B3.5: Saving Backs & Bucks: Implementing a Minimal Lift Program

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Presentation Preference: Research Abstract

Abstract Categories:
Thematic Areas: Workforce Issues

Abstract:
Introduction: Federal studies put health care workers in the top six riskiest jobs for back injury. One out of every 10 nurses loses days at work for this reason. The impact of injuries on employees and healthcare facilities are costly in dollars, days away from work, and required lifestyle changes. The year prior to implementing a minimal lift program our system spent over $700,000 on patient handling injuries. Pediatric providers are often under the mistaken impression that lifting & transferring children is without hazard. With the rising incidence of childhood obesity, most pediatric patients exceed the 35 pound weight limit for lifting & transferring patients recommended by NIOSH. Our goal was to implement a pediatric minimal lift program that reduced patient handling injuries and the associated costs. In 2006, our health system selected a company to provide safe patient handling equipment and training. As part of the roll-out for a five hospital health system, our pediatric facility began the implementation with process mapping. Coaches were then chosen for each unit to serve as internal equipment experts.
A pediatric algorithm was created for the patient assessment of equipment needs and a policy was developed. Once the general staff received didactic training and performed the skills competencies, the program was rolled-out.

**Method(s):** OSHA Reportable patient handling injuries (PHI) were compared for the year of TLC program implementation (2008) to the year prior. Restricted duty days, employee days away from a work related injury, incurred costs, and costs paid to date were measured. Consultants guaranteed a 60% reduction in the number of patient handling injuries; our goal was a 70% reduction.

**Results:** Systemwide reductions include: PHIs by 79%, Days Away by 95%, Restricted Duty by 88%, Incurred Costs by 96%, Costs paid to Date by 95%. With only 3 quarters reported post implementation, the pediatric results include an 83% reduction in PHIs, an 88% reduction in occurred costs and an 89% reduction in costs paid to date. Days away & restricted decreased from 473 to 26, 2654 to 400 respectively.

**Discussion & Conclusions:** The program has been very successful. We continue to collect post implementation data & plan to publish the results.

**Abstract History:**
This abstract has not been presented or accepted for presentation in whole or in part at the SNRS or other scientific meeting.

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