

# Session #R16

## *Resident Mobility*

*The best practice to improve health outcomes and ensure safety for residents and staff alike*

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## **Objectives**

- Describe the physical demands of mobilization on the resident and staff
- Explore the benefits of introducing a safe handling program in a long term care environment, both in a skilled unit and an assisted living (residential care)
- Identify the number of human body systems most affected by a dramatic reduction of mobility
- Identify early steps developed by physical therapy and nurses in a mobility training program
- Identify key components of a safe handling program that benefits the resident and staff

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**A SIMPLE TRUTH**  
**If you don't use it, you'll lose it!**

- Weakness and loss of functional status occur with prolonged bed rest
- More and more residents in healthcare depend on their caregivers for mobilization, transfer, and positioning related to chronic disease and functional losses
- Physical demands of moving residents places risk on the resident and can lead to dangerous work for the caregiver

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**Scope of Problem**

- Healthcare workers and residents alike suffer disabling injury and costly remedies
- Standard requirement for nursing homes, assisted living, and other healthcare groups by National Patient Safety Goals is that the organizations and their staff implement a fall reduction program including a protocol for transferring patients and residents.
- State and federal governments are taking the initial steps of the legislative process in establishing a Safe Patient Handling Standard that includes Assisted Living

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**Human Mobility**

- Helps humans with the following:
  - Perform activities of daily living
  - Express emotions
  - Gratify basic needs
  - Sustain health
  - Enhance the body's ability to heal and repair



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### Loss of Mobility

- Body systems most affected:
  - Metabolic: Fluid and electrolyte imbalance
  - Respiratory: Hypostatic pneumonia
  - Cardiovascular: Orthostatic hypotension, thrombus
  - Musculoskeletal: Atrophy and contractures
  - Urinary elimination: Infection and dehydration
  - Integumentary: Pressure ulcers, skin tears, bruises, lacerations
  - Psychosocial: Depression

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### Positive Outcomes and Cost Saving Opportunities

- Reduce resident amount of time in bed
  - Pressure ulcers
    - Interrupt pressure on the skin, soft muscle, and bone
  - In 2007, there were 257,412 cases of preventable pressure ulcers with a cost of \$40,000 per hospital and nursing home stay
  - Hospitals no longer get reimbursed for the cost of care for in-house developed pressure ulcers
  - Assisted Living licensure in many states restricts residents from living in Assisted Living unless care for advanced stages can be provided by an RN and the ulcer will heal within a stated timeframe

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### Physiologic Reasons

- Changing the resident's body position
  - Horizontal to upright increases the heart rate
    - Positive impact on blood flow re-distribution and aides in drug delivery
    - Maximum lung expansion leads to deeper respirations and greater oxygen intake
    - Increases the resident's ability to heal



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### Risk Exposure

- Injury to caregivers
  - Direct care workers in healthcare (i.e., nursing homes, assisted living, and home care) experience the second highest number of work-related injuries in the US, while licensed nurses experience the fifth highest number of work-related injuries
  - On average, a 250-bed nursing home spends approximately \$337,000 annually on injuries related to lifting, transferring, and repositioning
  - 50% of worker-related injuries are related to musculoskeletal disorders (MSDs)
  - Risk begins for the caregiver when lifting demands exceed 35 pounds
  - An average female resident weighs 160 pounds and a male weighs 190 pounds

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### Risk Exposure

- Transfer-related resident falls
  - Significant monetary losses
  - Negative impacts on the resident's health
  - Reflects unrealistic demands on manual resident movement
  - Leading cause for liability claims
    - \$25,000 to \$19 million



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### Best Practice

- Integration of safe handling practices into the care delivery process by developing an early mobilization program
- Facility needs the following:
  - Safe handling policy and procedure
  - Assessment of need
  - Evaluation of resident goals and community supports
  - Care intervention equipment needs
  - Employee training and skill evaluation

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### Safe Patient Handling Program

- The American Physical Therapy Association endorses the following concepts:
  - Physical therapists (PT) and physical therapist assistants (PTA) should be involved and be leaders throughout development, implementation, refinement, and maintenance of Safe Patient Handling programs on an institutional level, as well as at the local, state, and federal government levels
  - PTs and PTAs should lead by example, appropriately supporting and employing concepts of Safe Patient Handling during patient care
  - PTs and PTAs should be leaders in multidisciplinary Safe Patient Handling training programs to expand the Safe Patient Handling knowledge and resources of the multidisciplinary healthcare team

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### Safe Patient Handling Program

- When resolved, the American Physical Therapy Association endorses the following concepts:
  - PTs shall have the clinical autonomy to apply Safe Patient Handling concepts when most appropriate, based on patient and client presentation
  - PTAs shall have the ability to apply problem solving during patient care to incorporate appropriate Safe Patient Handling concepts
  - PTs and PTAs should have appropriate access to a variety of Safe Patient Handling equipment in their clinical practice
  - Physical therapy departments should have appropriate policies and training in Safe Patient Handling procedures

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### Best Practice

- Skin integrity, fall risk, and pain management must be integrated with appropriate equipment to replace manual handling
- Equipment readiness and availability
- Caregiver training on the function and use of each device that addresses specific resident movements
- Develop caregiver compliance with the use of equipment, mechanical lifts, sits-to-stand, and lateral transfer sheets

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### Safe Resident Handling Program Benefits

- Potential for resident injury (e.g., shoulder injuries, skin tears) as a consequence of manual handling mishaps (e.g., patient falls) is reduced when assistive equipment and devices are used
- Residents are provided with a safer means to progress through their care, promoting resident autonomy, conserving energy, and maximizing therapy tolerance
- Reduced MSDs in workers
- Organizational concern about staff safety is communicated to direct care staff promoting retention, and providing an added incentive for recruitment
  - Recruiting and retaining nurses is an ongoing problem

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### Communicating Safe Resident Handling and Movement Needs

- Nursing shift summary documentation revised to include documentation of resident transfer status on the nursing unit and equipment in use for the resident
- Space for documentation of equipment in use is added to the daily assignment sheet and provided to all clinical staff to communicate which equipment is in use for resident handling on the nursing unit
- Laminated photographs of equipment in use is placed in the nursing Kardex

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### Safe Handling Equipment

- Portable lift device (sling type)
- Can be a universal/hammock sling or a band/leg sling



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### Sit-to-Stand

- Powered sit-to-stand or standing-assist devices



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### Lateral Transfer Sheet

- Use when transferring a partial- or non-weight-bearing resident between two horizontal surfaces (i.e., a bed to a stretcher or gurney in the supine position)



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### Conclusion

- Sound business reasons exist for investing in safe resident handling solutions in order to ensure residents are handled with care and dignity
- Overwhelming evidence suggests the following:
  - Safe resident handling is a wise investment that can reduce worker injuries
  - A safe resident handling program minimizes manual handling of residents in all cases and eliminates lifting, reducing injury to the resident and staff
  - Having policies, procedures, and products that enhance safe resident handling can be good for all involved, increasing resident, family, and staff satisfaction

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### **Conclusion** *(continued)*

- To achieve the fullest possible benefit, healthcare organizations need to consider more than just what type of equipment to buy
- Successful safe patient handling programs also involve the following:
  - Comprehensive assessment of the nature of resident and staff needs
  - Full support from administration and key managers
  - Employee involvement
  - Policies that encourage the safest techniques for handling residents
  - The right amount of equipment that is also right for the job
  - Adequate, convenient storage and maintenance of equipment
  - Education and training
  - Ongoing evaluation and improvement

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*Thank you for coming!*

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