

## Ergonomics and Safe Patient Handling

In the course of daily activities, healthcare employees are exposed to various physical risks, such as lifting heavy items, bending, reaching overhead, pushing and pulling heavy loads, working in awkward body postures, and performing the same or similar tasks repetitively.<sup>1</sup> These risk factors increase the likelihood of musculoskeletal disorders (MSDs) and the potential for injury.

Improper patient handling may also injure patients and employees. Unsafe patient lifting may result in falls, skin tears, joint dislocations, fractures, inadequate mobilization, and pain.<sup>2</sup>

To lessen these risks, healthcare organizations need to educate their employees about ergonomics and safe patient handling and movement. Ergonomics, the study of people's efficiency in their working environment, helps lessen muscle fatigue, increases productivity, and reduces the number and severity of work-related MSDs.<sup>3</sup>

Following are 15 risk tips for healthcare organizations to consider when assessing their current efforts in promoting ergonomics and safe patient handling and movement.<sup>4</sup>

1

Define clear goals and objectives for the ergonomic process, solicit input from healthcare employees, assign responsibilities to designated staff members, and clearly communicate the process to all healthcare employees.

2

Create an environment in which healthcare employees can assess, identify, and provide important information about hazards in their facilities, including processes for assessing environments, instituting corrective actions, and evaluating the progress of implemented actions.

3

Ensure that healthcare employees are educated about ergonomics and its benefits as well as ergonomic-related concerns in the workplace. Also, encourage employees to report symptoms of MSDs early and emphasize the importance of doing so.

4

Encourage healthcare employees to voice their concerns and suggestions for reducing exposure to risk factors and hazards to help prevent or reduce the development of symptoms of MSDs and serious injuries. Implement solutions to control identified risk factors and hazards.

5

Devise a written safe patient handling and movement program that incorporates specific measures to prevent injury. Include provisions for training and assistance for healthcare employees on equipment use. Ensure that all healthcare employees are educated about this program and its requirements.

6

Explore how your facility's patient handling procedures might affect patient care. Manual lifting, repositioning, or transfer can increase patients' risk of falls, fractures, bruises, and pressure injuries. Using safe patient handling with mechanical equipment may reduce risk.

7

Ensure that the facility's safe patient handling and movement program includes lifting guidelines that minimize the use of manual lifting, repositioning, or transfers (e.g., through a "minimal lift" policy).

8

Instruct healthcare employees on the basic physics in safe patient handling, such as (a) moving something takes less effort when it's close to the body than when it's relatively far and (b) pushing objects is easier than pulling them.

9

Provide healthcare employees with easy access to equipment (e.g., slide sheets and portable or ceiling-mounted lifts) to assist with patient handling tasks. Include special accommodations for bariatric patients in the facility's safe patient handling policy or program.

10

Review the facility's OSHA-recordable injury log, check workers' compensation records, and consult with human resources to quantify employee MSDs from patient handling events and the associated costs.

11

Identify the occupations (e.g., registered nurses, nursing assistants, etc.) or root causes of activities with the highest risk of injury in your facility to more effectively target interventions.

12

Identify the units (e.g., departments, floors, wards) that have the highest rates of worker injuries associated with handling patients in your facility to more effectively target interventions.

13

Identify which activities (e.g., lifting, repositioning in bed, lateral transfers, etc.) account for the highest number or severity of injuries in your facility to more effectively target interventions.

14

Direct healthcare workers to gather patient handling and mobility equipment accessories and check battery status before shifts begin.

15

Integrate patient handling considerations into the design (e.g., installing or providing storage for patient handling equipment) when planning any renovation and/or new construction projects.

## Resource

For additional information, see MedPro Group's [Risk Resources: Ergonomics and Safe Patient Handling](#).

## Endnotes

<sup>1</sup> Occupational Safety and Health Administration. (n.d.). *Ergonomics*. Retrieved from [www.osha.gov/ergonomics](http://www.osha.gov/ergonomics)

<sup>2</sup> ECRI. (2020, March 6). *Safe patient handling and movement*. Retrieved from [www.ecri.org](http://www.ecri.org)

<sup>3</sup> Occupational Safety and Health Administration, *Ergonomics*.

<sup>4</sup> The risk tips in this publication are adapted from the following resources: Occupational Safety and Health Administration, *Ergonomics*; Occupational Safety and Health Administration. (n.d.). *Safe patient handling: A self-assessment*. Retrieved from [www.osha.gov/sites/default/files/3.8\\_SPH\\_self-assessment\\_508.pdf](http://www.osha.gov/sites/default/files/3.8_SPH_self-assessment_508.pdf); ECRI, *Safe patient handling and movement*; Occupational Safety and Health Administration. (n.d.). *Safe patient handling program checklist*. Retrieved from [www.osha.gov/sites/default/files/3.2\\_SPH\\_checklist\\_508.pdf](http://www.osha.gov/sites/default/files/3.2_SPH_checklist_508.pdf)

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