

SUBJECT: Safe Patient Handling (SPH) Policy (PNMH, HVC, and ASC)	REFERENCE NUMBER: I.84-HSM-8260-0704
APPROVALS: Director, Park Nicollet Employee Occupational Health & Safety (EOHS)	ORIGIN DATE: 7/04
	REVISION NUMBER: 1
	REVISION DATES: 1/10

PURPOSE:

This policy describes ways to ensure that direct patient care staff use safe patient handling techniques in all patient care areas to minimize to the extent possible manual lifting of patients during transferring and repositioning tasks.

RESPONSIBILITY:

Employee Occupational Health & Safety in collaboration with nursing leadership and the PNHS SPH committee will maintain this policy.

POLICY:

Park Nicollet Health Services (PNHS) strives to ensure that patients are cared for safely, while maintaining a safe work environment for employees. To accomplish this, direct patient care staff will assess patient handling tasks in advance to determine the safest method to accomplish these activities. Safe patient handling equipment will be used to minimize the risk of injury during all patient handling tasks by reducing and/or eliminating manual lifting and moving of patients by using the appropriate safe patient handling equipment.

DEFINITIONS:

Direct patient care staff: An individual doing the job of directly providing physical care to patients.

Safe patient handling: A process based on scientific evidence on causes of injuries, that uses safe patient handling equipment rather than people to transfer, move, and reposition patients to reduce workplace injuries. This process also reduces the risk of injury to patients.

High risk patient handling task/technique: All patient handling tasks can have a risk of musculoskeletal injury for staff performing the tasks. These include but are not limited to transferring, lifting, repositioning, assistance with activities of daily living, and other care tasks. During any patient handling task, if any caregiver is required to lift more than 35 lbs. of a patient's weight, then the patient should be considered to be "total assist" and assistive devices should be used to complete the task.

Manual lifting: Lifting, sliding, transferring, repositioning, and moving patients without the use of approved safe patient handling equipment.

Safe patient handling equipment: Engineering controls, lifting and transfer aids, or mechanical assistive devices used by nurses and other direct patient care workers instead of manual lifting to perform the acts of lifting, transferring, and repositioning of patients.

PROCESS

I. Responsibilities

A. Organizational leadership shall:

1. Support the implementation of this policy.
2. Furnish sufficient safe patient handling equipment to allow staff to use them when needed for transferring and repositioning patients.
3. Provide staffing levels sufficient to comply with this policy.

B. All managers shall:

1. Ensure employees complete initial and ongoing training as required if employees show non-compliance with safe patient handling techniques outlined in this policy.
2. Ensure patient handling tasks are assessed prior to completion and are completed safely, using the appropriate safe patient handling equipment.
 - a. Ensure safe patient handling equipment is available, regularly maintained in proper working order, and conveniently and safely stored.
 - b. Work with the PNHS SPH committee to determine what safe patient handling equipment is indicated for their patient population.
 - c. Forecast for the monetary resources and provide the safe patient handling equipment indicated for their patient population.
 - d. Evaluate employees periodically to ensure they are following the safe patient handling policy.
 - e. Provide employees with appropriate continuing education on ergonomics and safe patient handling equipment when indicated by injury trends or failure to follow safe patient handling guidelines.
 - f. Coach and progressively discipline employees who do not follow the safe patient handling policy by engaging in high risk patient handling tasks and techniques.
 - g. Encourage employee feedback and participation in the safe patient handling program.
 - h. Support staff usage of safe patient handling equipment. Address patient or patient family's resistance to such equipment use.
 - i. Refer all staff reporting incidents/injuries to EOHS for evaluation and completion of required documentation.
 - j. Receive and evaluate their unit's patient handling injury report biannually

C. All employees shall:

1. Comply with the safe patient handling provisions outlined in this policy.
2. Use appropriate safe patient handling equipment during performance of patient handling tasks.
3. Complete initial and annual training as required, and review with management if demonstration of non-compliance with safe patient handling is determined by management.
 - a. Refrain from use of high risk patient handling techniques.

- b. Perform a patient mobility assessment to assist employees in selecting the appropriate safe patient handling equipment based on individual specific patient characteristics.
- c. Follow the safe patient handling plan for patient care as determined by the patient assessments and outlined in the medical record.
- d. Participate in the safe patient handling program by relating safety concerns and suggestions to their immediate supervisor/manager and EOHS.
- e. Immediately report any incidents/injuries that occur on the job to the employee's supervisor/manager and EOHS.

D. PNHS safe patient handling committee shall:

- 1. Identify tasks and locations within Methodist Hospital, HVC, and Ambulatory Surgery that pose greatest risks of injuring staff or patients in the patient handling process.
- 2. Research and recommend best equipment for minimizing injury risks involved in handling patients.
- 3. Develop appropriate education and training methods for safe patient handling practices in the organization.
- 4. Coordinate with departments including engineering and facilities on remodels and construction projects to ensure that best patient handling and equipment practices are considered into any changes to the physical spaces in which patient care is delivered.
- 5. Complete ongoing evaluation of safe patient handling program effectiveness including injury rates, modified/lost work days, etc.
- 6. Develop a patient mobility assessment and decision making criteria to guide recommendations for safe patient handling tasks.
- 7. Develop and oversee program for "peer leaders" regarding safe patient handling
- 8. Facilitate incident analysis reviews to learn and improve the process for patient handling tasks.
- 9. Review and update safe patient handling policy for the organization using the latest evidence based research on industry best practices.

II. Compliance:

- A. It is the responsibility of employees to comply with the safety policies and procedures to protect their health and safety, as well as that of co-workers and patients during patient handling activities.
- B. Non-compliance indicates a need for retraining, coaching or discipline.

III. Patient mobility assessments:

- A. Patient mobility needs are assessed upon admission and on an on-going basis. This includes assessment of both mental cognition and physical abilities. If the safe patient handling procedures cannot be safely applied staff are to seek consultation from a peer leader, supervisor, or management.

IV. Education and training:

- A. Employees whose job description requires utilization of safe patient handling equipment will receive education in ergonomics, safe patient handling equipment and techniques, and injury/incident reporting during employee orientation and as indicated.
- B. Managers provide new employees with additional education on safe patient handling equipment to be used in their departments. A copy of education and competency records are maintained in the employee's file.

V. Maintenance and inspection:

- A. Employees who find broken mechanical lifting devices complete a work request and remove the equipment from service.
- B. Employees who find broken patient handling equipment report this to managers for determination if equipment is to be repaired and removed from service.
- C. Managers forecast for monetary support for mechanical lifting devices and handling aids replacement at the end of the equipment's life expectancy.
- D. Managers, upon noticing trends in safe patient handling equipment device failure, confers with the maintenance department to determine if the item should be on a preventative maintenance program, should be inspected more frequently, or if the item needs to be replaced.
- E. Periodic inspections or preventative maintenance programs are used when indicated for safe patient handling equipment.

VI. Reporting of incidents/injuries:

- A. Staff shall report to EOHS all symptoms resulting from or related to patient handling.
- B. Supervisors shall maintain Accident Reports and supplemental injury statistics as required by the facility.

VII. Policy review

- A. This policy is reviewed on an annual basis and revised as necessary and/or when significant changes occur to the scientific knowledge regarding safe patient handling.