



The Need for Safe Patient Handling Programs

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Healthcare today faces numerous challenges and opportunities for improvement, and many of these issues relate to providing efficient high level care in a cost efficient manner. Efforts to meet these challenges are driven by better standards for care evolving from the evidence base created through research and practices which when applied lead to better outcomes. However, the demands presented to the healthcare practitioner to integrate the new concepts for care into the current environment of care have added to the complexity of these challenges. One example of new directions for care is the recognition of the importance of early mobilization and progressive mobility in acute care settings, and on the other hand the importance of regaining and sustaining mobility in rehabilitation and long term care settings. Promoting mobility is now recognized as an important part of delivering care, however, the challenges and difficulties presented to the caregiver in providing what is required to help patients with their mobility is yet to be well recognized and addressed. Today there are solutions available to facilitate assisting patients with mobility which can be explored, but an in-depth understanding of the need for these solutions and the benefits which they can provide is lacking.

Senior leadership within healthcare organizations must make decisions on how to allocate and spend funds available in efforts to operate and improve their healthcare delivery systems. As they consider these decisions, it is important that they understand where to invest funds wisely in promoting opportunities for the best outcomes. The purpose of this article is to stimulate thoughts as to how the healthcare industry can best move forward in some emerging and developing issues related to facilitating mobility for patients. Many organizations have begun looking at safe patient handling within their facilities because of the high levels of musculoskeletal injuries being suffered by healthcare workers providing direct patient care. From the patient's perspective, wound prevention and care, along with falls management are ongoing difficult issues related to mobilization.

Safe patient handling and promotion of mobilization has become an emerging effort in many healthcare organizations and those individuals attempting to progress in this area have been presented with many obstacles. Much has been written about these obstacles and many good thoughts and ideas have surfaced and progress is ongoing. One such thought which merits much consideration and may hold one of the best routes for improvement is the inter-relationship that exists between safe patient handling, wound prevention and falls management. This inter-relationship is proposed from the idea that solutions available to address each of these three individual areas

overlap and provide benefits by yielding improvements across all the three areas. In addition, these solutions address improvement to the quality of care for patients while reducing occupational risk to caregivers. The remainder of this article will focus on addressing the occupational risk presented to the caregiver and the need to prevent what are called "patient handling injuries". However, the benefits to be achieved through prevention of "patient handling injuries" are to be considered much greater than the very worthwhile objective of improving the quality of work life for caregivers.

Nurses and other healthcare workers involved in direct patient care, who dedicate their professional lives to the care of others, are a precious resource within the healthcare industry to be highly valued and preserved. There is a need to continue to raise awareness among senior healthcare leaders and policy makers about investing in preventive strategies to reduce occupational risks which expose these caregivers to disabling injuries. From a financial perspective, investments in prevention are highly rational. In fact, over 60 percent of chief financial officers in a survey done by Liberty Mutual Insurance Company reported that each \$1 invested in injury prevention returns \$2 or more. Further work is needed to build and publicize the evidence base which will encourage healthcare leadership to allocate appropriate funds and invest in prevention efforts.

In addition to the financial justification, there are numerous other reasons to reduce occupational risks to caregivers working in healthcare facilities who continue to be one of the most at-risk professions for experiencing musculoskeletal disorders such as back injuries and other strains and sprains. Each year the Bureau of Labor Statistics generates reports on occupational injury data and in a news release issued on November 19, 2015 it was reported that the incidence rate for nursing assistants in cases for 2014, for overexertion type injuries was 204.6 per 10,000 full time workers, more than five times greater (35.6) than for all workers for this type of event or exposure. Furthermore, healthcare and social assistance had an incidence rate of 121.3 cases per 10,000 full-time workers, the highest among the private industry sectors with greater than 100,000 cases. Musculoskeletal disorders accounted for 39 percent of the total injuries and illnesses reported in the healthcare industry in 2014. This should not be acceptable that caregiver injury rates continue at such a high rate when there are solutions available which can reduce exposure to injury and improve the quality of work life for caregivers. Remember this improved quality of work life for caregivers would also contribute to quality of care for patients and can reduce expenses created by occupational injuries.

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Currently, evidence based technology is available, including patient lifts, lateral transfer devices, re-positioning aides and bed systems, which can reduce and eliminate the risk of back injuries to caregivers. Published research demonstrates that the forces generated on the musculoskeletal structure by manual patient lifting and repositioning tasks are greater than the body can tolerate. No matter how biomechanically correct a caregiver performs a manual lift or movement of a patient, in most instances such procedures found to be scientifically unsafe. Understanding that manual patient handling activities are beyond the physical capability of caregivers clearly demonstrates the need to acquire technology for lifting, moving and repositioning patients.

Today the concepts of safe patient handling and mobility have been growing and progress has been made. We have an annual Safe Patient Handling Conference, an Association of Safe Patient Handling Professionals, and integration of safe patient handling and mobility into some nursing educational curriculums has commenced. The American Nurses Association has released a National Standard for Safe Patient Handling and Mobility, many states have issued safe patient handling regulations and federal legislation has been introduced. Although progress is ongoing, problems continue and further action is required to achieve acceptable levels of safety for patients and caregivers.

Healthcare organizations must make the protection and the health and safety of their caregivers a priority, and dedicate the

necessary financial resources to provide solutions to the menace of occupational injuries. As stated, safe patient handling technology is readily available and includes mechanical lifts, a variety of lifting and re-positioning aide devices plus bed systems which facilitate bed egress and repositioning. However, when it comes to purchasing and installing this equipment the argument offered is that there are no funds available. Each year there are large capital equipment budgets available in healthcare organizations but it has been found that there is usually strong competition for those funds.

As budget allocations are determined, millions of dollars are usually allocated to upgrade a single piece of equipment which is still adequately providing service, or funds might be appropriated for technologies that are not evidence based. Other times new furnishings are purchased to redecorate an area. Those responsible for budget determinations need to understand benefits which can be achieved from use of safe patient handling technology. This knowledge and understanding will support good decisions to make capital equipment funds available to be invested in strategies and technologies to protect caregivers and reduce the risk of occupational injuries. Caregivers also need to have a voice on capital equipment committees and the ability to obtain the right type of bed systems and safe patient handling equipment to the reduce risk of injury. The outcome from obtaining this equipment will be a wise investment resulting in reduced occupational injuries, improving the quality of work life for caregivers while contributing to the quality of care of patients.