



Safe Patient Handling

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Safe Patient Handling:

Safe Patient Handling and Mobility Standards, 2nd Edition American Nurses Association, 2021-10 **Safe Patient Handling** Audrey Nelson, 2007 Nursing personnel are consistently listed as one of the top ten occupations for work related musculoskeletal disorders with incidence rates of 8.8 per 100 in hospital settings and 13.5 per 100 in nursing home settings. Strategies to prevent or minimize work related musculoskeletal injuries associated with patient handling are often based on tradition and personal experience rather than scientific evidence. The most common patient handling approaches in the United States include manual patient lifting, classes in body mechanics, training in safe lifting techniques and back belts.

Safe Patient Handling and Mobility, 2013 The Safe Patient Handling and Mobility Standards establish a uniform national foundation for safe patient handling and mobility to prevent injury to healthcare workers and healthcare recipients across the care continuum. These standards outline the role of both the employer and healthcare workers in safe patient handling and mobility. There are eight overarching standards featured in the book, each one outlined and explained in detail: Culture of Safety, Sustainable SPHM Program, Ergonomic Design Principle, SPHM Technology Education, Training and Maintaining Competence, Patient Centered Assessment, Reasonable Accommodation, and Post Injury Return to Work. Comprehensive Evaluation Systems. Nurses and all other healthcare workers can use these standards to improve their safe patient handling and mobility programs and optimize safe high quality patient care. Page 4 de la couverture **Safe Patient Handling and Movement** Audrey L. Nelson, PhD, RN, FAAN, 2005-12-02 Did you know that an estimated 12% of nurses leave the profession annually because of back injuries and that over half of RNs complain of chronic back pain? This book presents best practices in safe patient handling and movement. Nurse and hospital administrators, clinicians, clinical managers, risk managers and those involved in procurement and implementation of patient handling technologies in the health care environment will find this a practical resource for improving care and protecting staff from unnecessary injury. You will come away from reading this book with information that you can employ in a variety of work environments: hospitals, nursing homes, home care and other health care organizations. Whatever your practice setting may be, caregiver safety approaches include evidence based standards for safe patient movement and prevention of musculoskeletal injuries, an overview of available equipment and technology, architectural designs for ergonomically safe patient care space, institutional policies such as use of lift teams. **Safe Patient Handling Training for Schools of Nursing** Thomas R. Waters, Audrey Nelson, Nancy Hughes, Nancy Menzel, National Institute for Occupational Safety and Health, 2009-11-30 This SPH curricular material developed by cooperative effort among the National Institute for Occupational Safety and Health (NIOSH), the Veterans Health Administration (VHA) and the American Nurses Association (ANA) will help instructors design training programs that encourage the use of safe approaches to handling patients and contribute to the prevention of MSDs. **Implementation Guide to the Safe Patient Handling and Mobility: Interprofessional National Standards** Susan Marie Gallagher, 2013-09 This

brand new implementation guide works hand in glove with the Safe Patient Handling and Mobility Interprofessional Standards to streamline SPHM program success The Implementation Guide gives step by step ways to implement each of the eight overarching SPHM Standards and includes A snapshot introduction that frames today's practice context and SPHM experiences Numerous detailed ideas and insights for employers and healthcare workers Extensive resources and readings in the latest research techniques and methodologies Setting specific examples of how the Standard can address issues and challenges

The Illustrated Guide to Safe Patient Handling and Movement Audrey L. Nelson, Kathleen Motacki, Nancy Menzel, 2009-03-27 Named a 2013 Doody's Core Title This is a good reference for the varied healthcare professionals who must move and transfer patients The book is clear and well written with illustrations to strengthen the narrative Doody's The evidence based methods suggested in these pages protect nurses from injury and ultimately improve patient care M Elaine Tagliareni EdD RN President National League for Nursing Ancillary materials include new DVD and Instructor's Guide Please note DVD contains digital videos only no audio track Qualified instructors may email textbook.springerpub.com to request instructor's guide As a nurse you are all too familiar with heavy lifting sustained awkward positioning excessive reaching and static posturing With this comprehensive volume Nelson Motacki and Menzel show you that there is another way Learn about the new techniques and technologies specifically designed to reduce caregiver and patient injuries The authors present the Evidence Based Safe Patient Handling Program a practical system of guidelines to be used in numerous clinical settings Each chapter explains how to apply the program to specific clinical settings such as medical and surgical critical care orthopaedics pediatrics labor and delivery rehabilitation settings the perioperative suite and nursing homes Implement the components of the program to multiple clinical settings Assessment Learn to evaluate the patient's body strength and about other conditions that affect the patient handling task Care Plan Outline the safest way to accomplish the required task based on the assessment Algorithms Learn the step by step problem solving procedures for carrying out patient handling activities safely Photos and videos illustrate the techniques The included DVD and photographs illustrate how to use the technology as well as how each task movement and position should be completed These tasks include Lateral transferring to and from beds using sliders Rescuing fallen patients off the floor with a floor based lift Bariatric patient lifting and dressing Transferring patients with lower limb amputations And many more

