

Improving RN Satisfaction With Help to Lift & Move Patients: A Staff Led Performance Improvement Initiative Utilizing NDNQI RN Survey Results

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Background

- According to the annual NDNQI RN Survey, only 85% of PSCU nurses felt that they had enough help to lift and move their patients. This was a decrease of 11% from the prior year and was also below the Hospital average of 91%. (Table 1)
- PSCU Unit Nursing Practice Council (NPC) undertook measures to evaluate and improve RN satisfaction with help to lift and move their patients.

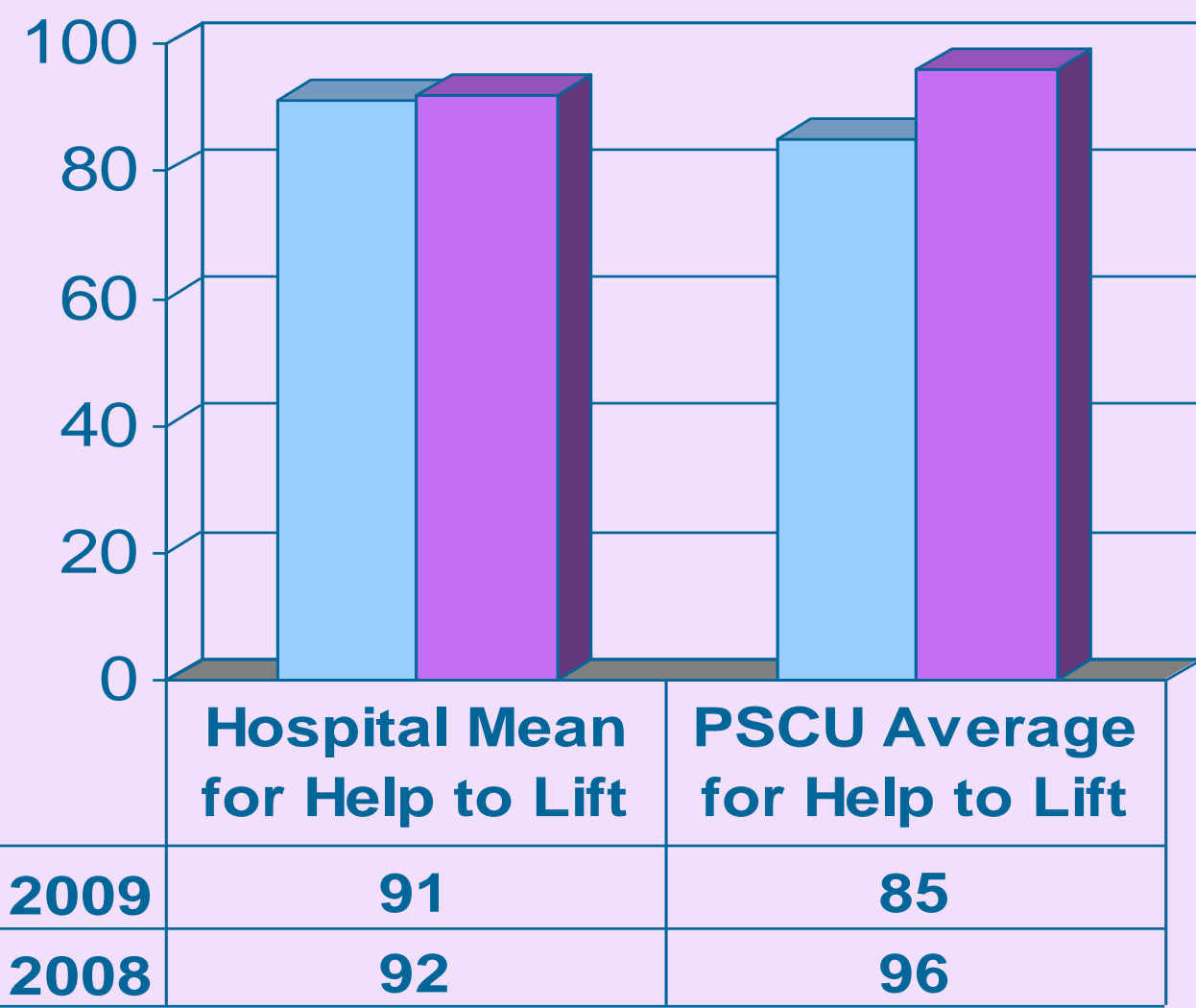


Table 1

Significance

- Over 1/3 nursing injuries are r/t handling/moving of patients.
- Increased staffing burden with the present nursing shortage.
- More than 52% of nurses suffer chronic back pain.
- Lifting injuries often go under reported.
- OSHA recommends manual lifting be minimized.
- Equipment is a safer means for lifting and moving patients.
- Investment in equipment & training can be recovered in 2 to 3 years through reductions in workers' compensation costs.
- Nine states have enacted "safe patient handling" legislation. (ANA, 2008-2009 Reports, Safe Patient Handling and Movement)

