced trainer or are new to training users of the Posey Bed 8070, this guide is meant to standardize training and help you train every person consistently and thoroughly. Please follow this trainer's guide both in content and sequence.

Your trainer's notes appear on the left side of the training manual with purple headings, noting the relevant page numbers of the user manual, as shown below. The page numbers at the bottom of each page in The Training section are the same as the user manual page, plus the letter "A" on the trainer's notes pages.

#### Trainer's Notes (Example: page 14A):

# BASIC BED OPERATION

PAGES 14-20 OF THE USER MANUAL

User Manual Content (Example: page 14):

# **Basic Bed Operation**

PAGE 14 OF THE USER MANUAL

Not every left-facing page will have trainer's notes. You may be instructed to skip ahead several pages from time to time.

## SECTION 1: OVERVIEW (CONTINUED)

TRAINING PROCESS	This training uses highly interactive methods. During the training session, the <u>caregivers should</u> <u>always be reading, discussing or practicing</u> . Each person must successfully pass the performance checkout at the conclusion of this training. If people don't achieve fluent performance during training, passing the performance checkout will be jeopardized.
	To ensure fluent user performance at the conclusion of this training, it is critical to follow the general instructional flow presented in the trainer's guide:
	1. You introduce the task and its importance to providing safe and correct patient care.
	2. You demonstrate the task while the caregiver(s) read the steps to you out loud.
	<b>3.</b> Caregivers practice the task <u>using their user manual</u> while you provide feedback and correction, as needed. <b>DO NOT</b> <u>perform</u> any tasks for them.
	4. After training on basic bed operation, you will be instructed to skip to training on the Emergency Patient Access and Exit procedure. This is because this is the one procedure wherein users will need to rely on memory to do it correctly; there simply is not enough time to refer to any documentation during an emergency. To ensure users get ample practice performing this procedure, they will practice it <b>four times</b> before taking the final performance checkout. This is
HOW MANY PEOPLE CAN BE TRAINED	intentionally designed to provide extra practice opportunities as it pertains to this training. Given the performance-based approach used in this training, there should never be more than four users to each trainer. You will not be able to adequately observe and provide feedback to more than

Given the performance-based approach used in this training, there should never be more than four users to each trainer. You will not be able to adequately observe and provide feedback to more than four people. If you ever must train more than four people at a time, you must have a **second bed** and an assistant who can make sure trainees are participating and getting the help they need.

AT THE SAME TIME?

### SECTION 1: OVERVIEW (CONTINUED)

TRAINING PREPARATION CHECKLIST Preparation for training is critical to success. Practice the training techniques in this guide before you train anyone, and master each of the procedures before you teach others. This will ensure both better training outcomes and keep the training session within the 1.5-hour target timeframe.

#### **BEFORE EACH TRAINING SESSION, CHECK THE FOLLOWING:**

- Training Site
  - □ The training site is quiet, comfortable and well lit.
  - Everyone has a user manual.
  - □ Everyone has a chair available to sit when necessary.
  - □ Everyone can see what you are demonstrating.
- Trainer's Supplies (in addition to above) 1 per caregiver
  - □ Performance checkouts (found on pages 72-75 of this training manual)
  - □ Certificates of completion (found on pages 76-79 of this training manual)

#### • The Posey Bed 8070

- □ The Posey Bed 8070 is properly assembled and available.
- $\hfill\square$  The bed is connected to an electrical power source.
- □ All panels are properly zipped and secured.
- $\Box$  There is nothing in or around the bed.
- $\hfill\square$  You can access the bed from all four sides.
- $\hfill\square$  There is a "Quick Check 10" in the bed pocket.

### Let's Get Started!

## **SECTION 2: THE TRAINING**

- Welcome and explain your role as trainer and coach.
- Explain that because this bed is classified by the FDA as a protective restraint, it is important users they follow the procedures they will learn today to avoid presenting any risk to the patient or damage to the bed.
- Explain that they will be required to pass a performance checkout at the conclusion of this training in
  order to interact with the bed as mandated by these instructions and your facility's policies (as applicable).

## BRIEFLY DESCRIBE A 'DAY IN THE LIFE'

- Describe working with the Posey Bed:
  - The Posey Bed is a restraint, its use must be prescribed by a licensed physician
  - Must be used in accordance with all state regulations, CMS regulation, the patient care plan and the policies of your facility (if applicable)
- Describe approaching a patient in the bed:
  - Approach the patient gently to ensure they are comfortable and secure.
  - Talk to the patient to make sure they feel comfortable and secure at all times.
- Walk around or turn the bed pointing out the:
  - Head of the bed
- Mattress compartment
- Canopy
- Bed control
- Casters
- Transfer brake
- Quick-release buckles -
- Perimeter guards
- Foot of the bed with the instruction packet
- Quick Check 10 what it is and when it is used

### HAND OUT A USER MANUAL TO EACH CAREGIVER

#### PAGE 2 OF THE USER MANUAL

- Explain that this manual forms the basis for this training and that they will refer to it during the training
- Point again to the "Quick Check 10" as another important source they will use every time they leave a patient unattended in the bed.
- □ ASK if anyone who needs reading glasses has them available.
- □ ASK if anyone has any questions before you begin.
- □ ASK participants to look at page 2 in their manuals. Ask someone to read what the warning and the caution symbols mean.
- □ ASK participants to turn to page 3 Table of Contents.

## **Invite Participant Questions!**

# How to Use this Manual

INTRODUCTION	This User's Manual is intended as a guide for those using the Posey Bed 8070 in the care of patients, and who have successfully completed training. Proper training in the use of the Posey Bed 8070 is important and is provided by your authorized Posey Bed dealer or Posey Company sales representative.
	In addition to this manual, you should also review: <b>1.</b> The Assembly Instructions <b>2.</b> The In-Service Training Manual
SYMBOLS	The symbols below are used throughout this manual and should be read carefully.
	AWARNING A warning alerts you to a safety hazard or unsafe practice, which, if not avoided, could result in serious injury or death.
	ACAUTION A caution alerts you to a hazard, which, if not avoided, may result in minor or moderate injury to you or the patient, or damage to the Posey Bed.
	<b>NOTE</b> A Note provides helpful information to make bed use easier and more efficient.
DEFINITIONS	The following words have specific meaning when used in this manual:
	<b>Biohazardous</b> – material that is contaminated with human blood, tissues, certain body fluids, recombinant DNA or pathogens. Check with the patient's doctor if you have any questions about this hazard.
	<b>Care Plan –</b> the patient's individualized care plan (ICP) as written by the IDHT (see below).
	<b>Interdisciplinary Healthcare Team (IDHT)</b> – that team that writes the care plan (or ICP) and supervises patient care. Team members may include, among others, doctors, nurses, occupational therapy staff, physical therapy personnel and social services workers.
	<b>Entrapment</b> – an event in which a patient is caught, trapped or entangled in a confined space. This can result in serious injury or death from suffocation, compressions or lack of proper blood flow.
NEED HELP?	Please call the Posey Company Customer Support at 1.800.447.6739 between 6:00 a.m. and 5:00 p.m., Pacific time, or contact your authorized bed dealer.

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## TODAY YOU WILL LEARN HOW TO:

#### PAGE 3 OF THE USER MANUAL

- Perform basic bed operation
- Use of the bed in regular patient use
- Emergency Patient Access and Exit

Obviously, there is much more information contained in the manual about proper patient care. Please read this on your own.

□ ASK participants to turn to page 14 – Basic Bed Operation.

### **Invite Participant Questions!**

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# Welcome to the Posey Bed 8070

INTRODUCTION	The Posey Bed 8070 is a hospital bed, canopy and mattress system designed to help provide a safe, controlled environment for patients at extreme risk of injury from a fall or unassisted bed exit.
PRESCRIPTION ONLY AND REQUIRED TRAINING	Because the bed is a restraint, its use must be prescribed by a licensed doctor. Anyone interacting with the bed must complete the Posey Bed 8070 In-Service Training Program which includes the ability to use this manual.
BENEFITS	The Posey Bed was designed to:
	1. Create a controlled patient environment
	2. Reduce the risk of unassisted bed exit
	<b>3.</b> Reduce the risk of patient falls
	4. Avoid the risk of a patient being trapped under a mattress
	5. Eliminate the need for side rails when the patient is alone, which mitigates the risk of the patient becoming trapped in the side rails, or between the mattress and side rails
RISKS	Improper use of the Posey Bed 8070 may lead to serious injury or death. Patient monitoring should be determined by hospital protocol, a doctor, and the patient care plan. As with any less restrictive restraint system, it is important to understand when the Posey Bed 8070 is needed, when it should not be used,

and the dangers related to entrapment, suffocation, choking, and falls.

PAGE 4

OF THE USER MANUAL

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# About the Posey Bed 8070

INDICATIONS FOR USE (WHEN THE POSEY BED CAN BE USED)	The Posey Bed is a hospital bed, canopy and mattress system designed to help provide a safe, controlled environment for patients at extreme risk of injury from a fall or unassisted bed exit. The Posey Bed is a less restrictive alternative to physical restraints – such as belts, vests or jackets – for patients at least 46 inches tall and weighing between 46 and 300 pounds. The Posey Bed is a restraint, and must be prescribed by a licensed physician, that includes Rx use in the home environment.
BED USE	The bed must be used in accordance with:
	1. All state regulations
	2. Federal Center for Medicare & Medicaid Services (CMS) Regulations
	<b>3.</b> The patient's care plan (check with your doctor if you have questions about whether a patient's care plan is needed to help you meet the special needs (if applicable) of the patient)
	4. The policies of your facility, if applicable
PATIENTS WHO MAY BENEFIT	Patients who may benefit from the use of the Posey Bed include patients who are at extreme risk for a fall and/or unassisted bed exit, including those with:
	5. Severe osteoporosis (brittle, fragile bones)
	6. Severe risk of fractures (broken bones) due to clinical conditions
	7. Lack of muscle, fat, and subcutaneous tissue to absorb the impact of a fall
	8. Concurrent use of anticoagulants (blood thinners)
	9. A history of severe trauma in a prior fall
	10. Conditions that cause uncontrollable movement, such as Huntington's Disease
CLINICAL CONDITIONS	Certain patients at risk for a serious injury from a fall may also benefit from the use of the Posey Bed. This includes patients with behavioral, physical or mental conditions, or other symptoms identified by the IDHT such as:
	11. Musculoskeletal problems that cause an unsteady gait, or impaired strength or biomechanics
	<ol> <li>Altered awareness due to medication or neural illnesses, conditions that impair alertness and balance, and/or dementing illnesses<sup>1</sup></li> </ol>
	13. Visual or peripheral neuropathies (numbness or weakness) that may impair gait or balance
FALLS	Within the hospital setting, most falls occur in neurology and medical units, with the highest rate in oncology units. Fall rates may be higher in units with higher patient-to-nurse ratios. <sup>2</sup>

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<sup>&</sup>lt;sup>1</sup> "Dementia patients are at increased risk of falls. This may be due to impaired judgment, altered gait, and/or sensory deficits," from: Ellelt, Anne "Keeping Dementia Residents Safe," Assisted Living Consult, Sept/Oct 2007, page 20.

