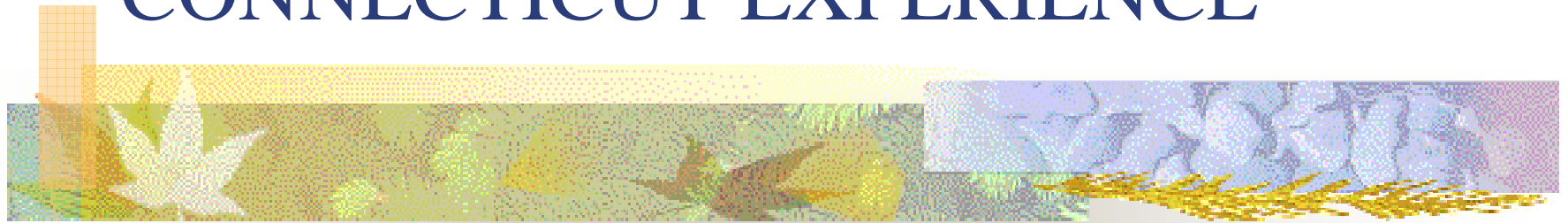


SAFE PATIENT HANDLING: THE CONNECTICUT EXPERIENCE



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OBJECTIVES

- At the end of this presentation, participants will be able to:
 - Defend the need for implementing a safe Patient Handling Program (SPHP), supported by Evidence Based Research.
 - Design a SPHP that is facility appropriate.
 - Implement a SPHP in his/her work setting.

THE “SPH PROGRAM”

- **Our Goals:**

- Avoid manual lifting of patient in every patient care situation.



- Literature describes this activity as “deplorable.... inefficient, dangerous to the nurse, and often painful and brutal to the patient” (Owen, 1999, p.15, cited in Nelson & Baptiste, 2004).

Goals

- Perform safe patient handling using assistive equipment and devices.





Goals

- Reduce musculoskeletal disorders among care givers.
- Improve quality of care for patients.
- “Work- related musculoskeletal disorders are the leading occupational health problem plaguing the nursing workforce” (de Castro, 2004).

The Program

- **Stage 1**
- **The planning stage:**
 - Meetings
 - IDT
 - General staff
 - Training (Assessment)
 - Acquiring and assembling equipment





Stage 1

- **Purpose:**

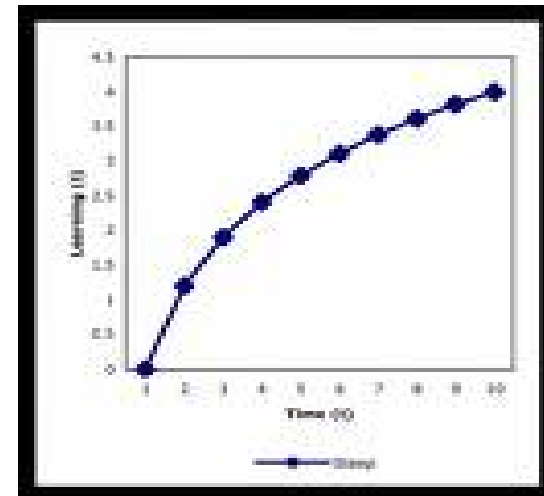
- Provide information
- Role identification
- Create “A Culture of Safety”

- **Partnership**

- Collaborative effort

Stage 1

- Growing pain
- Learning curve
- Exciting





Stage 11

- **Training and Implementation:**
 - Training
 - “Train the Trainer”
 - Other nursing staff
 - Recognize ergonomic risk factors
 - Body mechanics
 - Proper use of lifting equipment
 - Proper maintenance of lifting equipment.



Stage 11

- **The Equipment:**
 - Total Lift
 - Sit to Stand Lift
 - Gait belt with handles
 - Ergo slide

Stage 11

- **Total Lift**



- **Sit to stand Lift**





Phase 111

■ **Maintenance:**

- On going training and retraining (done by “Train the Trainer” team)
- Quarterly audits and evaluations



Outcome

- **Total # of lift transfer injuries:**
 - Pre-program 05/02 – 04/03
 - 15% of injuries – lift transfer injuries
 - Year 1 Post- program 07/05 – 07/06
 - No lift transfer injuries (0%)



Outcome

- Total lift transfer losses:
 - Pre-program 05/02 – 04/03
 - \$802 (18%)
 - Year 1 post-program 07/05 – 07/06
 - \$0



Outcome

- Improved customer satisfaction:
- Quotes from nursing staff
 - “Less back injuries”
 - “Decrease skin tears and bruises”
 - “Save your back, use lift”
 - “A good thing”
 - “Go to more facilities with the lifts”
 - “Thank you very much”



Summary

- **Over a year ago:**
 - We partnered with another Co.
 - Implemented a APH Program:
 - Educate and train
 - Increase # of patient handling equipment
 - Instituted a coordinator to monitor the program
- **Today?**



References

- De Castro, A. B. (September 30, 2004) “Handle With Care: The American Nurses Association’s Campaign to Address Work-Related Musculoskeletal Disorders” *Online Journal of Issues in Nursing*. Vol. #9No. #3, Manuscript 2. Available: www.nursingworld.org/ojin/topic25/tpc25_2.htm
- Nelson, A., Baptiste, A. (September 30, 2004) “Evidence-Based Practice for Safe Patient Handling and Movement” *Online Journal of Issues in Nursing*. Vol. #9 No.#3, manuscript 3. Available: www.nursingworld.org/ojin/topic25/tpc25_3.htm