## Overview of Human Factors and Ergonomics Activities to Support the Ongoing COVID-19 Response

Research and design efforts conducted by Human Factors and Ergonomics experts are available to support the ongoing COVID-19 response, as well as preparation and response efforts for future public health threats. These efforts are critical for enhancing effectiveness and avoiding errors by healthcare professionals and patient/family members as they quickly learn new procedures, share rapidly changing information, and make tough decisions over the coming months.

As healthcare providers and personnel are responding to COVID-19 they are facing new challenges in fulfilling their daily responsibilities, including increased workload, screening of individuals prior to entering healthcare facilities, reallocating personnel and cross-training in new departments, expediting testing procedures, and donning/doffing personal protective equipment more frequently.

Areas where Human Factors can offer support and expertise include<sup>1</sup>:

- 1. Developing guidelines and training materials for protecting health care workers; supporting good team performance when operating with Personal Protective Equipment (PPE), and PPE cleansing/reuse.<sup>2</sup>
- 2. Developing and evaluating checklists and tools for safely and effectively conducting needed patient care activities.
- 3. Developing and evaluating decision support tools for health care professionals when assessing patients and ordering tests and medications<sup>3</sup>.
- 4. Evaluating new devices (e.g. masks, test equipment) and technologies (e.g., telehealth) for usability and effectiveness.
- 5. Proactive risk assessment and risk mitigation strategies for new tools, methods and workflows<sup>4; 5</sup> to reduce the likelihood and severity of harm.
- 6. Workflow and process design to support the smooth coordination of the many different organizations and individuals (including patients and family members) critical for pandemic and public health threat responses, including COVID-19.
- 7. Effective online communication of rapidly changing processes and procedures across healthcare organizations and the public.
- 8. Designing tools and communication materials (e.g. discharge instructions for a COVID + patient, patient instructions for how to set up for video visits) to support patient & family actions.
- 9. Selecting equipment and processes that reduce the risk of physical injury to healthcare workers when repositioning and mobilizing patients<sup>6</sup>, while also reducing the number of staff required to be in contact with the patient.
- 10. Evaluation and design of patient placement layout and viewability considerations to support effective monitoring of patients.

Human factors and ergonomics experts are currently at work across the healthcare system, and are available to support state health organizations and the Centers for Disease Control as they confront this crisis.

## About HFES

With over 4,600 members, HFES is the world's largest nonprofit association for human factors and ergonomics (HF/E) professionals. HFES members include psychologists and other scientists, designers, and engineers, including researchers, practitioners, and federal agency officials, all of whom have a common interest in working to develop safe, effective, and practical human use of technology, particularly in challenging settings. HFES has a particularly strong expertise pertaining to the safe and effective use of medical technology, in order to ensure the safety of patients and healthcare workers.

## References

- 1. Gurses, A. P., Tschudy, M. M., McGrath-Morrow, S., Husain, A., Soloman, B., Gerohistodoulos, K. A., & Kim, J. (in press). Overcoming CoVid-19: What can human factors and ergonomics offer? <u>Journal of Patient Safety and Risk Management</u>.
- Andonian, J., Kazi, S., Therkorn, J., Benishek, L., Billman, C., Schiffhauer, M., . . . Hsu, Y.-J. (2019). Effect of an intervention package and teamwork training to prevent healthcare personnel self-contamination during personal protective equipment doffing. <u>Clinical Infectious Diseases</u>, 69(Supplement\_3), S248-S255.
- 3. Fairbanks, T. (Producer). (2020). <u>Overview of MedStar Human Factors Activities for COVID.</u> HFES Town Hall Webinar: Facing the Coronavirus (COVID-19): Human Factors Considerations.
- 4. Katz, M. J., Osei, P. M., Vignesh, A., Montalvo, A., Oresanwo, I., & Gurses, A. P. (2019). Respiratory Practices in the Long-term Care Setting: A Human Factors–Based Risk Analysis. Journal of the American Medical Directors Association.
- 5. Xie, A., Rock, C., Hsu, Y.-J., Osei, P., Andonian, J., Scheeler, V., . . . Gurses, A. P. (2018). Improving daily patient room cleaning: An observational study using a human factors and systems engineering approach. <u>IISE transactions on occupational ergonomics and human factors</u>, 6(3-4), 178-191.
- 6. Wiggermann, N., Zhou, J., & McGann, N. (2020). Effect of Repositioning Aids and Patient Weight on Biomechanical Stresses When Repositioning Patients in Bed. *Human Factors*, 0018720819895850.