



ANMF (Vic Branch) Policy

Safe patient handling

1. Introduction

The Australian Nursing and Midwifery Federation (Victorian Branch) [ANMF (Vic Branch)] recognises that nurses, midwives and carers working in healthcare environments and other industries are exposed to risks associated with patient¹ care. Nurses, midwives and carers are considered some of the most at risk groups for workplace injuries due to the physical nature of their work. Predominately, the injury caused is musculoskeletal². Addressing the risks of patient handling through a hierarchy of control plays a major role in the occupational health and safety of nurses, midwives and carers.

2. Objective

The ANMF (Vic Branch) objective of this policy is to support the prevention and management of patient handling risks to the health and safety of Victorian nurses, midwives and carers including the maintenance and extension of Safe Patient Handling policies and programs.

3. Scope

This policy applies to ANMF (Vic Branch) members, and all nurses, midwives and carers eligible for ANMF (Vic Branch) membership in Victorian healthcare environments and other industries, specifically in relation to patient handling and not equipment handling (see Occupational Health and Safety Policy).

4. Definitions

Safe Patient Handling: refers to a safer approach to patient handling whereby the manual lifting of patients is eliminated, wherever possible.

Workplace: includes any place in which work is performed by a nurse, midwife or carer.

5. Policy

- 5.1. Under the Victorian Occupational Health and Safety Act 2004, all employees have a right to perform their work in an environment that is safe and without risks to health associated with patient handling.
- 5.2. Eliminating patient handling risks begins with employers and designers implementing safe design considerations, where practicable.
- 5.3. The manual lifting of patients is to be eliminated in all but strictly exceptional or life-threatening situations.
- 5.4. The health and safety of the nurse / midwife or carer takes precedence over the patient's desires and requests.
- 5.5. Mechanical aides and equipment, and techniques to move or transfer patients must provide the highest level of protection to nurses, midwives, carers and patients in accordance with the Occupational Health and Safety Act 2004.

¹ The word "patient" in this policy is interchangeable with the words "client" and "resident" as is appropriate for the clinical setting

² Vecchio, Scuffham, Hilton & Whiteford 2010

- 5.6. Wherever possible, the maintenance of a patient's independence by encouraging mobility is a priority.
- 5.7. Patients are encouraged to assist in their own transfers including bearing their own weight where possible.
- 5.8. Electronically operated handling aids must be used whenever they can help to reduce risk.
- 5.9. The ANMF (Vic Branch) supports the integration of Safe Patient Handling programs into all occupational groups in health care services.
- 5.10. Appropriate financial resourcing must be provided in order for the policy to be fully and appropriately implemented.
- 5.11. Staffing levels and skill mix should be adequate to reflect the dependency levels and handling needs of the patient, and to ensure the safe use of aids and equipment.
- 5.12. The principles of Safe Patient Handling are equally applicable to the care of bariatric patients.

6. Key elements

6.1 Employers

The ANMF (Vic Branch) requires employers to eliminate (where possible) and reduce the risks of injury to nurses, midwives and carers as a result of patient handling through:

- 6.1.1 Providing a workplace that is safe and without risks to health as required under the Occupational Health and Safety Act 2004.
- 6.1.2 This includes provision of safely designed premises, work environments, facilities, fixtures, fittings, equipment and systems of work that do not create, contribute to or exacerbate patient handling risks.
- 6.1.3 Moreover, employers are required to provide such information, instruction, training and / or supervision as is necessary in order for nurses to perform their work in a way that is safe and without risks to health.

The manual lifting of patients is to be eliminated in all but strictly exceptional or life threatening situations.

6.2 Consultation

As per the Occupational Health and Safety Act 2004, nurses, midwives, carers and Health and Safety Representatives (HSRs) have the right to be consulted and represented in relation to all matters that have or could have health and safety implications, including designing and building, refurbishment, development, purchasing, trialling and decision making in relation to patient handling environments, equipment or methods.

6.3 Environment

- 6.3.1 The physical environment of the workplace must provide sufficient, clear space in which to safely move or transfer patients, including appropriate consideration for equipment associated with care of bariatric patients.
- 6.3.2 The layout of the physical environment must minimise the risks associated with patient handling; ie - twisting, pushing, etc.
- 6.3.3 Overhead tracking should be installed in all new or refurbished facilities and, wherever possible, in existing facilities. This should cover, as a minimum, over beds, but should extend to ensembles and other areas of the facility where patients are likely to require assistance.
- 6.3.4 Adequate and safe storage space for equipment must be provided.
- 6.3.5 Floor surfaces should be smooth and even and push pull forces when using wheeled equipment should be such that risks of manual handling injury are reduced as far as is reasonably practicable.

6.3.6 In consultation with HSRs and the nursing, midwifery and care staff concerned, modifications to the workplace should be carried out where necessary to ensure a safe working environment.

6.3.7 Duties on designers under the Occupational Health & Safety Act 2004 require designers to ensure that buildings or structures used as a workplace are designed to be safe and without risks to health.

6.4 Equipment

6.4.1 Electronically operated beds, lifting aids and other handling equipment should be used whenever they can help to reduce the risk. Such equipment may include:

- electronically operated lifting machines, Hoverjacks and Hovermatts
- motorised trolleys and wheelchairs
- rigid or fabric sliding devices

6.4.2 As per the Occupational Health and Safety Act 2004, nurses, midwives, carers and HSRs have a right to be consulted in the selection and purchase of furniture, fittings, aids and equipment, including trialling of equipment by the staff that will be using it.

6.4.3 When considering equipment needs for handling the bariatric patient, knowing the weight capacity of the equipment (including beds / trolleys) is critical to safety.