<sup>&</sup>lt;sup>2</sup>Hitcho EB et al. Characteristics and circumstances of falls in a hospital setting. JGIM, July 2004;19:732-739.

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## Contraindications (When the Bed Should Not be Used)

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WHEN NOT TO USE THE DEVICE	Given the nature of some patients' diagnoses, activity level or uncontrolled movements, the Posey Bed is not suitable for every patient.
	The Posey Bed is not intended for use with:
	<ul> <li>Patients who weigh less than 46 pounds or are shorter than 46 inches         <ul> <li>These patients are at risk of serious injury or death, and the Posey Bed has not been tested for use by such patients.</li> </ul> </li> </ul>
	<ul> <li>Patients who weigh 300 pounds or more         <ul> <li>This is the weight maximum of the bed.</li> </ul> </li> </ul>
	<ul> <li>Patients diagnosed with any condition that may cause violent or self-destructive behaviors         <ul> <li>These could result in self-injury and/or damage to the Posey Bed.</li> </ul> </li> </ul>
	<ul> <li>Violent moving of the body from side to side could cause the Posey Bed to tip over or move to a position where the patient is injured by contact with an object in the room.</li> </ul>
	Patients who rub excessively
	<ul> <li>Patients with an excessive pica eating disorder</li> </ul>
	<ul> <li>This refers to a person who may attempt to eat the canopy or padding of the Posey Bed.</li> </ul>
	<ul> <li>Patients who suffer from this disorder include adults, and it is the most common eating disorder among children who are developmentally disabled.</li> </ul>

· Patients who are, or who become, claustrophobic while in the Posey Bed

POSSIBLE NEGATIVE REACTIONS Although it is a less restrictive restraint, use of the Posey Bed could cause emotional, psychological or physical problems in certain patients. These include:

- 1. A sudden change in mental status, such as claustrophobia or depression
- 2. Sudden mood changes that lead to a change in medical conditions
- 3. An increase in aggression or self-destructive behaviors

Seek help from the doctor or the IDHT if these symptoms appear and do **not** improve as the patient becomes used to the Posey Bed. You may need to find a different method of treatment if negative reactions persist.

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# A Special Note

BACKGROUND	All hospital beds pose safety and entrapment risks. The U.S. Food and Drug Administration (FDA) received approximately 803 entrapment reports with the use of standard hospital beds over a period of 24 years from January 1, 1985 to January 1, 2009 in the U.S. <sup>3</sup>
	The FDA formed the Hospital Bed Safety Workgroup (HBSW) to develop solutions to reduce the risk of patient entrapment in hospital beds. The HBSW issued guidelines in 2006 describing seven potential zones of entrapment and providing recommendations to reduce life-threatening entrapments associated with hospital bed systems. <sup>4</sup>
	The Posey Bed was designed to help eliminate each of the seven entrapment zones described in the guidelines, when configured with the head of the bed down and the mattress flat.
AT-RISK PATIENTS	<ul> <li>At-risk patient are described as:</li> <li>Patients who, because of mental or physical disability, cannot reposition or remove themselves from a confined area in the bed</li> <li>Any other patient identified by the doctor, care plan or Interdisciplinary Healthcare Team (IDHT) to be at</li> </ul>
	risk of entrapment in the gaps created when the head of the Posey Bed is in the "up" position.
REDUCING THE RISK OF ENTRAPMENT	<ul> <li>To help reduce the risk of entrapment, adhere to the following guidelines:</li> <li>Keep the mattress flat.</li> <li>- If you need to elevate the head or torso of an at-risk patient, keep the mattress flat and use a cushion to position the patient.</li> </ul>
	<ul> <li>– If you must leave the head of the bed up while an at-risk patient is alone, use the Posey Filler Cushions (Cat. 8021).</li> </ul>
	<ul> <li>Provide extra monitoring.</li> <li>— Monitor patient to make sure that the Posey Filler Cushions cannot be removed by an at-risk patient and that an at-risk patient cannot crawl under or around the Posey Filler Cushions. (Adhere to the facility's restraint protocol, if applicable.)</li> </ul>
	<ul> <li>Avoid stretching the canopy material.</li> <li>         — The canopy may stretch over time during normal use or by patients who engage in escape behaviors. This could result in pocket areas on the inside of the canopy. Regular washing and air drying should help reduce this condition. <b>DO NOT</b> use any canopy that has tears or shows signs of damage.     </li> </ul>
DIFFERENT METHOD OF TREATMENT	If necessary, consult the doctor or the IDHT to find a different method of treatment for any at-risk patient.

<sup>3</sup> FDA Consumer Update: Practice Hospital Bed Safety; http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm164366.htm.

<sup>4</sup> Guidance for Industry and FDA Staff – Hospital Bed System Dimensional and Assessment Guidance to Reduce Entrapment. March 10, 2006; http://www.fda.gov/MedicalDevices/DeviceRegulationandGuidance/GuidanceDocuments/ucm072662.htm.

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# **Patient Reassessment**

#### **ACAUTION**

If your patient's physical or mental health changes, check with your doctor to make sure the Posey Bed 8070 is still needed. Use the Posey Bed 8070 only if there is not a less restrictive option. **ALWAYS** use the least restrictive device available for the shortest time while you seek a less restrictive alternative.

ALTERNATIVES TO RESTRAINT USE Review the patient's mental and physical status often to make sure that the benefits of using the Posey Bed 8070 as a restraint outweigh the risks.

Safe use requires that:

- 1. You define and remove, if possible, the cause of the symptoms that require a restraint. This may include catering to individual needs and routines; increased rehabilitation; changing the environment; or increased supervision.
- **2.** You tailor interventions to the individual needs of the patient after weighing factors such as the patient's condition; behaviors; history; and environment.

When possible, seek guidance from the patient's family. Depending on the patient's condition, alternatives to restraints may include one of more of these:

All caregivers must be properly trained and familiar with the content of the manual before caring for

- 3. A bedside companion
- 4. Fall alarms
- 5. Floor cushions
- 6. Lowering the volume on the TV
- 7. Adjusting window shades or dimming lights
- 8. Soft music
- 9. Use of a Posey Activity Apron (Posey Catalog, item #7400)

As with all restraints, the Posey Bed should **NEVER** be used for convenience.

## **Special Considerations for Home Care Environments**

	the patient in a Posey Bed. Pay particular attention to all warnings and cautions in the manual to avoid injury or death.
USE IN A HOME CARE SETTING	<ul> <li>Only for the amount of time prescribed for use by a licensed medical doctor (Rx only).</li> <li>Only if each caregiver has reviewed and understands all instructions and warnings for safe use.</li> <li>Only if persons are fully trained on the use of the Posey Bed 8070 and are present in the house whenever the patient is in the bed.</li> </ul>
DR.'S ORDERS	You must carefully follow the doctor's orders and the patient's care plan (if any) for use of the Posey Bed 8070. This includes all orders for monitoring and patient release.
CARE PLAN	If your patient was using a Posey Bed during hospitalization or while in a nursing home, you should ask the facility for a copy of the care plan to help guide you in the safe use of the Posey Bed. Check with the doctor to see if the care plan is necessary to help meet the special needs of your patient.

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# Special Considerations for Home Care Environments (Cont.)

#### **AWARNING**

ENTRAPMENT RISK

Entrapment risks for certain at-risk patients include canopy gaps. Raising the head of the Posey Bed 8070 will create "gaps" or "pockets" between the head of the bed and the canopy. These areas can cause an extreme risk of serious injury or death from entrapment to certain at-risk patients. At-risk patients are:

- Patients who, because of mental or physical disability, cannot reposition or remove him or herself from a confined area in the bed.
- Any patient identified by the doctor, the care plan, or Interdisciplinary Healthcare Team (IDHT) to be at risk of entrapment in the gaps created when the head of the bed is up.

For at-risk patients, **ALWAYS** use Posey Filler Cushions (Catalog # 8021) or Posey Torso Cushions (Catalog # 8025). Refer to pages 11-12 for detailed information about reducing entrapment risks, and the use of Posey Filler Cushions and Posey Torso Cushions.



#### **ACAUTION**

**AWARNING** 

IN PATIENT EMERGENCY

In case of a patient emergency, immediately address the patient's needs or remove the patient from the bed. Contact the doctor or call 911.

#### Importance of Patient Monitoring

If possible, the Posey Company recommends a caregiver sleep in the same room as the patient. If you cannot be physically present to monitor the patient, you MUST use a device, such as a child monitor, for CONSTANT audio and/or video monitoring. Test to be sure that you can hear low levels of activity in the room. Failure to do so could result in serious injury or death.

# **Description of the Posey Bed 8070**

BED FEATURES AND BENEFITS 1. Fully Automatic Low Hospital Bed

The mattress level can be lowered to 19 inches (48 cm) and can be raised to 30 inches (76 cm).

- 2. 6 inch (15 cm) Enclosed Mattress Compartment
  - The enclosure helps to avoid the risk of a patient being trapped under the mattress.
- 3. Nylon Canopy System

A 70 cubic foot (2 cubic meters) rectangular green canopy surrounds the bed. The nylon is biocompatible. The canopy has four (4) access panels to ease access to the patient, and multiple ports to accommodate a nurse call button, and intravenous (IV) or drainage lines, if applicable. Zippers are secured with quick-release buckles.

