

Manual Patient Handling Injuries in Healthcare

Top five occupations with musculoskeletal disorders requiring days away from work^{1, 2}

Occupation	Total Cases	Incidence Rate (per 10K FT workers)	Median Days Away from Work
1. Nursing assistants	25,010	239.2 *	6
2. Laborers and movers	21,700	140.0	12
3. Janitors and cleaners	16,530	114.0	8
4. Heavy and tractor-trailer truck drivers	13,750	99.4	21
5. Registered nurses	11,880	58.2 *	8
For all occupations	387,820	38.5	11

* This incidence rate includes other related occupations that BLS separated out in 2010.

Consequences of manual patient handling³

Increased costs: medical expenses, disability compensation, litigation



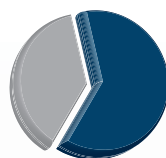
For the worker: chronic pain and functional disability, absenteeism, turnover; may be less productive, less attentive, more susceptible to additional injury, and more likely to affect health and safety of others.

For the patient:⁴ falls, skin tears, joint dislocations, fractures, pain



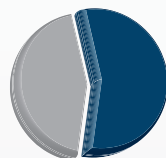
\$20B Back injuries alone represent direct and indirect costs of **\$20 billion per year** in the healthcare sector.⁵

62% of surveyed nurses report that they have suffered a "disabling musculoskeletal disorder."⁵



8 in 10 surveyed nurses indicated that they work with musculoskeletal pain frequently.⁵

56% of surveyed nurses experienced musculoskeletal pain caused or made worse by the job.⁵



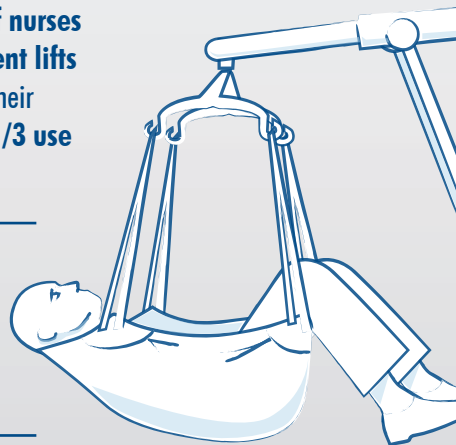
Why are these injuries occurring?



Musculoskeletal injuries in healthcare are often related to **repeated manual patient handling activities**, such as transferring and repositioning patients, and working in awkward positions.³

Even though **2/3 of nurses indicated that patient lifts are available at their facility, less than 1/3 use them frequently.**⁵

Did you know that the recommended maximum lifting weight limit for healthcare workers is 35 lb?⁶



Where are these injuries occurring?

High-risk areas: bathing rooms, extended care wings, diagnostic units (e.g., radiology, emergency department, spinal unit, orthopedics department)³

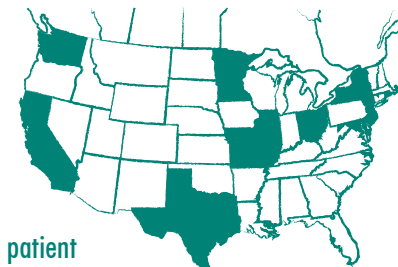
What can be done?

Safe patient handling and movement programs, when properly implemented, can prevent injury and save money.

One facility estimated that a safe patient handling and movement program would add **\$10 to \$12 million in value over five years.**⁷

Your state may require a safe patient handling program

(CA, IL, MD, MN, MO, NJ, NY, OH, RI, TX, WA)³



Essential elements of a safe patient handling and movement program include:³

- ▶ **Commitment:** Management must support the program.
- ▶ **Participation:** Workers should be involved in the assessment and implementation of safe patient handling and movement processes and any tools and equipment.
- ▶ **Equipment:** Workers need appropriate tools and equipment, stored in conveniently located areas, to avoid manual lifting.⁷
- ▶ **Plan:** Safe patient handling and movement should be assessed and documented in the patient's care plan.
- ▶ **Education:** Workers should be trained to assess patient mobility and use equipment; competency should be documented and reevaluated periodically.
- ▶ **Evaluation:** Quality indicators and established goals should be used to review the program's effectiveness.

See the *Healthcare Risk Control Risk Analysis "Safe Patient Handling and Movement"* for more detailed information.

¹ Bureau of Labor Statistics. U.S. Department of Labor. Economic news release: table 18 [online]. 2012 Nov 8 [cited 2013 Aug 2]. <http://www.bls.gov/news.release/osh2.t18.htm>

² Bureau of Labor Statistics. U.S. Department of Labor. Economic news release: nonfatal occupational injuries and illnesses requiring days away from work, 2011 [online]. 2012 Nov 8 [cited 2013 Aug 2]. <http://www.bls.gov/news.release/osh2.nr0.htm>

³ Occupational Safety & Health Administration. U.S. Department of Labor. Safe patient handling [online]. [cited 2013 Aug 2]. <https://www.osha.gov/SLIC/healthcarefacilities/safepatienthandling.html>

⁴ The Facilities Guidelines Institute. Patient handling and movement assessments: a white paper [online]. 2010 Apr [cited 2013 Aug 13]. http://www.fgi.org/guidelines.org/pdfs/FGI_PHAMA_whitepaper_042810.pdf

⁵ American Nurses Association. 2011 ANA health & safety survey: hazards of the RN work environment [online]. 2011 [cited 2013 Aug 2]. <http://nursingworld.org/FunctionalMenuCategories/MediaResources/MediaBackgrounders/The-Nurse-Work-Environment-2011-Health-Safety-Survey.pdf>

⁶ Centers for Disease Control and Prevention. U.S. Department of Health and Human Services. CDC congressional testimony: safe patient handling lifting standards for safer American workforce [online]. 2010 May 11 [cited 2013 Aug 5]. <http://www.cdc.gov/washington/testimony/2010/20100511.htm>

⁷ American Nurses Association. Safe patient handling and mobility: interprofessional national standards [online]. 2013 [cited 2013 Aug 2]. <http://www.nursesbooks.org/sphm>