According to the most recent data from the U.S. Bureau of Labor Statistics, nursing assistants suffered more musculoskeletal disorders (MSDs) in 2011 than any other occupation. Registered nurses were the fifth-highest occupation for MSDs.1,2 These injuries are due in large part to overexertion associated with lifting, transferring, and repositioning patients manually.

Safe patient handling advocates often hear a lot of reasons why hospitals choose not to invest in mechanical lift equipment or other safe handling procedures and policies, or why equipment does not get used after they have made the investment. Following are some of the facts that safety champions can use to promote safe patient handling.

**MYTHS**

**We can train workers to use proper body mechanics and avoid injuries.**

**Facts About Moving Patients**

**FACT** More than 30 years of research and experience shows that relying on proper body mechanics or manual lifting techniques alone is not effective to reduce back and other musculoskeletal injuries.2,3,4 A comprehensive safe patient handling program that combines management commitment, employee involvement, policies, mechanical equipment, training, and maintenance is needed.

**Patients are not as comfortable or safe with mechanical lifting.**

**FACT** Patient education can reinforce that the lift is for the patient’s safety as well as the caregiver’s. Patient handling equipment can help prevent patient falls, bruises, and skin tears. Studies have shown that patients feel more comfortable and secure when a mechanical transfer device is used.3,5,6,7,8,9,10,11

**It takes less time to manually move patients than to use lift equipment.**

**FACT** It can actually take much longer to round up a team of colleagues to manually lift a patient than to find and use lifting equipment. It has been found that using mechanical devices to transfer patients takes fewer personnel and about five minutes less, overall, than manual transfers.11
Facts About Mechanical Equipment

**FACT** Several studies have shown that the initial capital investment in policies and equipment needed to safely handle patients can be recovered in two to five years. Hospitals with successful safe patient handling programs have found that the following long-term benefits far outweigh the costs:

- Reduced injuries
- Decreases in lost time and worker compensation claims
- Increased productivity
- Higher quality of work life and worker satisfaction
- Staff retention
- Better patient care and satisfaction

**FACT** If the device is not the right one for the task, it will discourage equipment use. To ensure that lift equipment is appropriate, it is important to get input from all departments. If possible, let caregivers try the equipment before purchasing and work closely with equipment vendors to meet your facility’s needs.

**FACT** Training is key to the success of any safe patient handling program. In addition, many healthcare facilities lack conveniently located storage space for portable lifts. Routine servicing and maintenance are also needed.

**FACT** According to a 2011 survey from the American Nurses Association, of the nurses who report patient lifting and transfer devices being readily available at their facilities, 76 percent say they use them to some degree, and 31 percent report that they use the devices frequently.

**FACT** While lifting devices minimize risk, the risk of MSDs probably cannot be eliminated altogether. Workers might need to move, roll, steady, and position the patient while using the lifting equipment. However, because most musculoskeletal injuries in the hospital setting are cumulative, any steps taken to minimize the potential for MSDs during patient handling tasks benefit hospital caregivers.

Facilitating a Culture Change

**FACT** Safe patient handling policies should be designed as a public pledge that administrators and managers make to staff to protect patients and workers. Proper training on equipment use is necessary, as are accountability and commitment to the principles of a “high reliability organization” (HRO), where workers are engaged in the overall culture of safety.

**HROs** have systems in place that are exceptionally consistent in accomplishing their goals and avoiding incidents that lead to patient or worker injuries. These organizations have a commitment to safety at all times, are preoccupied with avoiding errors, and foster a blame-free environment where workers can report incidents without fear.
Establishing and maintaining a successful safe patient handling program will likely require a culture change throughout the hospital. Modeling safe patient handling behaviors (e.g., establishing safe patient handling champions), management support, and commitment to the safety of both patients and workers are essential. If workers are organized in an employee union, it is a good idea for management to engage the union representatives when launching or expanding a patient handling program. Worker involvement in every step of the process, including policy development, equipment selection, installation locations, education, and evaluation, will help ensure a successful program and safety for all.

For more information and safe patient handling resources, visit www.osha.gov/dsg/hospitals.

Endnotes


