An Overview of the New
Safe Patient Handling and Mobility
Interprofessional National Standards

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ANA’s Handle With Care© Program

🎉 Launched in 2003
🎉 Industry wide effort to prevent MSDs in health care through:
   - Partnerships
   - Outreach
   - Education and training
   - Legislation
   - Regulation
62% reported a disabling MSD is a top concern

56% experienced MSD made worse by job

- 80% of nurses reported working despite frequent pain
SPHM Standards Development Process

- Concept testing Fall 2011
- Focus groups Spring 2012
- Planning summit Summer 2012
- Standards drafted Summer 2012
- Public comment Fall 2012
- Review and revision Winter 2012
- Standards released Summer 2013
Working Group Representation

- American Association for Long Term Care Nursing
- American Association of Occupational Health Nurses
- American Association of SPHM
- American Occupational Therapy Association
- ArjoHuntleigh
- Association of Occupational Health Professionals In Healthcare
- Association of Perioperative Registered Nurses
- Association of Safe Patient Handling Professionals
- George Washington University
- Hill-Rom
- Liberty Mutual Insurance Company
- Lockton Companies
- National Institute for Occupational Safety and Health
- National Network of Nursing Assistants
- Park Nicollet Health Services
- Safe Lifting Solutions
- Stanford University Medical Network Risk Authority
- U.S. Army Public Health Command
- VA Patient Safety Center of Inquiry
- Veterans Health Administration
- Washington Department of Labor and Industries
- Washington Hospital Center
Expectations of National Standards

- Multi-disciplinary, intra-professional, and applicable across a variety of settings
- Realistic and attainable, while raising the bar
- Evidence-based and outcomes focused
- Ready to be incorporated into practices, policies, legislation, and regulation
SPHM Interprofessional National Standards

1. Establish a Culture of Safety
2. Implement and Sustain a SPHM Program
3. Incorporate Ergonomic Design Principles to Provide a Safe Environment of Care
4. Select, Install, and Maintain SPHM Technology
5. Establish a System for Education, Training and Maintaining Competence
6. Integrate Patient Centered Assessment, Care Planning, and Use of SPHM Technology
7. Include SPHM in Reasonable Accommodation and Post Injury Return to Work
8. Establish a Comprehensive Evaluation Program
SPHM National Standards

1. Establish a Culture of Safety

- Shared Core Values and Beliefs
- Institutional Structure
- Management Systems
- Leadership and Oversight
- Organizational Practices

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2. Implement and Sustain a Safe Patient Handling and Mobility (SPHM) Program
3. Incorporate Ergonomic Design Principles to Provide a Safe Environment of Care

**IN DAILY PRACTICE...**

Susan, a 57-year-old RN, works at the old community hospital. “I am proud to work in an underserved community. We never have enough money, but we get by. I do worry about injury, for both me and my patients. The rooms are crowded and the bathrooms are small, with tight corners. We can’t keep the portable lift in the hallway because of fire code, so it is kept in the far storeroom—it might as well be on the moon. We just don’t use it. I hear that we are getting remodeled. I sure hope they fix things.”

(See also Standards 1, 2, 4, and 8.)
SPHM National Standards

4. Select, Install, and Maintain Technology
5. Establish a System for Education, Training and Maintaining Competence
SPHM National Standards

6. Integrate Patient Centered SPHM Assessment, Plan of Care and Use of SPHM Technology

Algorithm example from NIOSH’s Safe Patient Handling Training for Schools of Nursing
7. Include SPHM in Reasonable Accommodation and Post Injury Return to Work

IN DAILY PRACTICE...

Lydia is a physical therapist at General Hospital. “I hate to see my co-workers injured while lifting, repositioning, or ambulating patients. The amazing thing is that a lot of the injuries happen when working with relatively small, frail patients. I guess the workers forget. Part of my job is getting them healthy enough for early return to work. People heal better if they are active and feel needed. I work with them on using the SPHM equipment correctly and consistently. Frankly, I wish it was used all the time.”

(See also Standards 1, 2, 4, and 5.)
8. Establish a Comprehensive Evaluation Program

IN DAILY PRACTICE...

STACY, the chief financial officer, was amazed. The Safe Patient Handling and Mobility Committee had turned in a concise and complete business plan for upgrading and expanding the SPHM technology. "They used a new method for calculating the return on investment that demonstrated ranges of direct and indirect costs. They considered impact on worker’s compensation, staff turnover, improved patient safety, and HCAP scores. They even gathered data on 30-day readmissions related to immobility and falls, and made recommendations for better discharge planning. With value-based purchasing, this is an investment I can support."

(See also Standards 2, 6, and 7.)
SPHM Implementation Guide

- Released October 2013
- Step-by-step strategies for implementing the standards
- Real-life, setting specific examples
- Recommendations of resources and reading
For More Information...

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Questions?

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