Safe Patient Handling in Acute Rehabilitation
Adventist Rehabilitation Hospital of Maryland

Program/Project Description.
From May 2009 to April 2010, we had 6 employee back injuries and strains/sprains from improper patient handling. We also had 9 transfer-related patient falls with a clinician present. The hospital's Clinical Practice Committee determined we needed Safe Patient Handling Program to reduce injuries to patients and staff. The goals were 0 patient handling-related staff injuries and 0 patient falls related to caregiver handling.

Process.
We used PDCA as our overarching methodology for the project and the Iowa Model for Evidence-Based Practice in developing evidence-based program.

Solution.
We conducted a literature review to determine the main components of a Safe Patient Handling Program. The elements of this program are based on MD House Bill 1137 and the VA Program for Safe Patient Handling. We purchased additional lifting equipment for sit-to-sit transfers and sit-to-stand transfers and trained all staff on their use and required successful return-demonstration from all nursing staff involved in direct patient care. Training was also offered to all PTs & OTs. We have also purchased gait belts for every patient and required a mandatory competency from nursing staff on their proper use.

Measurable Outcomes.
In the 6 months since the implementation of the program (May - October 2010) we have had 1 employee back injury/strain/sprain related to patient handling. This represents a 200% decrease. Patient transfer-related falls with a clinician present, however, remained virtually the same at 5 from May-October 2010.

Sustainability.
We are continuing to develop additional elements of our program and monitoring employee injuries and patient falls. The Clinical Practice Committee has created a 1 page guideline on Safe Patient Handling for routine use and a 1 page guideline on Safe Patient Handling for bariatric patients. We have identified Lift Leaders on all units and all shifts, and have developed a training course on safe manual transfers to be taught by 2 physical therapists. Our Lift Leaders have already been trained in equipment use. They will be trained to our Safe Patient Handling Guidelines, and will take the manual transfer course and demonstrate competency in safe manual transfers by December 2010. In 2011 the organization will require this training from all clinical employees. This hands-on course will be taught by the Lift Leaders, who will also serve as an expert resource for staff and be responsible for continually monitoring their peers to make sure they are following the Safe Patient Handling Guidelines and using the lifting equipment appropriately. In addition, the organization will be purchasing slide sheets to ensure safe lateral patient transfers.

Role of Collaboration and Leadership.
The Clinical Practice Committee membership is composed of 7 nursing staff and 1 Magnet Program Coordinator. The Committee enlisted the assistance of 2 Therapy Managers, 1 Therapy Director, 1 Human Resources Manager, and 1 Facilities Manager in developing this project. This project was also supported by the organization's CNO and Patient Safety Officer.

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