# Safe Patient Handling:

Reducing Risk Through
Evidence Based Interventions

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#### **Disclaimers**

 Susan L. Salsbury BS, OTR/L, CDMS, CSPHP is on the Speaker Bureau for Sage, now part of Stryker.

## **Objectives**

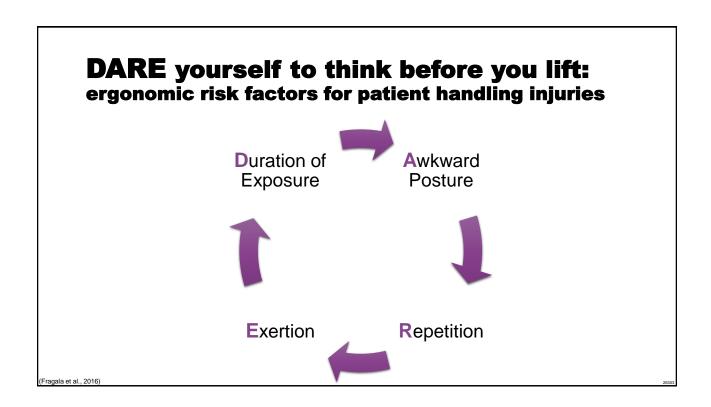
- 1. Identify risk factors for Patient Handling Injuries
- 2. Identify strategies and equipment for safe patient handling
- 3. Observe hands-on demonstrations for providing best care while protecting the vulnerable caregiver.

#### The science of patient movement: why is it important? GI/GU **Improved** Muscle Wasting Atelectasis Functional independence Calculi 6-min walk distance Muscle strength Pneumonia Neurocognitive UTI ICU delirium Function score Deficit Decreased Pressure Ulcers ICU length of stay Oxygenation Constipation Depression Hospital length of stay **Duration of mechanical ventilation** Functional Reduced Deconditioning Dependence CARDIO/PULMONARY SKIN AHRQ Safety Program for Mechanically Ventilated Patients: Early Mobility Guide 2017

# **Physiology of HCW injury**

- Repetitive tasks
- Awkward postures
- Weights exceeding safe limits for lifting/moving
- Improper/absence of equipment

S Department of Veteran's Affairs. VISN 8 Patient Safety Center of Inquiry Safe Patient Handling and Movement. Biomechanics of Patient Lifting. http://www.visn8.va.gov/patientsafetycenter/safepthandling/biomechanicsofpatientlifting\_marras.pe



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# Work-related musculoskeletal disorders (WMSDs)

- Injuries to muscles, nerves, tendons, joints, cartilage and intervertebral discs
- Work environment contributes to the condition
- Condition made worse or persists due to work condition
- WMSDs are not slips, trips or falls



(www.cdc.gov

### Significance of the problem

- Nursing ranks among the top 10 most hazardous occupations for injuries to muscles and joints<sup>1</sup>
- In the U.S., musculoskeletal disorders accounted for 32% of all occupational injuries and illness cases in 2014<sup>1</sup>
- Direct and indirect costs associated with back injuries to healthcare workers have been estimated to be \$20 billion annually<sup>2</sup>

1. U.S. Department of Labor/Bureau of Labor Statistics. (2015). Nonfatal occupational injuries and illnesses requiring days away from work [Press release]. Retrieved from <a href="http://www.bls.gov/news.release/dd/dos/2.pdf">http://www.bls.gov/news.release/dd/dos/2.pdf</a>
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### **High-Risk Tasks**

- Transferring (wheelchair, stretcher, bed)
- Lifting (chair, bed, floor)
- Repositioning (up in bed, lateral, in chair)
- Bathing in bed
- · Making occupied bed
- · Applying anti-embolism stockings
- · Feeding patients
- Standing patient/ambulation
- · Applying/changing dressings
- · Placing x-ray cassette behind patient

# Patient handling tasks are high risk activities due to:

- · Amount of weight lifted
- Awkwardness and unpredictable nature of the load being moved or lifted (patient)
- Sustained awkward positions used when providing nursing care, such as bending over beds or chairs while back is flexed
- Repetitive lifting and repositioning
- Excessive pushing and pulling

Nelson, A., & Baptiste, A. S. (2004). Evidence-based practices for safe patient handling and movement. Online Journal of Issues in Nursing, 9(3). Retrieved from http://www.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/TableofContents/Volume92004/No3Sept04/EvidenceBasedPractices.asp

### **Solution Strategies**

- Eliminate the need to perform the high risk activity
- Redesign the task to eliminate components of the high risk task
- Minimize the frequency of the high risk task
- Make optimum use of equipment features to facilitate
- Reduce risk through application of an aiding device

# **Safety culture:**Patient and Healthcare Worker



