

Safe Patient Handling in Home Healthcare – Tales From the Field

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New Rules

- The U.S. Congress has taken notice of this issue. In January, Representative John Conyers, Jr., introduced H.R. 378 “Nurse and Patient Safety & Protection Act of 2007.” This bill is aimed at caregivers and is meant to reduce the risks that nurses and other health providers take when manually lifting patients. In introducing this bill, Congress recommends that a safe patient handling standard for registered nurses and other health care providers is a critical component in increasing patient safety, protecting nurses, and addressing the nursing shortage. Under this bill, a new OSHA standard will be implemented which shall require the elimination of manual lifting of patients by direct-care registered nurses and other health care providers, except during a declared state of emergency. The standard shall include a musculoskeletal injury prevention plan, which includes the use of mechanical devices, staff education and training, identification of hazards and trend analysis. The bill also requires the Secretary of Health and Human Services to establish a grant program for purchasing safe patient handling equipment for health care facilities.

Home Health Dilemma

- Caring for patients in the home environment is challenging enough without having to decide how to lift and maneuver each patient safely, causing harm to the caregiver or patient .

Home Health Dilemma

- Home Health agencies need to be proactive and Educate their staff on new and improved methods of moving patients.
- These methods need to be safe, cost effective, efficient and easily implemented by all health care professionals.

Challenges

- All health care settings face similar challenges involving safe patient lifting,
- Patient resistance in using mechanical lifts or other equipment.
- Continued need for ongoing staff education to insure continued competency.
- Challenges associated with obtaining the equipment, including expense and insurance coverage.

Challenges

- Staff/caregiver compliance in the use of the equipment. Many caregivers will choose the risk of being hurt rather than use cumbersome equipment in order to move patients.
- The need to develop and maintain appropriate policies, procedures and guidelines to foster safe use of the equipment.
- Proper storage and maintenance of equipment.
- The need for providers to adapt equipment as the patient's needs and physical status change during the course of care.

Challenges

- Home care offers several additional and unique challenges involving safe patient handling due to the setting in which care is provided:
- The clinician is a “guest” in the patient’s home and does not have control over their environment.
- The clinician is usually on the home visit alone and cannot easily ask for assistance from another caregiver.
- Every home setting and situation is different and thus requires customized solutions that fit with the layout and components of the patient, family and home.

Challenges

- Space is typically a factor. Most homes can barely accommodate a hospital bed, never mind additional equipment for moving the patient. Lifting equipment is usually cumbersome and awkward to use in the home.
- Even if space is not a factor, some patients may opt not to use equipment such as a hospital bed. They may want to stay in their own beds and be able to sleep with their spouses or significant other. Having this choice and control over their situation is usually the very reason why patients and families choose home care.
- Equipment costs and issues with insurance coverage are often major considerations.

What Happens

- With new technologies, new federal guidelines, and numerous quality initiatives geared toward improved quality of patient care, the focus in the homecare setting is typically on the patient.
- With the aging workforce of nurses, home health aides, and other Para-professionals, however, the pendulum seems to be swinging towards the caregiver with concerns relating to injuries, fatigue, anxiety, and the ability to cope with sick patients on a daily basis.

Fact

- The staff trained to lift and move patients are the HH Aides. They spend a longer time in the home.
- Injuries among HH Aides are higher than any other group. 2/3+50% do not return to full duty.

Fact – Continued

- Home Care injuries are unique because they range from direct patient care to MVA. They are unpredictable because they occur inside and outside the patients home.
- The Band-Aid Response to the stage 4 problem has created a need to implement Federal guidelines and new technology

A System That Works

- Consistency
- Education
- Get Buy in from the staff
- Have protocols that protect both caregivers and patients
- Do the change across the board

Conclusion

- There is significant room for improvement in preventing injuries to caregivers when lifting and transferring patients in the home.
- Making the shift to safe patient handling within the home care setting requires a comprehensive and customized approach that includes both cultural and procedural changes to the home care agency, staff, patients and families, as well as an advanced approach by equipment manufacturers, payers and perhaps even legislation.
- Although these safe patient handling challenges will not be overcome easily, it is an appropriate and vital mission to protect caregivers and improve the quality of patient care.