6.4.4 Wherever possible, equipment should be trialled prior to purchase to evaluate its capacity to meet the requirements of the nurses, midwives and carers using the equipment and the person/s being handled.

6.4.5 Equipment should be adequate in number and easily accessible when needed.

6.4.6 All equipment should be maintained in good working order, in accordance with the manufacturer's instructions.

6.4.7 Equipment (including rechargeable batteries) should be replaced and updated at appropriate intervals or as necessary.

6.4.8 Fully laden equipment transporting patients requires motorised transportation devices.

6.5 Process

6.5.1 The handling needs of the patient should be assessed and documented prior to the admission of the patient (or if this is not practicable, as soon as possible after admission) to the health care facility, including community settings.

6.5.2 Assessment should be carried out by the nursing, midwifery and carer staff who are to be involved in the care of that patient.

6.5.3 Assessment should include risk factors to the carer, including risks from:

- sustained awkward postures
- bending
- twisting
- patient's previous history of falls

6.5.4 Assessment should also include the patient's ability to comprehend and cooperate, assist in their own moves, manoeuvre their own weight, weight bear and stand with or without a gait aid.

6.5.5 Measures to eliminate or minimise these risk factors must be implemented wherever possible, using Safe Patient Handling principles.

6.5.6 Handling assessments need to be monitored and reviewed on a regular basis, in particular with any changes to the condition of the patient.

6.6 Instruction, education & training

- 6.6.1 Nurses, midwives and carers should on commencement receive induction training, and ongoing refresher education and training (annually at a minimum) in:
- occupational health and safety rights and responsibilities
 - occupational health and safety policies and procedures
 - assessment of handling needs of patients
 - patient handling risk factors and hazards
 - patient handling risk management techniques and processes
 - the correct use of patient handling aids and handling equipment
 - techniques for moving / transferring patients which involve minimal force and exertion
- 6.6.2 Training programs must include a practical component, which provides nurses, midwives and carers with opportunities for practical experience, and allows participants to undertake the assessment and technique application process.
- 6.6.3 Competencies in Safe Patient Handling techniques should be annually assessed, at a minimum.

6.7 Health and safety representatives

The ANMF (Vic Branch) supports involvement of HSRs in prevention of patient handling related injuries through:

- 6.7.1 Reporting Safe Patient Handling related issues to management.
- 6.7.2 Representation and consultation with employers.
- 6.7.3 Health and Safety Committee (HSC) formulation, review and dissemination of plans for management of Safe Patient Handling risks.
- 6.7.4 Workplace OHS issue resolution.
- 6.7.5 Provisional Improvement Notices (PINs), cease works or requests for WorkSafe Inspectors to attend the workplaces if the employers have not acted to resolve risks related to patient handling, as appropriate to the risks presenting.
- 6.7.6 Submitting a request to the employer to review, and if necessary, revise measures implemented to control hazardous manual handling risk under the Occupational Health and Safety Regulations 2017.

7. Nurses, midwives and carers ANMF (Vic Branch) members

- 7.1 Nurses, midwives and carers will take reasonable care of their own health and safety and the health and safety of other persons (employees and others) who may be affected by their acts or omissions at the workplace, particularly in relation to patient handling.
- 7.2 Nurses, midwives and carers will co-operate with the employer with respect to any action taken by the employer to provide them with a safe and secure workplace and to assist them to fulfil their duties under occupational health and safety legislation, including complying with policies, programs and procedures.
- 7.3 Nurses, midwives and carers will use equipment supplied in order to reduce health and safety risks associated with patient handling tasks, in accordance with employer-provided instruction and training.
- 7.4 Nurses, midwives and carers will report to management any workplace hazard (existing or potential) or incident as soon as they become aware of it, including those relating to patient handling.
- 7.5 Employee non-compliance should be addressed via organisational protocols.

8. ANMF (Vic Branch) commitment

- The ANMF (Vic Branch) will continue to support members and HSRs to prevent and reduce patient handling injuries at the workplace level.
- The ANMF (Vic Branch) will continue to promote and conduct (and support others who wish to conduct) research, training and publicity.

9. Relevant legislation

- Occupational Health and Safety Act 2004
- Occupational Health and Safety Regulations 2017

10. Relevant guidance

- Vecchio, N., Scuffham, P. A., Hilton, M., Whiteford, H. A. (2010). 'Work-related injury among the nursing profession. An investigation of modifiable factors.' Griffith University. ISSN:1837-7750
- ANMF (Vic Branch) Occupational Health and Safety Policy 2020
- ANMF Federal Safe Patient Handling Policy, November 2018
- Transferring People Safely 3rd Edition, WorkSafe Victoria July 2009
- A Guide to Designing Workplaces for Safer Handling of People – for Health, Aged Care, Rehabilitation and Disability Facilities 3rd Edition, WorkSafe Victoria, September 2007
- Implementation Framework for the Introduction / Maintenance / Extension of Nurse Back Injury Prevention Programs, Department of Human Services, Melbourne, Victoria, 2004
- Victorian Nurses Back Injury Prevention Project Evaluation Report, 2002, Department of Human Services, Melbourne, Victoria, 2002
- Victorian Nurses Back Injury Prevention Project Evaluation Report, 2004, Department of Human Services, Melbourne, Victoria, 2004
- Private Aged Care No Lifting Project Evaluation Report, Australian Nursing and Midwifery Federation in Partnership with VHIA and the Aged Care Association of Victoria, May 2003
- Australasian Health Facility Guidelines (AusHFG), Australasian Health Infrastructure Alliance (AHIA), Revision 6.0, March 2016
- Compliance Code: Hazardous Manual Handling, WorkSafe Victoria, 2019