#### 4. Perimeter Guards

A soft side rail is located on each side of the bed. The perimeter guards should be zipped into the "up" position and secured with the quick-release buckles when the "U-shaped" side panel is open for patient care.

#### **ACAUTION**

The Posey Bed 8070 canopy is designed to only be used on a modified Invacare SC900DLX Bed, and should **not** be used on any other bed platform.

# Components of the Posey Bed 8070 System

- 1. Enclosed Mattress Compartment accommodates a 6 inch (15 cm) mattress.
- 2. Nylon Canopy is water-repellent.
- 3. Two "U-Shaped" Side Panels one (1) panel per side, each with a single zipper provide easy patient access.
- 4. Head (4a) and Foot (4b) Access Panels each with a single zipper help to provide easy access to the patient at the head and foot of the bed.
- 5. Quick-Release Buckles are clipped to the zipper pull-tabs for added patient security.
- 6. Perimeter Guards function like soft side rails; they are designed for temporary use during patient care and must be unzipped when side panels are closed.
- 7. Foam Canopy Pads ten (10) total fit around the canopy frame to help reduce the risk of injury from contact with the frame.
- 8. Hook-and-Loop Tabs secure the "U-shaped" side panels to the top panel of the canopy when the side panels are open.
- 9. See-Through Bed Control Pocket holds the bed control.
- 10. Side-Panel Tube Ports four (4) total are positioned on each side and at the head and foot of the canopy to aid in running tubes into the patient compartment.
- 11. Posey Bed Instruction Storage Pocket stores all product manuals and the "Quick-Check 10" for easy reference.
- 12. Locking Casters provide security while moving patient to and from the bed and for times when the patient is alone.
- 13. Transfer Brakes add stability and provide security while moving patient to and from the bed and for times when the patient is alone.
- 14. Double-Insulated Power Cord is approved by UL, CSA, TUV, NFPA, NEC and OSHA.



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# Warnings and Precautions

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#### AWARNING CANOPY GAPS

Canopy gaps present an entrapment risk for certain at-risk patients. Raising the head of the Posey Bed creates "gaps" or "pockets" between the head of the bed and the canopy. These areas pose an extreme risk of serious injury or death from entrapment for certain at-risk patients. Keep the mattress flat with the head of the bed down when an at-risk patient is alone. Use Posey Filler Cushions (Cat. 8021) if an at-risk patient's head or torso must be elevated (for example, while watching TV, or if called for by the doctor's order or the patient's care plan). If filler cushions are not available, lower the bed to the flat position, and use a Posey Torso Cushion (Cat. 8025) or another wedge cushion.



**AWARNING** 

RISKS ASSOCIATED WITH SUFFOCATION OR CHOKING

#### **AWARNING**

RISK OF FALL OR UNASSISTED BED EXIT

#### **AWARNING**

VIOLENT OR AGGRESSIVE PATIENTS

#### **AWARNING**

IMPORTANCE OF ADHERING TO A CARE REGIMEN To help reduce the risk of suffocation, adhere to the following:

**NEVER** put a mattress inside the patient area.

ALWAYS keep the mattress in the mattress compartment and completely zipped.

Keep tubes or monitoring lines and the nurse call button inside the bed only if authorized by the care plan.

**NEVER** use the Posey Bed if there is damage to the canopy, access panels or zippers. A failure to heed this warning may result in patient escape or unassisted bed exit, which may lead to serious injury or death from a fall. **ALWAYS** check the canopy and the zippers before leaving the patient alone to help reduce the risk of a fall or unassisted bed exit (see page 13).

**NEVER** leave a patient alone if the zippers do not close completely, there are holes in the canopy or netting, the foam padding covering the metal frame is damaged or missing, or the frame is damaged.

**NEVER** leave a patient in the Posey Bed if there is a risk of self-injury, injury to others or of the bed tipping over, or if the patient tries to damage the bed.

- **1.** Be aware that a sudden mood swing may cause violent or aggressive behavior. Follow the care plan, the doctor's orders, or your facility's security policy, if applicable, for such patients.
- **2.** A patient who may become violent or aggressive may require constant monitoring or different methods of restraint.
- **3.** No level of monitoring may avoid risk of serious injury to certain violent or aggressive patients, i.e. patients who move from side to side attempting to tip over the bed or injure themselves against the frame.
- **4.** Use of the Posey Bed by an agitated patient or a patient who tries to escape must be approved by the doctor or the IDHT when tube(s) or line(s) are in use. There is a risk of serious injury or death if the patient becomes entangled (caught up), or disrupts the integrity of a tube or monitoring line.
- 5. Watch for signs of claustrophobia or a significant increase in stress or physical movement. Remove these patients from the Posey Bed **IMMEDIATELY** and notify the doctor. You may need to find a different method of treatment.

Failure to comply with the doctor's order, the patient's care plan and all instructions, warnings and cautions in the manual and on all labels on the Posey Bed, could result in patient death or serious injury. Monitor the patient's condition according to the doctor's orders, the patient care plans or facility policy, as applicable.

# Warnings and Precautions (Continued)

#### **AWARNING**

IMPORTANCE OF PATIENT MONITORING

#### **AWARNING**

ALTERATIONS TO THE POSEY BED

#### **AWARNING**

CHILDREN AND PETS

#### **ACAUTION**

CHECKING THE CANOPY

#### **ACAUTION**

PRECAUTIONS DURING PATIENT CARE AND MOVING

#### **ACAUTION**

ACCESS PANELS

#### **ACAUTION**

DAILY MONITORING AND RELEASE POLICY

# **NEVER** leave a patient alone without proper monitoring. Failure to monitor per the doctor's orders, the care plan or facility policy could result in serious injury or death.

NEVER change the bed for any reason.

- **NEVER** add side rails, or a headboard or footboard to the bed. Doing so will increase the risk of entrapment or serious injury from contact with these parts.
- **NEVER** use any device, such as a cable tie (zip tie) or padlock to secure panel zippers. Only use the Posey Company quick-release buckles. You must **ALWAYS** be able to access the patient quickly in an emergency.
- DO NOT add any accessory to the bed other than those recommended by the Posey Company.

**ALWAYS** keep pets or small children a safe distance from the Posey Bed to help prevent injury to the patient, small child or pet, and/or damage to the bed, particularly when raising or lowering the bed.

Make sure there are no tears, holes or cuts in the nylon panels or netting and that the canopy and frame are secure and attached properly to the hospital bed.

**NEVER** leave objects in the bed that will allow the patient to damage the canopy and, possibly, escape. **NEVER** hang, suspend or attach toys or other items to the netting or canopy.

Avoid risk of a fall or unexpected bed movement. Minimize the risk of injury to you and the patient by following the procedure (see pages 26-28) for moving patients in and out of the Posey Bed and adhering to your facility's patient moving procedure.

A fall may occur while one or more access panels are open during patient care. Make sure the patient is in a safe position on the mattress before you open an access panel. Follow the procedures for securing the perimeter guards, and **NEVER** leave a patient alone while the perimeter guard is in use or the canopy is open.

Monitor the patient's condition per facility policy, the doctor's orders or the care plan.

Follow the care plan for daily patient release. Be sure to consider patient's needs for:

- 1. Nourishment/Eating
- 2. Range of motion and rehabilitation
- 3. Walking
- 4. Recreation
- 5. Going to the bathroom (Toileting)
- 6. Restorative nursing (for in-patients)

When using the Posey Bed in the home, the Posey Company recommends that the caregiver sleep in the same room as the patient. If you cannot be there in person, **ALWAYS** use something to monitor the patient, such as a child monitor to provide constant audio or audio/video monitoring. Test the system to be sure that you can hear low levels of activity in the room.

**ACAUTION** 

POWER CORD

**ALWAYS** position the power cord away from the working mechanisms of the bed. **ALWAYS** check the power cord for any visible kinks or cuts prior to connecting to an appropriate AC outlet. **ALWAYS** position the power cord away from walkways to avoid a tripping hazard. 

# Warnings and Precautions (Continued)

#### PAGE 13 OF THE USER MANUAL

#### **AWARNING**

CHECKING THE ZIPPERS

- 1. **NEVER** use the bed if a zipper slider is bent open or damaged, or if the zipper cannot be zipped completely closed. Remove the patient from the damaged bed and exchange it for a Posey Bed in good working condition. Send the damaged Posey Bed in for repair.
- 2. NEVER use the bed if the zipper pull-tab is missing or broken.
- 3. **NEVER** leave the patient's bedside until all access panel zippers are completely closed. Quick-release buckles must be connected and closed on all four (4) access panels before the patient is left alone (see page 17).
- 4. **NEVER** use the bed if a zipper coil is kinked, misaligned, or has gaps and does not close completely along the entire length.

Test that all zippers open easily and close completely along the entire length of the zipper. Inspect zipper coils for any kinks or misalignment. If any are identified, zip and unzip the zipper. If condition continues, **DO NOT** use product.



**DO NOT** use the Posey Bed if zippers have open gaps that do not close completely along the entire length.



**DO NOT** use the Posey Bed if zippers and zipper pins are not completely seated in their boxes and/or not all of the teeth are engaged.



Note the kinks on this sample.



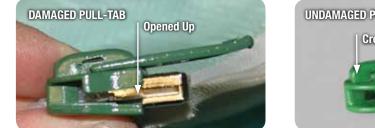
**NEVER** rip the panels open, as this will damage the zipper slider, preventing the zipper from closing completely.



Before leaving the patient alone, apply pressure with your hands along the entire length of the zipper to make sure the panel is completely closed and that there are no gaps or openings along the entire length of each zipper.



Snap the quick-release buckles shut to make sure all zippers are completely closed, and check by tugging on each buckle.



UNDAMAGED PULL-TAB

ALWAYS use the zipper pull-tabs to open and close zippers, and make sure that zippers are fully closed.

### BASIC BED OPERATION

PAGES 14-20 OF THE USER MANUAL We will now learn how to perform the individual bed operations that you will use when interacting with a patient. This is like first learning how to dice carrots, sauté onions and brown meat before learning how to put the entire meal together.

