

## Safe patient-handling

Injuries associated with patient handling can cost an employer tens of thousands of dollars. To address such injuries, the Safe Patient Handling Act (Minnesota Statutes 182.6551 through 182.6553) was enacted, requiring every licensed health care facility – nursing homes, hospitals and outpatient surgical centers – in the state to adopt a written safe-patient-handling policy and establish a safe-patient-handling committee by July 1, 2008.

Additionally, the written policy must establish a plan to minimize manual lifting of patients by Jan. 1, 2011, through the use of patient-handling equipment.

Clinical settings – physician, dental and outpatient care facilities – must adopt a written policy by July 1, 2010, with the goal of reducing manual lifting by Jan. 1, 2012.

An effective safe-patient-handling program includes the following elements:

- patient-handling hazard assessment;
- acquisition of adequate supply of appropriate equipment;
- initial and on-going training about the use of the equipment;
- procedures to ensure physical plant modifications and construction are consistent with the program goals;
- periodic evaluation of the safe-patient-handling program; and
- establishment of a safe-patient-handling committee (only applies to nursing homes, hospitals and outpatient surgical centers).

An effective safe-patient-handling program will encourage employee participation to help identify and control the injury risks, and encourage adherence with established safe practices.

## WSC: free on-site assistance and information



Put Minnesota OSHA Workplace Safety Consultation (WSC) to work for you. WSC is available to work with employers and employees to solve safe-patient-handling issues before problems can occur. It offers free, voluntary, on-site consultation services to help employers improve their safety and health record, lower accident and injury costs, and reduce MNOSHA citations and penalties.

WSC consultants help employers and employees understand and recognize safe-patient-handling risk-factors that contribute to injuries and inefficient productivity. The consultants can help establish elements of a safe-patient-handling program and define the roles of management, supervisors and employees in establishing an effective safe-patient-handling management system to identify and control such risk-factors.

Managing safe-patient-handling risk-factors and reducing the risk of injuries contributes to improved productivity; reduced incidence and cost of injuries; reduced absenteeism, lost time and restricted duty; and improved employee morale. Safe-patient-handling improvements can also contribute to reduced losses in labor costs.



### **Key ergonomics services offered at no cost to employers**

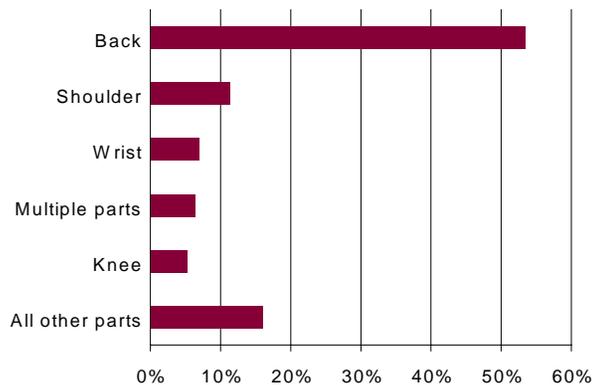
- Identification of ergonomic safe-patient-handling risk-factors
- Recommendation of options to minimize identified risk-factors
- Help establishing elements of an effective safe-patient-handling program
- Training and education of employers and employees on-site or away from work
- Assistance with implementation of an injury case-management and return-to-work process
- Identification of resources for further assistance
- Presentation of a written report to the employer about the consultation findings
- Recommendation for recognition by MNOSHA's Safety and Health Achievement Recognition Program (MNSHARP).

## Safe patient-handling statistics

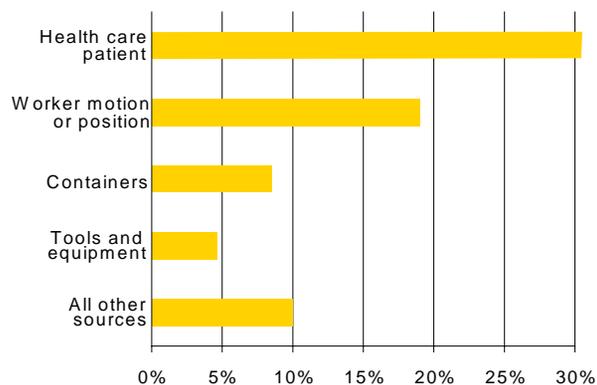
Workers' compensation data for the health care industry, based on claims closed in 2008 and 2009, have an average total temporary disability of 12 weeks per case. The estimated average claim cost was \$26,000. Of the workers injured with a work-related musculoskeletal disorder (WMSD), 19 percent had a permanent partial disability.

The figures below show WMSD injury characteristics based on paid indemnity claims from 2003 through 2008. The majority of WMSD injuries affect the back; "lifting, holding or transferring patients" was the most common source of WMSD injuries, followed by the worker's own bodily movements.

WMSD part of body injured



WMSD source of injury



## Safety Hazard Abatement Grants

The Safety Hazard Abatement Grant Program awards funds, with a reimbursable dollar-for-dollar match up to \$10,000, to qualifying employers for projects designed to reduce the risk of injury or illness to their employees.

Grants are accepted continuously and awarded every two months. Employers may qualify every two years per location.

For grant information:

- call (651) 284-5162, 1-800-731-7232; or
- visit [www.dli.mn.gov/Wsc/Grants.asp](http://www.dli.mn.gov/Wsc/Grants.asp).



**Workplace Safety Consultation**  
 443 Lafayette Road N.  
 St. Paul, MN 55155  
 (651) 284-5060  
 1-800-657-3776

[osha.consultation@state.mn.us](mailto:osha.consultation@state.mn.us)

[www.dli.mn.gov/Wsc.asp](http://www.dli.mn.gov/Wsc.asp)

*This material can be provided in different forms, such as large print, Braille or audio, by calling (651) 284-5060 or (651) 297-4198 (TTY).*

## Free ergonomics evaluation and training assistance

- **On-site risk-factor evaluation**
- **Training and outreach assistance**
- **Safe-patient-handling committee assistance**
- **Safety grant assistance**



**Serving:**

- ★ **nursing homes** ★ **hospitals**
- ★ **surgical centers** ★ **clinics**

**A free program for Minnesota employers**