

WHITEPAPER

# Safe Patient Handling and Mobility

Managing Risk and Reducing  
Work-Related Injuries

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**THE SITUATION**

The United States faces an issue of an aging population, which increases the demand for health care workers in nursing homes. In fact, the older population — persons 65 years or older — numbered 39.6 million in 2009 (the latest year for which data is available).<sup>1</sup> They represented 12.9% of the U.S. population, about one in every eight Americans.<sup>2</sup> By 2030, there will be about 72.1 million older persons, more than twice their number in 2000.<sup>3</sup> People 65 and older represented 12.4% of the population in the year 2000, but are expected to grow to be 19% of the population by 2030.<sup>4</sup>

Growth in the nursing workforce outpaced growth in the U.S. population. The number of registered nurses (RNs) per 100,000 population (per capita) increased by about 14 percent; the number of licensed practical nurses (LPNs) per capita increased by about 6 percent.<sup>5</sup> The explosion of the aging population, mixed with the growing demand for health care professionals, creates a huge demand for work safety programs to keep employees safe, productive and prepared to help patients without disruption.

Safe patient handling and mobility must be considered a priority in the following vocations:

- Long-term care facilities
- Hospital, clinics, acute care
- Home health care workers
- Physical therapists
- Schools
- Social service organizations

**NUMBER OF NURSING INJURIES**

Musculoskeletal disorders (MSDs) are the main cause of injuries, and have become a problem of epidemic proportion. In 2010, nursing aides, orderlies and attendants had the highest rates of MSDs.<sup>6</sup> There were 27,020 cases, which equates to an incidence rate of 249 per 10,000 workers, more than seven times the average for all industries.<sup>7</sup> The chart below shows nursing MSDs compared to those in other industries.

**WORKER DAYS-AWAY FROM WORK PER 10,000 WORKERS<sup>8</sup>**

AVERAGE	NURSING	CONSTRUCTION LABORERS	FREIGHT, STOCK, MATERIAL MOVERS
34	249	85	155

According to OSHA reports, sprains and strains are the most often reported nature of injuries, and the shoulders and low back are the most affected body parts. Patient handling injuries accounted for 25 percent of all workers' compensation claims for the health care industry in 2011.<sup>9</sup> Nearly 50 percent of the reported injuries and illnesses among nurses and nursing support staff in 2011 were musculoskeletal disorders.<sup>10</sup>

## THE IMPACT

The impact of MSDs among the nursing population cannot be underestimated. Besides the obvious human costs, the effect to the bottom line is substantial. Disability compensation, medical expenses and litigation all have direct tangible impacts. Among the more indirect effects are functional disability, absenteeism, high turnover and training/retraining costs. In total, back injuries to health care workers alone are estimated to cost the health care industry \$20 billion each year. Replacing a nurse, when factoring in costs associated with separation, recruiting, hiring, productivity loss and training, can result in costs ranging from \$27,000 to \$103,000 per nurse.<sup>11</sup>

## SAFE PATIENT HANDLING AND MOBILITY PROGRAMS

To help resolve these growing issues, safe patient handling and mobility programs have been put into place to help educate and equip health care workers with proper techniques and to establish preventative measures that help to minimize and reduce the severity of injuries.

Because of the epidemic problems faced by nurses, the American Nurses Association (ANA) created national standards for SPHM. The standards include eight key concepts:

- Establish a culture of safety
- Implement and sustain an SPHM program
- Incorporate ergonomic design principles to provide a safe environment of care
- Select, install and maintain SPHM technology
- Establish a system for education, training and maintaining competence
- Integrate patient-centered SPHM assessment, plan of care and use of SPHM technology
- Include SPHM in reasonable accommodation and post-injury return to work
- Establish a comprehensive evaluation system

To date, 11 states — California, Illinois, Maryland, Minnesota, Missouri, New Jersey, New York, Ohio, Rhode Island, Texas and Washington — have enacted these standards.

## EFFECTIVENESS OF SAFE PATIENT HANDLING PROGRAMS

Creating an effective safe patient handling and mobility program is much more than just education and technique. These programs require investing in equipment, training on equipment use and maintenance, implementing a “no lift” policy that eliminates manual handling whenever possible and utilizes appropriate processes, equipment and devices for moving patients. The costs of these programs can be significant, but their positive impact cannot be understated:

- Stanford University Medical Center invested \$800,000 in its program, realizing a \$2.2 million five-year net savings.<sup>12</sup>
- In Florida, the Veterans Health Administration Patient Safety Center introduced a program in seven facilities. The cost-benefit analysis showed a savings of \$200,000 with the initial investment recouped in about four years.<sup>13</sup>
- The University of Iowa Hospitals and Clinics reduced workers’ compensation by more than \$475,000 and recouped their initial investment within three years.<sup>14</sup>
- Kaleida Health Network invested \$2 million in SPHM programs and saved \$6 million in the first three years.<sup>15</sup>

What about injury outcome? Consider the following results after SPHM programs were implemented:

- Tampa General Hospital reduced the rate of injuries among nurses by 71%, with a 90% reduction in lost work days.<sup>16</sup>
- Franklin Square Hospital Center in Baltimore decreased patient handling injuries by more than 70%.<sup>17</sup>
- Englewood Hospital and Medical Center in New Jersey realized a 57.1% reduction in injuries in just the first two years.<sup>18</sup>

## HOW TO START

Methodical assessment and implementation of SPHM programs are essential for buy-in and long term success. The workplace must accept both the capital investment as well as the cultural support needed to embrace positive change. Accident Fund offers many resources and a great deal of expertise to help you begin the important process of change designed to reduce injury, reduce costs and increase workplace safety.

## HOW ACCIDENT FUND CAN HELP

As the WorkSafe People, Accident Fund is dedicated to safety in the workplace. Our Loss Control team provides our customers with wide array of services and online safety materials, including:

- Experienced WorkSafe Consultants in the field providing free safety services
- Workplace assessments to identify job hazards, ergonomic and personal protective equipment enhancements, and loss trend analysis
- No-cost safety training modules, including Spanish-language options, accessible 24/7
- Loss control booklets and other printed materials available on our website
- Low-cost safety training videos from our online library
- Monthly e-blasts containing industry-specific safety information

For access to our safety tools and information, or more about SPHM, visit [AccidentFund.com](http://AccidentFund.com).

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