- Here's how we'll do this:
  - You will read the purpose and warning to yourself.
  - You will read the procedure out loud, including any relevant warning and cautions while I demonstrate it.
  - Following your user manual, you will each perform that operation.
  - I will ask you what you would see, feel or hear to know if this operation was done correctly.
  - I'll provide feedback as necessary; but I won't do the operation for you.
- · Let's begin with Installing or Replacing the Mattress
  - Please quietly read the purpose and warning.
  - Then read out loud the three-step procedure, while I demonstrate how to unzip the mattress compartment.
- □ ASK participants to alternatively unzip and zip the mattress compartment.
- □ **ASK** them to turn to page 15 Adjusting the Bed.

## **Invite Participant Questions!**

# **Basic Bed Operation**

#### PAGE 14 OF THE USER MANUAL

INTRODUCTION

This section addresses basic bed operations to be performed routinely when accessing and caring for a patient. These basic operations include how to:

- Install or replace the mattress
- Adjust bed height and head and knee positions
- Lock and unlock the casters
- Engage transfer brakes
- Zip and unzip the access panels
- Use the perimeter guards
- · Use the transport handles
- Use the tube ports

ASSEMBLY MANUAL Please refer to the Assembly Instructions (M6243) for detailed assembly instructions.

### Installing or Replacing the Mattress

### **AWARNING** If not using the Posey Bed 8070 mattress, **ONLY** use a mattress that measures 80" x 36" x 6" (203 cm x 91 cm x 15 cm). Any other size mattress may result in damage to the bed, patient injury or death.

HOW TO INSTALL THE MATTRESS

- 1. Completely unzip the mattress compartment.
- 2. Insert the mattress.

**ACAUTION** Make sure the mattress label is up and at the foot of the bed.



**3.** Completely zip the mattress compartment.



### ADJUSTING THE BED

#### PAGE 15 OF THE USER MANUAL

The bed controller can adjust both the overall bed height and the head and foot areas. – I will demonstrate using the bed control to raise and lower the bed

- □ ASK participants to alternatively raise, lower the bed and head and foot area.
- □ ASK them to turn to page 16 Locking and Unlocking the Casters.

# **Invite Participant Questions!**

#### **PAGE 15** OF THE USER MANUAL

Adjusting the Bed	OF THE USER MANUAL
INTRODUCTION	The Posey Bed has an electronic bed control that adjusts bed height and head and knee positions. The double-insulated power cord can be plugged into a 110-volt receptacle.
BED CONTROL	The bed control should be stored in the bed control pocket. The cord can be clipped out of the way using the bed control clip. This makes sure that the bed control is out of the patient's reach.
BED HEIGHT	The bed control will lower the mattress height to 19 inches (48 cm), when the patient is alone. The four (4) transfer brakes (see page 16) engage when the bed is set to its lowest position to stop accidental movement.
	The bed mattress can be raised to 30 inches (76 cm).
HOW TO USE THE BED CONTROL	Make sure the bed is connected to an appropriate AC outlet, and inspect the cord for any visible kinks or cuts. Press each operation button before use to be sure the bed control is not damaged.
	Head Operation: 1. Push button to raise head

- 2. Push button to lower head
- **Bed Height Operation:**
- 3. Push button to **raise bed**
- 4. Push button to lower bed

### Knee Operation:

- 5. Push button to **raise knee**
- 6. Push button to lower knee



## LOCKING AND UNLOCKING THE CASTERS

PAGE 16 OF THE USER MANUAL The casters prevent unwanted bed movement. Unlike most hospital beds, the Posey Bed has four caster brakes that must be locked and unlocked, as needed.

- Point to the casters and show how you can tell if they're locked or unlocked (see the red and hear the click).
- Read the warning to yourself.
- · I will demonstrate how to unlock and lock while you read the procedure to me
- What did you notice with the casters? (I saw red and heard a click.)

□ ASK trainees to alternatively lock and unlock the casters.

## **Invite Participant Questions!**

## ENGAGING THE TRANSFER BRAKES

#### PAGE 16 OF THE USER MANUAL

The transfer brakes are located next to all four casters on the outside of the bed frame. • Point to the transfer brakes and explain their importance in keeping the bed stable.

- What did you notice with the transfer brakes?

□ ASK participants to turn to page 17-18 – Zipping and Unzipping the Access Panels.

## **Invite Participant Questions!**

### Locking and Unlocking the Casters

PAGE 16 OF THE USER MANUAL

INTRODUCTION

The Posey Bed has four (4) swivel-wheeled locking casters. Locking the brakes helps to reduce the risk of unwanted bed movement.

#### **ACAUTION**

During patient care and when moving the patient, lock all four (4) casters.

HOW TO LOCK AND UNLOCK THE CASTERS To lock a caster, press down on the metal clip with your foot until it locks and you hear it click. **NOTE:** To verify the caster is unlocked, look for the red brake sticker on the caster to confirm the lock is disengaged.



UNLOCKED

LOCKED

To unlock a caster, push the metal clip with your foot until it releases.

### **Engaging the Transfer Brakes**

#### INTRODUCTION

The Posey Bed has four (4) transfer brakes located near each of the locking casters. The purpose of the transfer brakes is to add stability and minimize bed movement while moving the patient.

#### **ACAUTION**

HOW TO ENGAGE AND DISENGAGE TRANSFER BRAKES Transfer brakes must **ALWAYS** be engaged when the patient is in the bed and left alone.

To engage the transfer brakes, use the bed control to lower the bed to the lowest position.

**NOTE:** The transfer brakes will automatically engage when the bed is at the lowest position. Check to make sure the transfer brakes have made contact with the floor surface.

To disengage the transfer brakes, use the bed control to raise the bed enough to raise the transfer brakes off the floor surface.



#### **ACAUTION**

Transfer brakes must be disengaged by raising the bed to give caregivers the ability to move the bed for full patient access in an emergency situation. See Posey Bed Training Manual for inservice details. See page 24 for information regarding Emergency Patient Access and Exit.

## ZIPPING AND UNZIPPING THE ACCESS PANELS

PAGES 17-18 OF THE USER MANUAL Point to the four zippered access panels each with a quick-release buckle.

- Read the page to yourself.
   Point to the hook-and-loop tabs on the "U-shaped" side panels.
- I will demonstrate how to properly zip and unzip:
  - Unclip Unzip and Flip
  - Zip and Clip
  - What did you notice when the panels are completely zipped?
- Demonstrate why and how to press against the closed zipped panel.

□ ASK participants to alternatively unzip – unclip – flip and zip – clip and press.

 $\Box$  ASK them to turn to page 19 – Using the Perimeter Guards.

## **Invite Participant Questions!**

# Zipping and Unzipping the Access Panels

## PAGE 17 OF THE USER MANUAL

The Posey Bed has four (4) zippered access panels, each labeled: INTRODUCTION • 2 "U-shaped" side panels (right and left) • 1 head panel • 1 foot panel All panels unzip for easy patient access. USING THE QUICK-There is a quick-release buckle at the start of each zipper. **RELEASE BUCKLES** To open the buckle, pinch the two (2) sides together and pull the clip apart. To close the buckle, push the male and female ends of the quick-release buckle together until you hear a click. ALWAYS tug at the clip after closing to make sure it is connected. Make sure quick-release buckles are completely fastened on all four (4) access panels on the Posey Bed **AWARNING** before leaving the patient's bedside. A failure to do so could result in serious injury or death from a fall or unassisted bed exit. NEVER use the bed if any of the four (4) quick-release buckles are missing or damaged and do not close completely. SECURING THE The "U-shaped" side panels open completely for easy "U-SHAPED" patient access. Completely unzip the side panel. "Flip" SIDE PANELS the panel on the top of the canopy, and secure the opened panel to the hook-and-loop tabs located on the top of the canopy.

## Zipping and Unzipping the Access Panels (Continued)

## PAGE 18 OF THE USER MANUAL

HOW TO PROPERLY ZIP AND UNZIP PANELS Each zipper has a pull-tab for opening and closing zippers. **ALWAYS** use the pull-tabs to open and close the zippers. **ALWAYS** make sure that all zipper teeth are engaged. Refer to page 13 for zipper warnings and precautions.







Press against the closed zipped panel along the entire length of the zipper to make sure there are no gaps or openings before leaving the patient alone.



Do not use a zipper with open gaps that does not close completely along entire length.



Note the kinks on this sample.

REPLACING WARNING TAGS

**AWARNING** 

Each access panel zipper has a plastic tag with warning instructions. If the plastic tag is damaged or becomes unreadable, it must be replaced. Call the Posey Company at 1.800.447.6739 and request a free replacement (Part L9368).

**NEVER** use the Posey Bed if there is damage to the canopy, damage to the access panels, or if the entire zipper does not close completely. A failure to follow this warning may lead to serious injury or death from a fall. **ALWAYS** check the canopy and make sure the entire zipper is completely closed before leaving the patient alone to help reduce the risk of a fall or unassisted bed exit.

# USING THE PERIMETER GUARDS

## PAGE 19 OF THE USER MANUAL

Point to the perimeter guards on each side of the patient compartment.

- Read the introduction and caution to yourself.
- I will demonstrate when and how to use the perimeter guards:
  - Up and Up to access the patient.
  - Down and Down to leave patient unattended.
  - Up is Up and Down is Down.
  - What did you notice when the perimeter guards are completely zipped?
- □ ASK participants to alternatively use the perimeter guards and ask them WHEN they would do it.
- $\Box$  ASK them to turn to page 20 Using the Tube Ports.

## Using the Perimeter Guards

PAGE 19 OF THE USER MANUAL

INTRODUCTION

The Posey Bed has a nylon fabric perimeter guard on each side of the patient compartment. These are intended as temporary barriers for use only while the "U-shaped" side panel is open for patient care.

## **ACAUTION**

WHEN TO USE OR NOT USE THE PERIMETER GUARDS **NEVER** leave a patient alone while the access panel is open and a perimeter guard is in use. The perimeter guard does not prevent the patient from falling out of the bed.