Plan

- Promote staff led performance improvement using "Plan, Do, Study, Act" (PDSA) methodology.
- Identify causes for insufficient help.
- Increase nursing satisfaction with help to lift and move their patients.

Do

- Unit NPC members collaborated with CNS to develop a framework for their performance improvement project.
- Focus Group determined causes of dissatisfaction. (Diagram 1)
- Identified three interventions to facilitate rapid improvement.
 - Improve access to lift support by distribution of staff ASCOM phone list to each staff member, each shift.
 - Increase staff competency with use of Hoyer lift.
 - Prioritize lift support with shift to shift assignments. (Diagram 2)

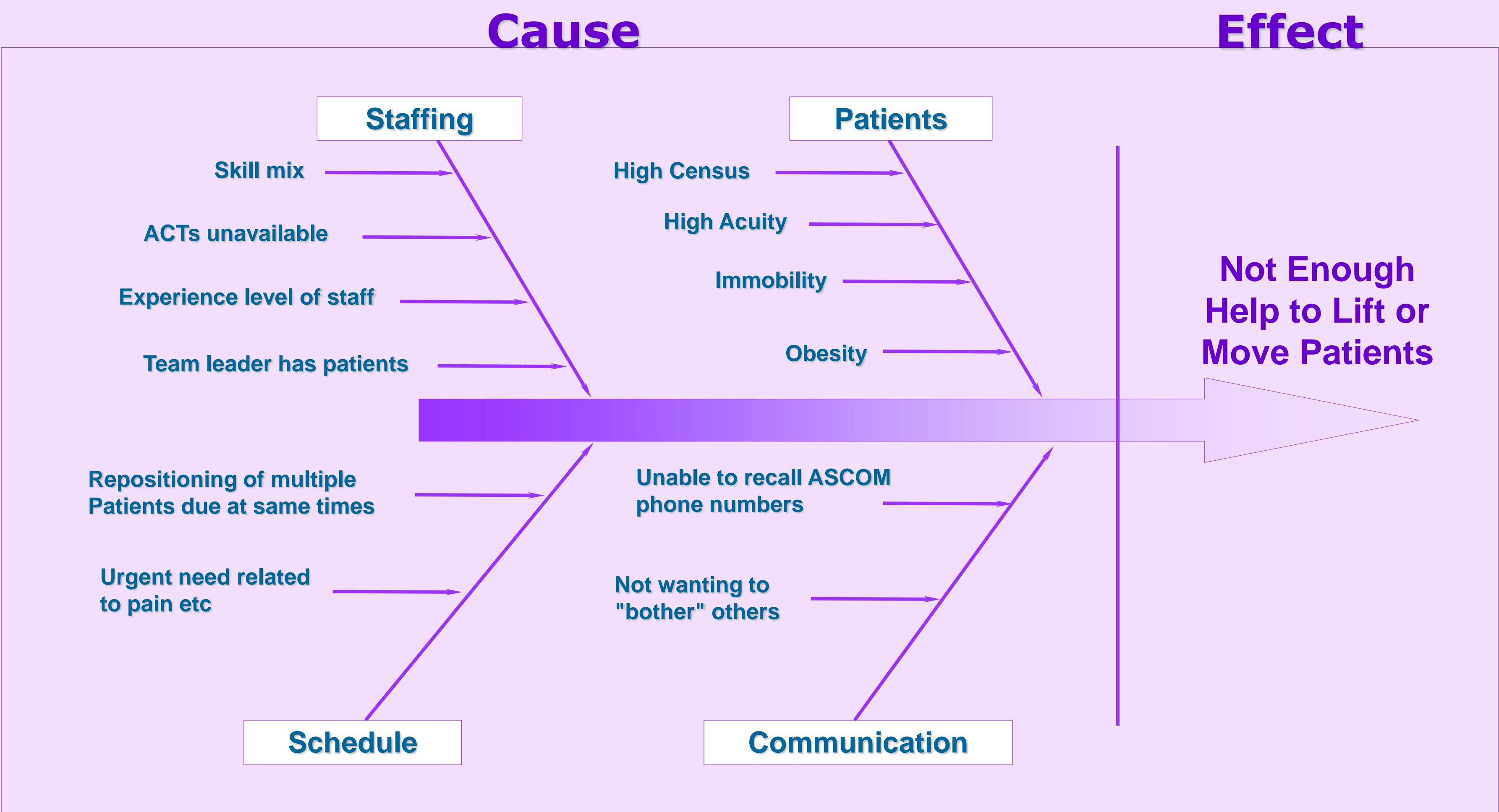


Diagram 1 "Cause and Effect"

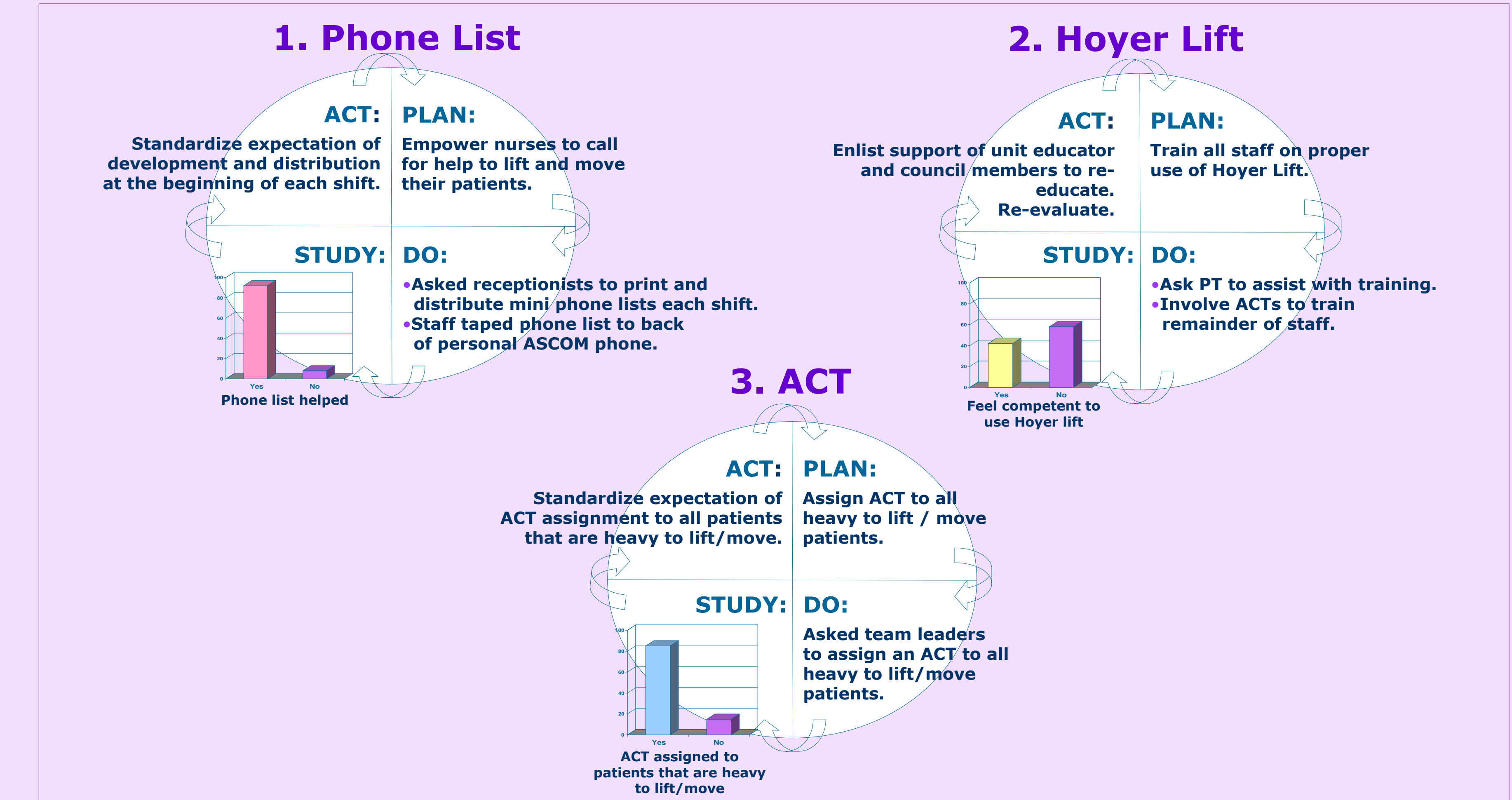


Diagram 2 "PDSA Cycles"