Safe Patient Handling Audrey Nelson (PhD.), 2008 *Safe Patient Handling and Mobility: Interprofessional National Standards* Ana, 2014-05-14 Injuries and musculoskeletal disorders MSDs are common in nurses and other healthcare workers and are often caused by manually lifting and moving patients This is more than just an inconvenience these injuries are often life altering and career ending ANA's new breakthrough guide will help to prevent injuries and protect nurses and other healthcare workers The guide contains eight overarching safe patient handling and mobility SPHM standards These national interdisciplinary standards address the responsibilities of the employer or health care organization and those of healthcare workers and ancillary support staff and are applicable across

the care continuum Following these standards is critical for hospitals and other healthcare organizations in promoting a culture of safety through the development of safe and effective SPHM programs Don t waste another day Protect employees improve attendance rates and reduce workers compensation costs *Reference Guidelines for Safe Patient Handling* Occupational Health and Safety Agency for Healthcare in British Columbia,2000 Caring moments model Sally T. Gardner, Nurses suffer musculoskeletal disorders MSD at a higher rate than other industries due to the heavy loads nurses lift when handling patients As a result of high injury rates many hospitals have introduced Safe Patient Handling and Mobility SPHM Programs but program success varies Many nurses continue to practice outdated manual handling techniques than use the available SPHM equipment The Veterans Health Administration VHA Medical Center where this author works has a comprehensive SPHM program that includes a team of SPHM Unit Peer Leaders UPLs UPLs are experts in safe patient handling and provide training and education on the unit level Unfortunately since the role of the UPL is a collateral duty they must perform these tasks in addition to caring for a full patient assignment This Medical Center continues to have a high number of injuries and this author hypothesized that if the UPL had dedicated time provide SPHM expertise through transpersonal caring moments the nursing culture and patient handling behaviors would align with the SPHM program and policy Dr Jean Watson s Theory of Human Caring is the framework for the Caring Moments Model that incorporates the concepts of intentionality presence relationship and caring into the role of the UPL The Caring Moments Model aims to determine if a UPL who is armed with the knowledge of the cultures of nurses and of veterans can transform the culture of nursing and safe patient handling *The Illustrated Guide to Safe Patient Handling and Movement* Audrey Nelson (PhD.),Ms. Kathleen Motacki,Nancy Nivison Menzel,2009-03-27 Print CourseSmart Safe Patient Handling Training for Schools of Nursing Centers for and Prevention,Department of Human Services,National Institute Safety and Health,2013-10-20 In the field of nursing work related musculoskeletal disorders MSDs such as back and shoulder injuries persist as the leading and most costly U S occupational health problem A large body of evidence indicates that a substantial number of work related MSDs reported by nurses are due to the cumulative effect of repeated manual patient handling activities and work done in extreme static awkward postures In a list of at risk occupations for musculoskeletal disorders in 2007 nursing aides orderlies and attendants ranked first in incidence rate with a case rate of 252 cases per 10 000 workers a rate seven times the national MSD average for all occupations Emergency medical personnel ranked second followed by laborers and material movers ticket agents and travel clerks and light and heavy truck drivers among the top six at risk occupations Department of Labor Bureau of Labor Statistics BLS 2009 The nursing occupation also typically ranks in the top ten in yearly incidence rate of sprain and strain injuries In most industries MSD injury rates have declined in recent years yet MSD rates for nurses in the healthcare industry have not declined during the same period Healthcare units at high risk for back and other injuries to caregivers have certain characteristics History of frequent injuries High proportion of dependent