If the patient is:	Then the Perimeter Guards should be:
Alone in the bed	Unzipped for quick access in an emergency
Being cared for while in bed	Zipped for temporary protection

## Using the Transport Handles

PURPOSE

The transport handles are designed to be used when moving the bed from one location to another. This includes loading and unloading the bed from a delivery vehicle, relocating it from a hospital storage area to a patient's room, or transporting the bed from one room to another.

The easily identified YELLOW handles are on all four (4) corners. The level on the handles can be adjusted by changing the height of the bed using the bed control. The bed can be either pulled or pushed by using the handles for better control.



## USING THE TUBE PORTS

PAGE 20 OF THE USER MANUAL Read the page to yourself. Point to how you would check that the port is completely closed.

□ ASK participants to turn to page 21 – Before First-Time Use.

## PAGE 20 OF THE USER MANUAL

## Using the Tube Ports

INTRODUCTION	
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HOW TO RUN TUBE OR LINE Tube ports allow for tubes (food, drainage, etc.) and IV lines to be delivered to and from the patient while in the bed.

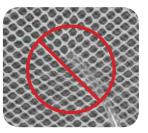
To run a tube or line into the patient compartment, unzip the port, run the tube or line through the zipper opening into the patient compartment, and zip the port closed. Close the zipper as much as possible without stopping the flow of the tube.



A tube port in use.

## **ACAUTION**

**DO NOT** place the tube through the netting.



Make sure zippers are fully closed when ports are not in use. This will help reduce the risk of the patient damaging or opening a port, or trying to escape by putting a hand or foot through a port.

**NEVER** leave an unused port open when the patient is alone.

**ALWAYS** check the condition of all tubes when raising or lowering the bed. There should be no "kinks" in the tube, and fluids should flow freely to and from the patient.

**AWARNING** 

## **BEFORE FIRST-TIME USE**

PAGE 21 OF THE USER MANUAL This section contains helpful checklists that you or your facility can use (or modify) to prepare for the first time you use or accept a Posey Bed 8070:

• Checking for Proper Bed Assembly.

- Guidelines for Proper Bed Location.
- · Guidelines for caregiver training which we are doing now!

Please look at these checklists on your own.

□ ASK participants to turn to page 23 – New Patient Selection and Monitoring.

# **Before First-Time Use**

### PAGE 21 OF THE USER MANUAL

## PURPOSE

To provide a series of checklists to make sure the bed has been properly assembled, is in an appropriate location and that anyone who interacts with a patient in the bed has successfully completed training prior to first use.

**3 CHECKLISTS** 

Use the following checklists before using the bed with a patient:

- Check for Proper Bed Assembly
- Guidelines for Proper Bed Location
- Guidelines for Staff Training

## Checking for Proper Bed Assembly

PURPOSE

To provide a guide to confirm that the bed was properly assembled and delivered to your facility or home in good condition.

WHO SHOULD DO THIS TASK?

Biomedical engineer or other authorized hospital personnel.

CHECKLIST

To complete this checklist, plug the bed power cord into a 110-volt receptacle. **Prior to use with a new patient, photocopy and retain this checklist to record that each item has been verified. NOTE:** Each **No** (in the table below) must be corrected before allowing a patient to use the bed.

	Check	Yes	No
1.	Is the canopy metal frame unbent and unbroken?		
2.	Do all four (4) casters lock and click when the metal clip is pressed?		
3.	Does the bed feel secure and free from any loose or moving parts?		
4.	When the bed is set to its lowest position, do all four (4) transfer brakes physically touch the floor?		
5.	Is the metal canopy frame completely covered by foam padding with no visible foam?		
6.	Is the canopy and netting clean and free from any tears, holes or abrasions (cuts) (page 12)?		
7.	Are all zippers fully closed with zipper pins completely seated in their boxes and all teeth engaged (pages 17-18)?		
8.	Do the zippers close completely and open easily?		
9.	When pressure is applied along the entire length of the zipper, does the zipper hold completely without gaps or openings (pages 17-18)?		

# Guidelines for Proper Bed Location

PURPOSE

WHO SHOULD

DO THIS TASK?

CHECKLIST

To provide a guide to make sure bed is properly located, as patient safety requires that the bed is located in an area that provides easy access to the patient under both normal and emergency conditions.

Attending nurse or caregiver

**NOTE:** Each No (in the table below) must be corrected before allowing a patient to occupy the bed. **Prior** to use with a new patient, photocopy and retain this checklist to record that each item has been verified.

	Check	Yes	No
1.	Is the bed clean?		
2.	Can a patient be easily accessed and can the bed be moved to the center of the room to allow access from all four (4) sides in an emergency situation?		
3.	Is the bed positioned so that the patient is <b>NOT</b> exposed to injury from contact with walls, furniture or other equipment?		
4.	Is the power cord out of the way to avoid a tripping hazard?		
5.	Is the bed away from all open flames, smoking materials or heat sources, including baseboard heaters or space heaters?		
6.	Is the bed free of clutter or foreign objects?		
7.	Are the netting and canopy free from <b>ANY</b> sharp or hanging objects?		
8.	Are the netting and canopy free from <b>ANY</b> shipping or assembly damage to the bed or canopy system?		
9.	Are the casters locked and the transfer brakes engaged?		

## **Guidelines for Staff Training**

PURPOSE

Because the bed is a restraint system, anyone who cares for a patient in the bed must be properly trained for at-home use or according to facility policy.

Once trained, each trainee will receive a performance certificate to be kept on file at home or with the facility. (This information can be found in the Posey Bed Training Manual.)

# NEW PATIENT SELECTION AND MONITORING

PAGE 23 OF THE USER MANUAL This section contains helpful information that you or your facility can use (or modify) to determine whether the bed is appropriate for a particular patient.

Please look at this information on your own.

ASK participants to turn to page 24 – Emergency Patient Access and Exit.

# **New Patient Selection and Monitoring**

## PAGE 23 OF THE USER MANUAL

## PURPOSE

To provide a guide to make sure that the bed is appropriate for the new patient and that their first hours in the bed are safe and secure.

Attending nurse or caregiver

## AWARNING

WHO SHOULD

DO THIS TASK?

Before allowing a patient to use the bed, confirm the following:

- A doctor has prescribed the bed for this patient
- · A current patient care plan is available and followed
- The attending caregiver has been properly trained in the use of the bed

## CHECKLIST

**NOTE:** Any **Yes** (in the table below) indicates that the doctor must determine if the bed is appropriate for the patient. **Prior to use with a new patient, photocopy and retain this checklist to record that each item has been verified.** 

	Check	Yes	No
1.	Does the patient weigh less than 46 pounds?		
2.	Does the patient weigh more than 300 pounds?		
3.	Is the patient less than 46 inches tall?		
4.	Has the patient been diagnosed with any condition that may cause violent or self-destructive behaviors?		
5.	Has the patient been diagnosed with an excessive pica eating disorder, or is there concern the patient may attempt to eat the bed canopy or padding?		
6.	Has the patient been diagnosed with claustrophobic tendencies?		
7.	Has the patient been diagnosed as at-risk and cannot reposition himself or herself when the head of the bed is raised, and, therefore, requires a flat bed or gap fillers?		

## PATIENT MONITORING

Monitor the patient's condition per the doctor's order, the patient care plan or facility policy.

REGULAR DAILY PATIENT CARE

Go to: Regular Daily Patient Care (Page 25).

# EMERGENCY PATIENT ACCESS AND EXIT

# PAGE 24 Before we practice the most common tasks you'll do while interacting with the bed, let's first look at the Emergency Patient Access and Exit procedure for two reasons: - Because it assumes in an emergency situation, seconds count, which means that you won't have enough time to refer to your manual or any other reference. So, we want to give you more practice

- with this procedure because you will need to remember what to do. – Because this procedure will be performed very infrequently; so, it's easy to forget. As we practice it several times during this training session, we'll try to get a bit faster with each practice. Think of "fluency," as accuracy plus speed, as when someone is fluent in a language. That person can speak the language accurately and without hesitation, in other words, with speed. That's what we'll strive to achieve here with this procedure – fluency.
- Please read the purpose to yourself.
- Please read the procedure while I demonstrate it. (Do not worry about patient exit which may or may not be necessary.)
- □ **ASK** participants alternatively to access the patient, making sure they perform EACH step correctly and they should use their manual for this first practice. You will need to reset the bed after each person.
- □ ASK them to turn to page 25 Regular Daily Patient Care.

# **Emergency Patient Access and Exit**

## PURPOSE

To describe how to access the patient quickly and possibly exit him or her from the bed safely under certain conditions, such as when a patient experiences an emergency (for example, respiratory failure or cardiac arrest).

## PROCEDURE

NOTE: At least two (2) people are needed for quick patient access and possible exit.

Steps	Tasks
1. Access patient	<ul> <li>a. Raise the bed to disengage the transfer brakes.</li> <li>b. Position the bed so it can be accessed from all four (4) sides.</li> <li>NOTE: Transfer brakes must be disengaged to move the bed.</li> <li>c. Lock all four (4) casters.</li> <li>d. Lower the bed to the lowest position to engage transfer brakes.</li> <li>e. Lower the head and knee so the mattress is flat.</li> <li>f. Unzip ALL panels.</li> <li>g. Attend to the patient.</li> </ul>
2. Exit patient, if necessary	



a. Raise the bed



d. Engage transfer brake by lowering bed until it touches the floor

A

b. Disengage transfer brake by raising bed off floor



e. Lower the head and knee



**PAGE 24** 

OF THE USER MANUAL

c. Lock caster (shown in locked position)



DISASTER PLANNING

Should disaster strike such as an earthquake or fire, have a disaster plan in place or follow your facility's disaster plan.

# **REGULAR DAILY PATIENT CARE**

# NOTE: You should have trained and practiced the Emergency prodecue BEFORE training Regular Daily Patient Care.

PAGE 25 OF THE USER MANUAL These are the tasks you'll perform most frequently, and you'll recognize these as regular tasks you do as part of your job. Now that we know how to dice, sauté and brown, we're ready to prepare the meal:

- Moving the Patient into the Bed.
- Accessing and Caring for Patient in the Bed.
- Moving the Patient Out of the Bed.

We'll follow the same process we've been using

• Please quietly read page 25.

□ **ASK** participants to turn to page 26 – Moving the Patient into the Bed.

