SAFE PATIENT HANDLING AND MOBILITY

Manual patient handling is hazardous for both health care workers and patients. The most common patient-related tasks that lead to injury are lifting, repositioning and transferring.  

Comprehensive safe patient handling and mobility (SPHM) programs drastically reduce the risk of injury for health care workers and patients while improving the quality of care. The use of technology, especially lifting devices, is critical to the success of these programs.

THE BENEFITS OF SPHM

The Facility Guidelines Institute outlines these benefits of SPHM in “Patient Handling and Movement Assessments: A White Paper”:

- Improved quality of care
- Improved patient mobility
- Fewer patient falls and pressure ulcers
- Increased patient satisfaction
- Increased health care worker satisfaction
- Savings due to reductions in workers’ compensation, patient falls and pressure ulcers, and employee turnover

SAFE PATIENT HANDLING & MOBILITY

Understanding the benefits of a comprehensive SPHM program

ADDITIONAL RESOURCES

- The Association of Safe Patient Handling Professionals (ASPHP)
- American Association for Safe Patient Handling & Movement (AASPHM)
- International Organization for Standardization—Ergonomics: Manual Handling of People in the Healthcare Sector
- Joint Commission—Improving Patient and Worker Safety: Opportunities for Synergy, Collaboration and Innovation
- U.S. Department of Veterans Affairs—Safe Patient Handling and Movement Resource Page

4 Safe Patient Handling and Mobility Interprofessional National Standards, American Nurses Association, 2014.
The Myths and Realities of Patient Handling

MYTH
Proper body mechanics (including the use of gait belts) prevent patient handling injuries.

REALITY
Decades of research shows that “proper” body mechanics are not an effective way to reduce injuries.

MYTH
It’s much faster to move a patient manually than to take the time to get SPHM technology.

REALITY
If SPHM technology is conveniently located, accessing it will not take a long time. It is often more time-consuming to assemble a team of colleagues to manually lift a patient.

MYTH
Proper body mechanics (including the use of gait belts) prevent patient handling injuries.

REALITY
ANA recommends policies and practices that lead to the elimination of all manual lifting. National Institute for Occupational Safety and Health (NIOSH) recommends lifting no more than 35 pounds under the best ergonomic conditions.

MYTH
Smaller, lighter patients do not warrant use of SPHM technology.

REALITY
Health care workers can effectively use SPHM technology while incorporating the professional values of respect, dignity and caring.

MYTH
Manual lifting is safer and more comfortable for patients.

REALITY
Manual lifting can result in skin tears, falls and injuries to patients.

MYTH
Manual lifting results in micro-injuries to the spine.Cumulative micro-injuries can result in debilitating injuries.

REALITY
Savings associated with reduced health care worker and patient injuries far outweigh the costs of the equipment.

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