

Bariatric Safe Patient Handling & Mobility: Key Facts

According to the Bureau of Labor Statistics, health care workers experience some of the highest rates of work-related injury.

Nearly half of injuries reported by patient care providers are musculoskeletal disorders (MSDs). Repetitive movements associated with lifting, transferring and repositioning put one at risk for MSDs. Some examples include:

- Muscle strains
- Low back injuries
- Shoulder injuries
- Tendinitis

Manual lifting should be minimized and eliminated if possible. Proper body mechanics, while important, will not provide sufficient protection against the risk of injury.

There is not a safe way to manually lift a patient who weighs more than 35 pounds, even with two caregivers (*William Marras & Tom Waters*).

There are several **benefits for staff members** who avoid manual lifting and use equipment and technology instead. These include:

- Reduced risk of injury
- Less pain and muscle fatigue
- More energy at end of the work shift
- Increased morale
- Improved job satisfaction
- Ability to work more or to an older age, if desired

A facility's **Bariatric Safe Patient Handling Program** should include:

- Commitment from management at all levels
- A Safe Patient Handling Committee - at least 50% of which is front line staff
- Hazard assessments of all units and tasks
- Safe patient handling policies and procedures
- Lift equipment and technology
 - Staff involvement in selection of equipment is very important
 - Equipment needs to be conveniently located and well-maintained for it to be used consistently.
- Education and training for all staff
 - Understanding and determining hazards
 - Selecting and using the appropriate equipment
 - When and how to report injuries
- Unit-level peer leaders or safe patient handling champions
- Program evaluation

All staff members should speak up in the name of safety and insist on the use of lifting equipment.