# **Regular Daily Patient Care**

## PAGE 25 OF THE USER MANUAL

•••••	• • • • • • • • • • • • • • • • • • • •
INTRODUCTION	<ul> <li>Patients using the Posey Bed should be carefully monitored and cared for according to the doctor's orders and the patient's care plan. This section addresses care for patients given normal everyday tasks, such as feeding or using the bathroom, and covers how to:</li> <li>Move the patient into the bed</li> <li>Access and care for patient in the bed</li> <li>Move the patient out of the bed</li> <li>Conduct "Quick-Check 10" before leaving patient alone</li> </ul>
SAFELY MOVING AND CARING FOR PATIENT	<ul> <li>Safe moving and patient care inside the Posey Bed involve a number of factors including:</li> <li>Patient size</li> <li>Medical condition</li> <li>Disability</li> <li>Mobility</li> </ul>
	Steps for moving will vary for patients who are able to stand as opposed to patients who must be lifted to or from the bed.
AWARNING	<b>NEVER</b> use a patient lift to move patient unless it has been tested to make sure there is enough clearance under the canopy frame to do so safely. Using a patient lift that has not been tested by the facility may result in damage to the canopy. The clearance of the opening side access panel is 46" W x 38" H (117 cm x 97 cm) (at bottom).
	NOTE: The frame at the bottom of the Posev Bed is open on one of the four sides. Always access the

**NOTE:** The frame at the bottom of the Posey Bed is open on one of the four sides. Always access the patient from the open frame side. The open frame allows easy access for using lifts and/or scales.

# MOVING THE PATIENT INTO THE BED

## PAGE 26

OF THE USER MANUAL

Please read the purpose and cautions.

- If appropriate, ask participants if they typically use lifts in their facilities and that they need to test the lift BEFORE using it with a patient.
- Ask them to read the procedure to you as you demonstrate.
  - This is the first time you're using the "Quick Check 10." Ask if they can remember where it's stored (in the pocket).
  - When you demonstrate step 5, ask them to turn to page 29 in their guides, and have ONE person read EACH item to you as you demonstrate it.

# **Invite Participant Questions!**

# INTEGRATE TWO PRACTICES

In this practice exercise, we integrate two practices: moving the patient and the emergency procedure in this sequence:

- **1.** Person A performs Moving the Patient into the Bed concluding with the "Quick Check 10" and leaving the patient securely in the bed.
- 2. Person B follows, performing the Emergency Patient Access and Exit procedure as quickly as possible while still performing every step correctly. (You'll need to observe this carefully.)
- 3. Person B then performs the Moving the Patient into the Bed task.
- 4. Person A performs the Emergency Patient Access and Exit procedure.

The goal is that at the end of this exercise, everyone should have practiced moving the patient once and successfully completed his or her second emergency practice.

□ ASK participants to turn to page 27 – Accessing and Caring for Patient in the Bed.

# Moving the Patient into the Bed

PAGE 26 OF THE USER MANUAL

## 

PURPOSE

\_\_\_\_\_

To describe how to safely move a new or existing patient into the Posey Bed.

**DO NOT** use a patient lift unless it was previously tested. Make sure there is enough clearance under the canopy frame to move the patient safely without damaging the canopy.

During patient care and when moving the patient into and out of the Posey Bed, lock all four (4) casters or lower the bed to the lowest point to engage the transfer brakes.

PROCEDURE

**ACAUTION** 

NOTE: Additional persons may be needed to safely move the patient.

Steps	Tasks	
1. Prepare the bed for the patient.	<ul> <li>a. Make sure the area around the bed is clear of any tripping hazards.</li> <li>b. Make sure the four (4) caster brakes are locked.</li> <li>c. Put the mattress in the flat position.</li> <li>d. Make sure perimeter guards are down.</li> <li>e. Unclip the quick-release buckle.</li> <li>f. Unzip the "U-shaped" side panel and secure it to the top of the canopy with the hook-and-loop tabs.</li> </ul>	
2. Move the patient to the bed.	<ul><li><b>a.</b> Speak gently and assure the patient that the bed is for their comfort and security.</li><li><b>b.</b> Move the patient to a safe area on the mattress.</li></ul>	
3. Complete the patient's care plan as needed.	<ul> <li><b>a.</b> Attach any IV lines, drainage tubes or monitoring lines, as required.</li> <li><b>b.</b> Talk to the patient to make sure he or she feels comfortable and secure at all times.</li> </ul>	
4. Close the access panels.	<ul><li>a. Zip panels completely. Check that the zipper is closed completely along its entire length.</li><li>b. Close the quick-release buckle, and tug at the clip to make sure it is engaged.</li></ul>	
5. Complete the "Quick-Check 10" (see page 29).		

## ACCESSING AND CARING FOR PATIENT IN THE BED

## PAGE 27 OF THE USER MANUAL

Please read the purposes, warnings and cautions.

- Ask participants to read the procedure to you as you demonstrate it.
  - When you demonstrate step 5, ask them to turn to page 29 in their guide and to have ONE person read EACH item to you as you demonstrate it.

# **Invite Participant Questions!**

## INTEGRATE TWO PRACTICES

In this practice exercise, we'll again integrate two practices – accessing the patient and the emergency procedure in this sequence:

- **1.** Person A performs Accessing and Caring for Patient into the Bed concluding with the "Quick Check 10" and leaving the patient securely in the bed.
- **2.** Person B follows performing the Emergency Patient Access and Exit procedure as quickly as possible while still performing every step correctly. (You'll need to observe this carefully.)
- 3. Person B then performs the Accessing and Caring for Patient into the Bed task.
- 4. Person A performs the Emergency Patient Access and Exit procedure.

The goal is that at the end of this exercise, everyone should have practiced accessing the patient once and successfully completed his or her third emergency practice.

□ ASK participants to turn to page 27 – Accessing and Caring for Patient in the Bed.

# **Invite Participant Questions!**

## TWO-MINUTE WARNING:

During this practice of the emergency procedure, each participant should be able to perform the task correctly without using notes in two minutes or less. Anyone who can't do this should be invited to practice the task again – without calling attention to any deficiency on his or her part – let's just try this again!

□ ASK participants to turn to page 28 – Moving the Patient Out of the Bed.

# Accessing and Caring for Patient in the Bed

## PAGE 27 OF THE USER MANUAL

# PURPOSE To describe how to safely access and provide care for a patient in the Posey Bed, which may include feeding, maintaining IVs and catheters, performing respiratory therapy, positioning, engaging visitors and administering medication. AWARNING Make sure the patient is a safe distance from the side panel and mattress is flat before accessing him or her. Serious injury may occur if the patient falls when the bed is raised due to the added distance. ACAUTION Lock all four (4) casters during patient care and when moving the patient into and out of the Posey Bed.

PROCEDURE

NOTE: Approach the patient gently to make sure he or she is comfortable and secure.

Steps	Tasks
<ol> <li>Access the patient. NOTE: Raise the bed using the bed control for easy access.</li> </ol>	<ul> <li>a. Make sure the area around the bed is clear of any tripping hazards.</li> <li>b. Make sure the four (4) caster brakes are locked.</li> <li>c. Unclip the quick-release buckle.</li> <li>d. Unzip the "U-shaped" side panel and secure it to the top of the canopy with the hook-and-loop tabs.</li> </ul>
<ol> <li>Zip the perimeter guard into the "up" position.</li> <li>NOTE: This should only be used when the side panel is in the open position and you are caring for the patient.</li> </ol>	
<b>3.</b> Complete the patient's care plan as needed.	<ul> <li><b>a.</b> Attach any IV lines, drainage tubes and monitoring lines as required.</li> <li><b>b.</b> Talk to the patient to make sure he or she feels comfortable and secure at all times.</li> </ul>
4. Close the access panels.	<ul><li>a. Zip panels completely. Check that the zipper is closed completely along its entire length.</li><li>b. Close the quick-release buckle and tug at the clip to make sure it is engaged.</li></ul>
5. Complete the "Quick-Check 10" (see page 29).	

## MOVING THE PATIENT OUT OF THE BED

PAGE 28 OF THE USER MANUAL Please read the purpose and cautions.

• Ask participants to read the procedure to you as you demonstrate it.

Because the steps in this procedure are similar to what we've already been practicing, we'll skip the individual practice exercise. Instead, we'll do a final integrated practice.

# **Invite Participant Questions!**

## INTEGRATED PRACTICE

In this practice, ask each person to perform one of the following scenarios:

- Scenario #1
  - Mr. Jones is returning to his bed following a visit to the bathroom. Please move Mr. Jones to his bed.
  - Mr. Jones later experiences breathing difficulty and must be intubated.

## Scenario #2

- Mrs. Hennessey is ready for her afternoon medication. Please access and medicate her.
- Mrs. Hennessey begins to show a bad reaction to her medication and must be accessed immediately.

This is the last practice before participants take the performance checkout. So, if anyone struggles with any task or step, or cannot accurately complete the emergency exit procedure without notes in two minutes or less, arrange for additional practice. Remember, anyone who doesn't pass the performance checkout cannot be allowed to interact with the bed.

Invite participants to review their manuals on their own – especially the parts that were not covered in this session.

Remind them when their performance checkout has been scheduled and that interacting with the bed requires successful completion.

# Moving the Patient Out of the Bed

for moving.

PAGE 28 OF THE USER MANUAL

ACAUTION

PURPOSE

**DO NOT** use a patient lift unless previously tested. This will ensure there is enough clearance under the canopy frame to move the patient safely without damaging the canopy.

During patient care and moving, lock all four (4) casters and lower or raise the bed to a height necessary

To describe how to safely assist a patient in exiting the Posey Bed for using the bathroom or other reasons.

