

Safety Zone: Patient & Resident Handling in Healthcare

Managing Exposures

The injury rates among workers in the healthcare industry are among the highest of any industry. Resident handling (RH) is a prime contributor to the high frequency of injuries. For this reason, industry groups and regulatory agencies like OSHA are focusing attention both on the causes of these injuries, and the prevention efforts that take into account the unique work conditions and the physical demands of healthcare jobs.

There are many contributing factors to RH injuries, including:

- Body mechanics associated with moving and lifting residents
- The historical increases in resident bodyweight
- The aging healthcare workforce
- The shortage of healthcare professionals, increasing the length and demands of average shifts



Limitations of Basic RH Techniques

Examples of basic RH techniques include adjusting the bed height to hip level when moving residents, keeping a wide stable base with your feet, facing the resident head-on to avoid rotating the spine and moving the resident as close to your body as possible to minimize reaching. Residents generally are much heavier than studies suggest workers can lift safely with simple body mechanics.

Optimum body postures may not be sufficient to eliminate the hazards caregivers face. RH has unique challenges that must also be addressed like resident instability, awkward grip, unevenly distributed weight and resident aggression.

Primary Solutions

OSHA has mandated that healthcare facilities analyze resident handling demands to identify risks and implement controls to reduce injuries. The objectives are to reduce the weight handled, improve the body mechanics and reduce risk of injury for the workers. These can include changing the demands of the job, developing no-lift programs, using portable lift assist devices and training in ways to reduce the potential for worker injury. The use of Safe Resident Handling (SRH) aids like powered full-body lifts, powered sit-to-stand lifts, friction-reducing devices, and transfer belts are critical first tier solutions.

Additional Considerations

There are also behavioral solutions that can reduce the risk factors and improve behaviors that benefit the caregivers and residents alike. These include:

- Removing obstructions that clutter the bedside and passages making proper body mechanics difficult or the use of SRH impractical
- Coaching in proper resident handling methods, eliminating obstacles for use and supporting the use of SRH like upkeep, planning and placement
- Support a no-lift or low-lift policy with specific instructions documented in the care-plan for high risk residents (weight, stability and aggression)
- A risk assessment communication system and prompt response program
- Supervisors should always encourage feedback among caregivers and reminders during regular in-service sessions

Sources

For additional information on this topic and other safety resources, be sure to visit the [Healthcare Resources section](#) on our [Loss Control website](#).

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