

Institutional Handbook of Operating Procedures	
Policy 09.13.26	
Section: Clinical Policies	Responsible Vice President: Executive Vice President and CEO UTMB Health System
Subject: General Policies and Procedures	Responsible Entity: Health System

#### I. Title

Guidelines for Safe Patient Handling and Mobility (SPHM)

## II. Policy

UTMB wants to ensure a safe work environment for all employees, students, volunteers, and contract workers involved with patients requiring lifting, transferring, or mobility. To accomplish this, direct care staff on high risk patient care areas should assess high risk patient handling tasks in advance to determine the safest way to accomplish them. Additionally, mechanical lifting equipment and/or other approved patient handling aids should be used to prevent the lifting and handling of patients except when absolutely necessary, such as in a medical emergency.

### III. Practice

**A. Compliance**: It is the responsibility of employees to take reasonable care of their own health and safety, as well as that of their co-workers and their patients during patient handling activities by following this policy. Non-compliance with procedures will indicate a need for retraining and or corrective action.

## B. Patient Handling and Mobility Requirements:

- 1. Patients should be assessed for physical, cognitive, clinical, and rehabilitative needs initially and on an ongoing basis to determine their safe handling and mobility needs and how to meet their needs in the safest way.
- 2. Plan activities to avoid hazardous patient handling and mobility tasks whenever possible. If unavoidable, assess them carefully prior to completion.
- 3. Use mechanical lifting devices and other approved patient handling aids for high-risk patient handling and mobility tasks except when absolutely necessary, such as in a medical emergency.
- **4.** Use mechanical lifting devices and other approved patient handling aids in accordance with instructions and training

### **B.** Education/Training:

Staff will complete and document training as required to ensure correct and proper use and understanding of safe patient handling and mobility.

### C. Mechanical lifting devices and other equipment/aids:

- 1. Mechanical lifting devices and other equipment/aids will be available to staff.
- 2. Mechanical lifting devices and other equipment/aids will be maintained regularly and kept in proper working order.

### D. Reporting of Injuries/Incidents:

- 1. Staff shall report to their supervisor and Employee Injury Management all injuries from patient handling and mobility.
- **2.** Injury reports and supplemental injury statistics will be reported to the governing body as required by the facility.

# IV. Accountabilities and Responsibilities

### A. Employees shall:

- 1. Comply with all parameters of this policy.
- 2. Complete education and training of proper technique and use of mechanical lift equipment/aids used in patient handling and movement.
- **3.** Assess the potential for risk of injury to the patient or staff posed by the patient handling and movement need.
- **4.** Refuse to perform or be involved in patient handling or mobility if the task will expose the patient or staff to an unacceptable risk or injury.
- **5.** Notify supervisor of need for re-training in use of mechanical lifting devices, other equipment/aids and lifting/moving techniques.
- **6.** Notify supervisor of mechanical lifting devices in need of repair.

## **B.** Supervisors shall:

- 1. Ensure patient handling and mobility tasks are assessed prior to completion and are completed safely, using mechanical lifting devices and other approved patient handling aids and appropriate techniques.
- **2.** Ensure mechanical lifting devices and other equipment/aids are available, maintained regularly, in proper working order, and stored conveniently and safely.
- **3.** Ensure employees complete education and training as required for patient handling and movement.
- **4.** Ensure staff has the right to refuse to perform or be involved in patient handling or mobility they believe in good faith will expose a patient or employee to an unacceptable risk of injury.
- **5.** Refer all staff reporting injuries due to patient handling tasks to Employee Injury Management.
- **6.** Maintain incident/injury reports and supplemental injury statistics as required by the facility.
- C. Leadership/Facilities: Planning and Development: In planning new construction or remodeling of a patient care area, incorporate patient handling equipment or the physical space and construction design needed to incorporate that equipment at a later date.

### V. Definitions

<u>Safe Patient Handling and Mobility</u>: Patient handling and mobility have a risk of musculoskeletal injury for staff performing the tasks. These include but are not limited to transferring tasks, lifting tasks, repositioning tasks, bathing patients in bed, making occupied beds, dressing patients, turning patients in bed, and tasks with long durations.

<u>High Risk Tasks</u>: Patient handling and mobility tasks characterized by biomechanical and postural stressors imposed on the employee.

Manual Lifting: Lifting, transferring, repositioning, and moving patients using a healthcare worker's body strength without the use of lifting equipment/aids to reduce forces on the worker's musculoskeletal

structure.

<u>Mechanical Patient Lifting Equipment</u>: Equipment used to lift, transfer, reposition, and move patients. Examples include portable base sling lifts, stand assist lifts, and mechanized lateral transfer aids.

<u>Patient Handling Aids</u>: Equipment used to assist in the lift or transfer process. Examples include gait belts, stand assist aids, sliding boards, and surface friction-reducing devices.

<u>Mobility</u>: Progressive and active maintenance of, or increase in, physical activity of the healthcare recipient with or without assistance of the healthcare worker action and SPHM technology.

## VI. References

American Nurses Association. Safe Patient Handling and Mobility: Interprofessional National Standards. Silver Springs, MD, 2012.

VII. Dates Approved or Amended

Originated: 08/19/2006	
Reviewed with Changes	Reviewed without Changes
02/14/2013	10/05/2016
	10/31/2019

### **VIII.** Contact Information

Health System Administration (409) 266-9915