**ACAUTION** 

PROCEDURE

**NOTE:** Additional persons may be needed for a safe move.

Steps	Tasks
<ol> <li>Access the patient. NOTE: Use the bed control to adjust to a height necessary for moving.</li> </ol>	<ul> <li>a. Speak gently to make sure the patient is comfortable and secure.</li> <li>b. Check that the patient is a safe distance from the panel.</li> <li>c. Make sure the area around the bed is clear of any tripping hazards.</li> <li>d. Position the bed to the lowest position.</li> <li>e. Put the mattress in the flat position.</li> <li>f. Make sure the perimeter guard is down.</li> <li>g. Unclip the quick-release buckle.</li> <li>h. Unzip the "U-shaped" side panel and secure to the top of the canopy with the hook-and-loop tabs.</li> <li>i. Detach tubes as needed.</li> </ul>
2. Assist the patient to an upright position. <b>NOTE:</b> Be aware that a reclined patient may have equilibrium problems when arising – support as needed.	<ul> <li>a. Help the patient slide both legs to the side of the bed.</li> <li>b. Modify as needed depending on patient's needs.</li> <li>c. Consider using gait belts/transfer belts to assist with patient move.</li> </ul>
<b>3.</b> Help the patient out of the bed.	Continue to talk gently to the patient to reassure him or her.

# FINAL PRACTICE

- Individually or in pairs, give participants scenarios to practice:
  - Mr. Jones' family is coming to visit, and you want to make sure he gets to the toilet before they
    arrive, etc.
  - Ask questions how do they know they did it correctly always focusing on what they can see, hear and/or feel.
- Observe and provide positive and corrective feedback as needed.
- When it looks like everyone has practiced at least once without any problems then go to the performance checkout.

## PAGE 29 OF THE USER MANUAL

## "Quick-Check 10"

## INTRODUCTION

Before leaving a patient alone, WALK AROUND THE BED to make sure that each condition is met.



- 1. Exterior: Make sure that the area around the bed is clear of any tripping hazards. Interior: Determine that the bed interior area is clean and free of clutter and hazards.
- 2. Mattress (at-risk patients not able to reposition themselves): To avoid entrapment, keep the head of the bed flat and use a cushion to elevate the torso, if necessary. If the head of the bed is raised, use gap-filler cushions.
- **3. Compartments:** Make sure the compartments are completely zipped closed with no gaps or kinks in the entire length of the zipper. Test by applying pressure along the entire length of the zipper.
- Zippers and Quick-Release Buckles: Verify that the zippers and quick-release buckles are completely closed.
- 5. Perimeter Guards (soft rails): Verify perimeter guards are fully unzipped on both sides.
- 6. **Tubing Ports:** If tubing and tube ports are in use, confirm all fluids are flowing freely; if tubing is not in use, make sure all ports are zipped closed.
- 7. Frame Condition: Verify the canopy, panels and netting have no tears, holes or abrasions and that the frame is firmly attached to the bed platform, undamaged and fully padded.
- 8. Casters: Make sure all four (4) wheels are locked.
- 9. Transfer Brakes: Confirm that the bed is in its lowest position and that all four (4) transfer brakes are engaged and are in solid contact with the floor.
- **10. A. Nurse Call Button:** If the patient's care plan allows it, the nurse call button is placed within reach of the patient.

**B. Monitoring:** Caregiver should sleep in the same room or use a device, such as a child monitoring system for constant monitoring.

# When Not to Use the Posey Bed

## PAGE 30 OF THE USER MANUAL

## PURPOSE

To make sure that the Posey Bed 8070 is properly assembled and is in good condition before patient use.

**A**WARNING

The Posey Bed 8070 **MUST** be inspected each time before leaving the patient's bedside. **DO NOT** use the Posey Bed 8070 and remove from service if any of the following conditions are found.

## **ACAUTION**

The repairs must be completed before the bed can be put back in service.



Canopy metal frame is bent or broken.



Canopy and netting have tears, holes, or abrasions.



Zippers produce gaps and/or openings when pressure is applied to the entire length of the zipper.



Zipper pull tabs are open/damaged and will not close the zippers.



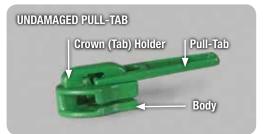
Canopy frame is not completely covered by foam padding.



Zippers and zipper pins are not completely seated in their boxes and/ or not all of the teeth are engaged.



Zippers do not close completely along the entire length. Gaps or openings in the zipper may allow the patient to open the zipper and fall out of bed. Always apply pressure along the entire length of the closed zipper to make sure there are no gaps or openings.



Undamaged pull-tab

# Quick Cleaning of the Posey Bed

## PURPOSE

PROCEDURE

AWARNING

To describe how to keep the Posey Bed clean and disinfected between complete bed and canopy cleanings.

Steps	Tasks
<ol> <li>Wipe the fabric with a cleaning agent NOTE: NEVER use a concentration of cleaning agent greater than recommended by the manufacturer.</li> </ol>	<ul> <li>a. Prepare a solution of diluted disinfectant or a water-based germicide.</li> <li>b. Use a damp cloth.</li> <li>c. Rinse with water to remove excess cleaning agent.</li> </ul>
2. Dry fabric.	Either wipe or air dry before use.
<b>3.</b> Clean the hook-and-loop strips.	Use a stiff brush to remove any lint or foreign materials.

ALWAYS wash the canopy when dirty or between patients to help prevent illness and transmission of

# Machine Washing the Posey Bed

infectious disease.

PURPOSE	To describe how to keep the Posey Bed clean and disinfected between patients.		
PROCEDURE	Steps Tasks		
	<ol> <li>Wash the canopy on one gentle cycle in cold water. NOTE: Water should be between 65-85°F (18-30°C) for approximately 25 minutes.</li> </ol>	<ul> <li><b>a.</b> Use a mild detergent.</li> <li><b>b.</b> Load panels loosely into washing machine.</li> <li><b>c.</b> Rinse thoroughly with water.</li> </ul>	
	2. Dry fabric.	Hang dry at room temperature or machine dry on air- only cycle (no heat).	
	<b>3.</b> Clean the hook-and-loop strips.	Use a stiff brush to remove any lint or foreign materials.	
ACAUTION	<ul> <li>DO NOT use industrial extractor-type laundry equipment, as this may damage the zippers and buckles.</li> <li>NEVER use bleach, harsh cleaners or solvents.</li> <li>ALWAYS attach hook-and-loop pieces together. Zip all zippers and connect quick-release buckles.</li> </ul>		
	4. Clean the bed frame.	Wipe frame undercarriage with a damp cloth. <b>NOTE:</b> Make sure cloth is damp, not wet.	
ACAUTION	<ul> <li>AVOID motor or bed controls when using water to clean bed frame, as this may damage the electrical components.</li> <li>UNPLUG the power cord before cleaning bed frame.</li> </ul>		

# **Posey Accessories**

## PAGE 32 OF THE USER MANUAL

THE FOLLOWING ACCESSORIES ARE APPROPRIATE FOR USE WITH THE POSEY BED 8070. **AWARNING NEVER** use any accessory with the Posey Bed other than those recommended by the Posey Company. A failure to heed this warning may result in serious injury or patient death.



**Posey Support Surface (8007)** To provide additional padding and to help secure sheets by tucking them underneath the support surface.



**Posey Incontinence Pad (8005A)** To help protect mattress and bedding from urine spills, 8005A can be used with the Posey Support Surface.



Posey Filler Cushions (8021)

Recommended to help reduce the risk of entrapment or injury for alone at-risk patients as a result of gaps created when the head of the bed is in the "up" position.



**Posey Bed Travel Cover (8071)** To provide a cover for the Posey Bed during transport and storage.



**Posey Torso Cushion (8025)** Recommended to elevate the torso when the head of the bed is DOWN, helping reduce the risk of entrapment or injury for at-risk patients.

# Troubleshooting and Frequently Asked Questions OF THE USER MANUAL

CANOPY	<ul> <li>Q: Why is the zipper difficult to open or close?</li> <li>A: It could be one or more of the following reasons: <ul> <li>a. Fabric, bedding or other material may be caught in the slider. To release material, back the slider off by pulling the tab in the opposite direction until the slider is free. Make sure the canopy is intact and there are no tears or holes in the fabric.</li> <li>b. Check the zipper teeth to make sure none of the coils are kinked.</li> <li>c. Use the pull-tab to slide the zipper. Each access panel zipper has a warning instruction plastic tag. If the plastic tag is damaged or becomes unreadable, it must be replaced.</li> </ul> </li> </ul>
	Call Posey at 1.800.447.6739 and request a free replacement (Part L9368).
	<ul> <li>Q: Why is the zipper separating after zipping up?</li> <li>A: The slider is damaged and does not properly engage the coils when it is being opened.</li> <li>DO NOT use the Posey Bed. This problem can be minimized by always using the zipper pull-tab to open the zipper. NEVER rip the access panel open because it will damage the zipper slider and prevent the zipper from closing completely.</li> </ul>
	<ul><li>Q: Where do I find the serial number of the Posey Bed canopy?</li><li>A: The serial number is at the bottom right of the head side of the bed.</li></ul>
FRAME	<b>Q: Why is the bed not raising or lowering?</b> <b>A:</b> Check to make sure the power cord is plugged into a 110 volt receptacle. Also check if the remote control is plugged in.
	Q: Where do I find the serial number of the Posey Bed frame?Image: A: The serial number is on the left side panel.A: The serial number is on the left side panel.
PATIENT LIFT	<b>Q: Can I use a patient lift with the Posey Bed 8070?</b> <b>A:</b> Yes, providing it has been tested to make sure there is enough clearance under the canopy frame. The clearance of the opening side access panel is 46" W x 38" H (117 cm x 97 cm) at bottom.
DISEASE AND SELF-CARE	To help reduce the chance of transmitting infectious disease, all caregivers must wash their hands after patient care.
ELECTRICAL REQUIREMENTS	The Posey Bed 8070 is intended for use in the United States and Canada. The bed uses a 110-120VAC/60Hz outlet.

# **Posey Limited Warranty**

## PAGE 33 OF THE USER MANUAL

## What Does This Warranty Cover?

Posey warrants to the original purchaser that the Posey Bed 8070 is free of defects in materials and workmanship. If the product is found to be defective in workmanship or materials, we will repair or replace it at our option at no charge, other than certain transportation and cleaning charges.

## How Long Does the Warranty Last?

This warranty is two (2) years from the date of purchase for the bed frame, five (5) years from the date of purchase for the mattress, and one (1) year from the date of purchase for the canopy. Useful life of the Posey Bed canopy is estimated at three (3) years, but may be extended by proper care, maintenance, laundering, avoiding sharp objects, aggressive and destructive patients, and avoiding direct exposure to sunlight. As of March 1, 2014, Posey will no longer repair any canopy that is more than 5 years old, as determined by the year and month of manufacture.