patients Lack of use of lifting equipment in good repair Low staffing levels More than 30 years of evidence has demonstrated that manual patient handling and relying on body mechanics is unsafe Furthermore this evidence indicates that adoption of safe patient handling SPH techniques where nurses use assistive equipment during transfers is effective in reducing the incidence of MSDs related to the handling of patients Safe Patient Handling and Lifting Standards for a Safer American Workforce United States. Congress. Senate. Committee on Health, Education, Labor, and Pensions. Subcommittee on Employment and Workplace Safety,2012 Improving Patient Safety and Nursing Care Utilizing Safe Patient Handling Devices Ellena A. Evans,2016 Injury to patients and nurses who utilize manual lifting and transfer techniques is a significant problem in today s healthcare environment Nurses suffer injuries from manual patient handling which can lead to career limiting ending injuries for nurses The purpose of this project was to gain a better understanding of the frontline nurse experience in the clinical setting today and determine what leads them to utilize workarounds in the care of the patient The goals were to identify best practice evidence through research and use the evidence to improve the utilization of safe patient handling SPH equipment and devices Establish a culture that embraces the use of the SPH program Reduce injuries to patients and clinicians through elimination of manual handling techniques The objectives were to use nursing focus groups structured observations and a questionnaire to determine what change was needed to decrease injuries and increase utilization of the SPH program review systems and processes that hinder a safe working environment and discover the complexities nurses face in patient care setting Thereby gaining a better understanding of nursing knowledge levels and knowledge deficits that prohibit appropriate SPH equipment use and identification of obstacles that prohibit lifting and transferring patients safely Evaluation methods included equipment usage and a decrease in musculoskeletal injuries related to the use of proper body mechanics and lifting techniques with SPH equipment and devices Without the completion of this project the future clinical would be continued incidence of manual handling injuries lost and restricted work days and continued avoidable costs to patients nurses and the organization Safe Patient Handling and Lifting Standards for a Safer American Workforce United States. Congress,United States Senate,Committee on Health,2017-12-11 Safe patient handling and lifting standards for a safer American workforce hearing before the Subcommittee on Employment and Workplace Safety of the Committee on Health Education Labor and Pensions United States Senate One Hundred Eleventh Congress second session May 11 2010 Moving Into the Future Letitia K. Davis,Christine Miner,Angela K. Laramie,Emily Sparer,David H. Wegman,2014 Safe Patient Handling & No Lift Policy: Reducing The Incidence Of Work-Related Injuries Among Nursing Staff Marissa N. Scanlon,2014 Background Patient handling is a major risk factor for work related injuries among nurses Inadequate and inappropriate safe patient handling practices contribute to increased work related injuries lost restricted work days and hospital costs Purpose The focus of this study was to increase the use of mechanical lift equipment and Lift Team to reduce the incidence of work related injuries among nursing staff involved in patient handling activities on the

Medical Cardiac ICU Methodology The theoretical framework employed for this project was Lippitt's change theory Pre and post survey self report evaluations were conducted prior to and following the implementation of the Bedside Mobility Assessment Tool BMAT and unit specific Equipment Options Tool to measure the effectiveness of the intervention Results A comparison of the pre and post survey RN results indicated that the greatest percent change 10% increase included understanding that injuries can be avoided with proper lifting and transferring of patients 18 3% utilization of patient lifting and transferring devices whenever possible 14 6% understanding how to select appropriate lifting equipment based on patient assessment 18 3% understanding how to utilize patient lifting and transferring devices 11 9% and belief that coordinating with the Lift Team to schedule timelines for Safe Patient Lifts would be helpful for staff 40 5% Conclusion The BMAT and unit specific Equipment Options Tool increased the use of mechanical lift equipment among nursing staff and thus decreased the risk of work related injuries Future evaluation will indicate an increased utilization of lift equipment and team and a sustained decrease in reported injuries number of lost restricted work days and hospital costs related to patient handling activities

Patient Handling Safety for Nursing Staff Don Nielsen, 2006 The effectiveness of video scoring and feedback about the scoring of the components of safe patient transfers was observed among eight nursing staff members in a skilled nursing department within an acute care hospital An ABCA and sometimes ABCDA multiple baseline across individuals design was utilized in the study The dependent variable under investigation was the percentage of safe lifting components Following baseline measures nursing staff participated in an information phase during which they reviewed and discussed components of safe patient transfers A video scoring phase was introduced during which participants viewed and scored a model video of a patient transfer Video scoring was not as effective in improving the safety of patient transfers for two of the participants during the video scoring phase as it had been for the other participants and a feedback phase was added for these two participants Finally a withdrawal phase was implemented for six participants to determine the long term effects of the study The current study suggests that video scoring and feedback are effective in increasing the safe behaviors related to patient transfers and reducing the possibility of back injuries among health care workers in a skilled nursing facility

AORN Guidance Statement Carol Petersen (RN.), 2007-01-01

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