Study

- Access to lift support: 81.3% of nurses agreed that having a personal phone list improved their access to lift support.
- Equipment Competency: 42% of nurses felt that they were competent to use the Hoyer lift after re-education.
- ACT assignments: 85% of nurses stated that they always had an ACT assigned to the heavy to lift/move patients.

Act

- The generation of the ASCOM phone list is now an expected function of the receptionist or unit secretary at the start of each shift.
- Hoyer lift re-education did not encompass 100% of the staff. Subsequent mandatory re-education planned.
- Team Leader / Charge Nurse expected to ensure that patients requiring lift support have an ACT assigned.

Outcome

Nursing satisfaction with help to lift and move patients improved to 92.3%, as a result of this staff led performance improvement initiative. (Table 2)

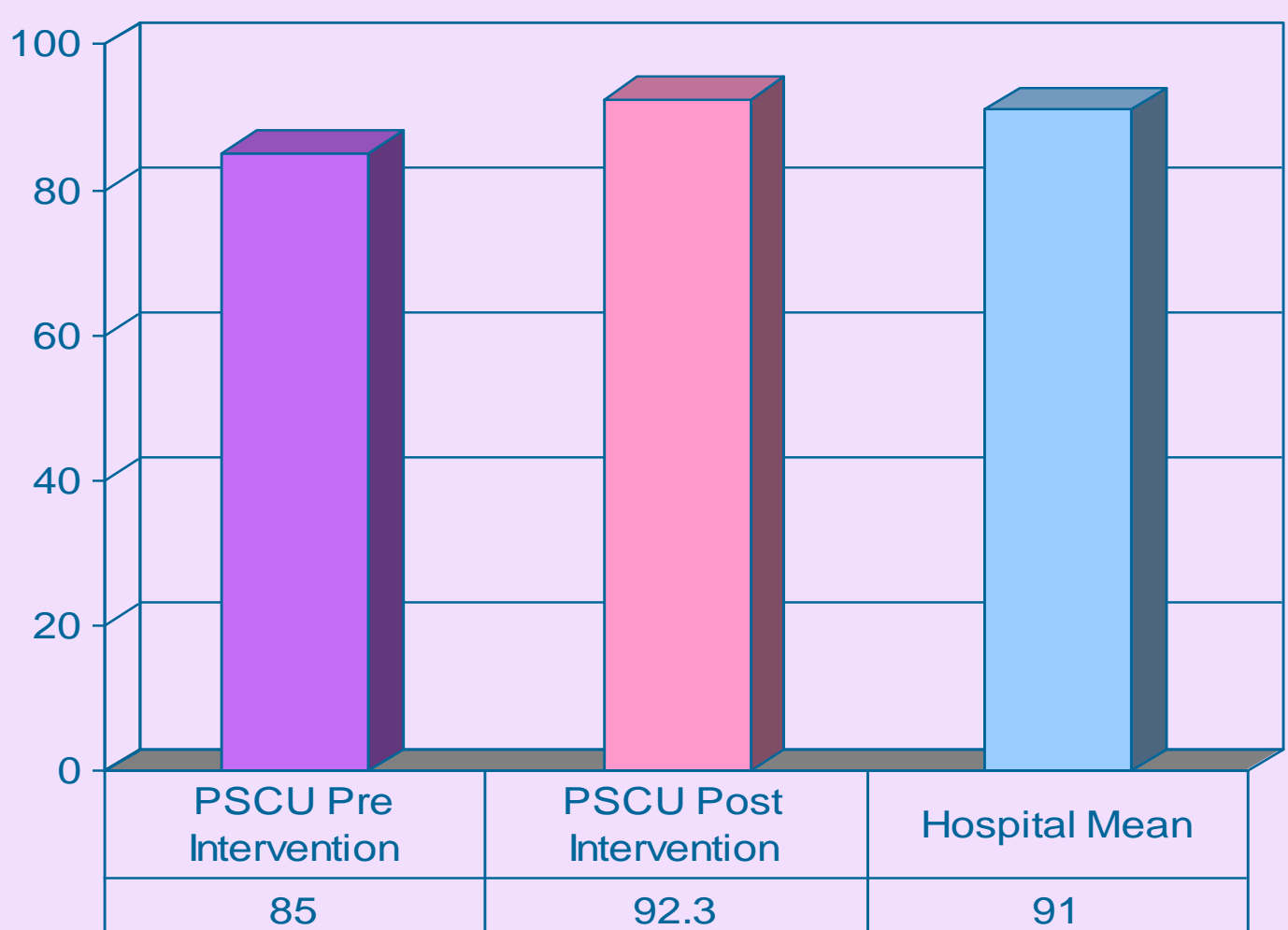
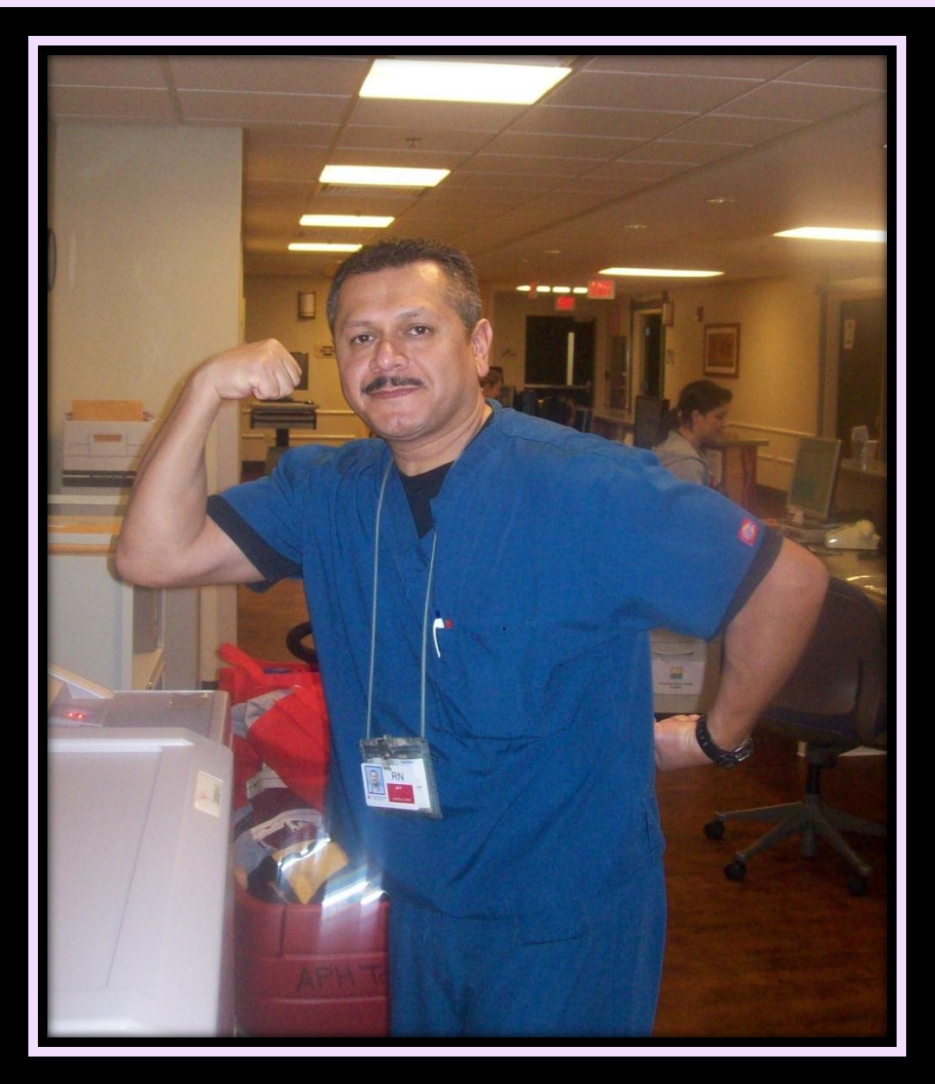


Table 2



References

ANA, Nationwide State Legislative Agenda, 2008-2009 Reports, Safe Patient Handling and Movement accessed on March 10, 2010, @ www.nursingworld.org/MainMenuCategories/ANAPoliticalPower/State/StateLegislativeAgenda/SPHM.aspx