## What is Not Covered by this Warranty?

- Damage to the metal frame, nylon canopy, or other components caused by:
  - 1. use in unsuitable environmental conditions or failure to assemble or maintain the product in accord with user and service instructions;
- 2. abuse (including but not limited to patient damage), misuse, alteration, exposure to extreme heat, or by natural or external forces (such as flood or fire).
- Damage caused by alteration, modification, or repair, unless performed by Posey.
- Consequential or incidental damage, including but not limited to loss of income or profits, is not covered. The laws of some countries may
  not allow exclusion of such damages, so this limitation may not apply to you.

## **Cleaning and Shipping Charges:**

- Shipping costs for products sent to Posey must be pre-paid by you.
- · Posey will pay return shipping costs for repaired or replaced products via Ground Service, unless otherwise agreed.

## How to Get Service:

Contact the Posey Technical Service hotline (1.800.447.6739) to report the problem and get a Return Merchandise Authorization (RMA). Carefully pack and ship the returned product to us, with your RMA, to Posey Company, 5635 Peck Road, Arcadia, CA 91006-0020:

- In clean condition. (Canopies that are returned soiled or with an odor will be returned immediately and will not be inspected or repaired.)
- With proof of purchase, and
- Freight prepaid by you.

Posey will inspect the product and contact you within ten (10) business days of the receipt of the item to explain the results of our inspection and what is or is not covered.

## How Does State Law Apply?

This warranty is governed by the laws of the State of California, USA. It gives you specific legal rights. You may have other rights, which vary from state to state. This warranty does not affect any further rights that you have under the laws in your state for sale of consumer goods.

# **Technical Service From Posey**

We are happy to assist you between the hours of 6 AM and 5 PM Pacific Time, USA. Please call us at 1.800.44.POSEY (1.800.447.6739), or 1.626.443.3143. You can fax us at 1.800.767.3933.

Shipping: Ship items to Posey Company: 5635 Peck Road, Arcadia, CA 91006-0020 USA.

**Canopy Repairs:** To prevent damage in shipping, clean the canopy and close all zippers.

## **In-Warranty Repairs:**

- 1. Forward the product in clean condition, prepaid freight to the above address.
- 2. Clearly mark the shipping container with the RMA number.
- **3.** Include dated proof of purchase.

## **Out-of-Warranty repairs:**

- 4. Forward the product in clean condition, prepaid freight to the above address.
- 5. We will quote repairs on an item-by-item basis. All quotes include parts and labor.
- 6. If additional repairs are needed after the initial estimate, we will contact you within ten (10) business days of the receipt of the item to obtain approval of any extra charge.

**Repair turn-around:** Normally, we will ship the product back to you within three weeks from the date of receipt at our warehouse. If you return multiple units, add one week per unit. We will return all units in one shipment, unless otherwise agreed.

# **SECTION 3: PERFORMANCE CHECKOUTS**

. . . . . . . . . . . . .

# **PERFORMANCE CHECKOUT 1**

## SCENARIO 1: OCCUPANCY PREPARATION

For each task successfully completed, mark the check box in the column corresponding to the participant's Assessment ID (A, B, C, or D). If a task is not completed successfully, leave the check mark blank. **Room preparation (failure states introduced):** 

- Bed unplugged
- Transfer brakes not engaged
- Casters not locked
- Damage to nylon panels or netting

## **Participant Instructions:**

- This bed has been delivered and a patient will be arriving within the next 10 minutes. You need to make sure that the bed is safe for patient use.
- Please make the bed ready for patient occupancy.

Participant's Name	Assessment ID: A	Date
Participant's Name	Assessment ID: ${\boldsymbol{B}}$	Date
Participant's Name	Assessment ID: $\boldsymbol{C}$	Date
Participant's Name	Assessment ID: $\boldsymbol{D}$	Date

Checked bed for proper assembly	A Yes	<b>B</b> Yes	C Yes	D Yes
1. Checked that the canopy metal frame was unbent and unbroken.				
<ol> <li>Checked that all <b>4 casters were</b> locked (and clicked when the metal clip was pressed).</li> </ol>				
3. Checked that the <b>bed felt secure</b> and had no loose or moving parts.				
4. Set the bed to its lowest position, then checked that all 4 transfer brakes physically touched the floor.				
5. Checked that the canopy frame was completely covered by foam padding and had no foam visible.				
6. Checked that the canopy and netting were sound, clean and free from any tears, holes or cuts.				
7. Checked that all zippers were closed completely and are engaged.				
8. Checked that when weight was applied along the entire length of each zipper, the <b>zipper held completely</b> without gaps or openings.				
Checked bed for proper preparation	A Yes	<b>B</b> Yes	C Yes	D Yes
9. Made sure that the bed was clean.				
10. Made sure that a patient could be easily accessed from all 4 sides of the bed.				
11. Made sure that the bed was positioned so that the patient would not come into contact with walls, furniture or othere equipment.				
12. Made sure that the bed was plugged into a wall outlet.				
13. Made sure that the power cord was out of the way way to avoid a tripping hazard.				
14. Made sure that the bed was away from all open flames, smoking materials or heat sources including baseboard or space heaters.				
15. Made sure that the bed was free of clutter or foreign objects.				
16. Made sure that netting/canopy had no sharp or hanging objects.				

# **PERFORMANCE CHECKOUT 2**

	• • • • • • • • • • • • • • • • • • • •				
SCENARIO 2: MOVING THE	, , , , , , , , , , , , , , , , , , , ,	For each task successfully completed, mark the check box in the column corresponding to the participant's Assessment ID (A, B, C, or D). If a task is not completed successfully, leave the check mark blank.			
PATIENT	Room preparation (failure stat	Room preparation (failure states introduced):			
	<ul><li>Tripping hazard present</li><li>Head of bed angled up</li></ul>	<ul> <li>Bed height raised (and transfer brakes not engaged)</li> <li>Soft rails zipped up into raised position</li> </ul>			

- **Participant Instructions:**
- Your patient for the bed has just arrived.
  Please make sure that the bed is ready and safe; then move the patient into the bed and <u>sit him or her</u> up, then move the patient out of the bed again.

Participant's Name	Assessment ID: A	Date
Participant's Name	Assessment ID: B	Date
Participant's Name	Assessment ID: C	Date
Participant's Name	Assessment ID: D	Date

Move patient INTO bed	A Yes	<b>B</b> Yes	C Yes	D Yes
17. Made sure that area around bed was clear of any tripping hazards.				
18. Made sure that all 4 casters were locked.				
19. Moved mattress into flat position (lowered the head).				
20. Moved the bed to its lowest position (lowered the height).				
21. Checked that all 4 transfer brakes physically touched the floor.				
22. Unzipped the perimeter guard/soft rail on near side.				
23. Unclipped the quick-release buckle on the side panel zipper tab.				
24. Unzipped the "U-shaped" side panel and secured it to the top of the canopy with the hook-and-loop tabs.				
25. Moved the patient into the bed.				
26. Closed and zipped the access panels.				
27. Completed the "Quick Check 10" (follows):				
28. Canopy and netting intact.				
29. Mattress fully enclosed.				
30. Enclosure clutter-free.				
31. Bed height low and bed control outside enclosure.				
32. Head of bed elevated.				
33. All 4 casters locked.				
34. Zippers fully closed and buckled.				
35. Perimeter guard unzipped.				
Move patient OUT OF bed	A Yes	<b>B</b> Yes	C Yes	D Yes
36. Made sure that the bed is positioned at the lowest height.				
37. Made sure that the mattress is flat.				
38. Unclipped the quick-release buckle on the side panel zipper tab.				
39. Unzipped the "U-shaped" side panel and secured it to the top of the canopy with the hook-and-loop tabs.				
40. Moved the patient out of the bed.				

# **PERFORMANCE CHECKOUT 3**

## SCENARIO 3: EMERGENCY PATIENT ACCESS

For each task successfully completed, mark the check box in the column corresponding to the participant's Assessment ID (A, B, C, or D). If a task is not completed successfully, leave the check mark blank.

## Room preparation (failure states introduced):

- Casters not locked
- Bed set to medium height
- Bed positioned too close to one wall for access from all 4 sides
- Mattress positioned with head and knee sections both raised

## **Participant Instructions:**

- The patient in this bed is "coding" and needs to be accessed quickly in order to be intubated.
- Please configure the bed for emergency access.

Participant's Name	Assessment ID: A	Date
Participant's Name	Assessment ID: B	Date
Participant's Name	Assessment ID: C	Date
Participant's Name	Assessment ID: D	Date

Checked bed for safety	A Yes	B Yes	C Yes	D Yes
41. Moved the bed away from the wall.				
42. Made sure that all <b>4 casters were locked</b> .				
43. Moved the bed to its lowest position (lowered the height).				
44. Checked that all 4 transfer brakes physically touched the floor.				
45. Moved mattress into flat position (lowered the head and knee sections).				
46. Unclipped the quick-release buckle on ALL panel zipper tabs.				
47. Unzipped ALL panels on ALL 4 SIDES.				
48. "Attended to" the patient in the bed.				

# **SECTION 4: CERTIFICATES OF COMPLETION**

# CERTIFICATE OF COMPLETION

NAME (PRINT)

HAS DEMONSTRATED COMPETENCY IN POSEY® BED TRAINING

SIGNATURE (TRAINEE)

DATE

SIGNATURE OF PERSON VALIDATING COMPETENCY

DATE



Posey Company • 5635 Peck Road Arcadia, CA 91006-0020 USA

# CERTIFICATE OF COMPLETION

NAME (PRINT)

HAS DEMONSTRATED COMPETENCY IN POSEY® BED TRAINING

SIGNATURE (TRAINEE)

DATE

SIGNATURE OF PERSON VALIDATING COMPETENCY

DATE



Posey Company • 5635 Peck Road Arcadia, CA 91006-0020 USA

Posey Bed 8070

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# CERTIFICATE OF COMPLETION

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# **Posey<sup>®</sup> Bed 8070** Training Manual





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