We Have Your Back
A Worker Safety Collaborative
An Initiative of the Florida Hospital Association

WORKER SAFETY WEDNESDAY WEBINAR SERIES:
LIFT TEAMS: MYTHS AND FACTS ABOUT LIFT TEAM
PROGRAMS
WEDNESDAY, NOVEMBER 1, 2017

WELCOME!
WHYB: Promoting workforce safety as an organizational priority in our hospitals

FOCUS AREAS:
- Safe patient lifting, handling and mobility
- Sharps injury and blood exposure prevention
- Workplace violence
- Finding solutions to reduce work stress, fatigue, and burnout
Special Thank You to Our Sponsors!

LIFT TEAMS: Myths and Facts About Lift Team Programs

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EMPLOYEE HEALTH SERVICES
TAMPA GENERAL HOSPITAL
Objectives

- Definition of lift teams
- Review myths and facts of lift teams
- Describe TGH lift team program
- Describe benefits of lift teams
- Review components to make lift team successful

Tampa General Hospital (TGH) Tampa, Florida

- Level 1 Trauma Center: 1000 beds
- 6800 Employees
- Magnet Hospital
- Bariatric Center of Excellence
- Lift Team program for 15 years
- Lift team operate 24/7
- Report to Employee Health Director
- IP Coordinator/Manager for 17 years
IP & Lift team Manager responsibilities

• SPH program development and growth
  • Lift Team: Manage staff and program development
  • Coordinate Educational classes
  • Evaluate and implement patient lifting equipment and work with various vendors.
  • National: speaker and committees

• Oversee IP/Ergonomic program:
  • 200-300 individual computer ergonomic evaluations
  • 20-30 job site assessments (pushing/pulling etc)
  • Ergonomic educational program development

• Collaborate with employee health ARNP, WC case Manager and Therapy to help identify trends and develop IC programs

• Program outcomes
Question?

- SPHM programs for > 2-3 years
- Staff available within a few minutes to assist with SPHM tasks.
- Compliance with staff utilizing equipment consistently.
- Equipment is available, accessible, batteries charged, cleaned, in good working condition & slings available.
- Reduced Patient Handling injuries & cost by > 60%

If you answered NO to any of the above questions, your facility may benefit from a lift team.
Typical barriers to SPHM programs

• Time to use equipment.
• Location of the equipment.
• Staff do not feel comfortable using equipment.
• Equipment not working or available.
• Administrative support
• Training
• Not taught in school
• Lack of buy in and support from nursing (culture change)

Where does a Lift Team fit in a SPHM program?

• Typical components of SPHM program:
  • Equipment
  • Training/education
  • Champions (facility, peer leaders etc)
  • Buy-in and support front line staff
  • Administrative support
  • Outcome measures
  • Lift teams should be an adjunct to your SPHM program, it should not be the ONLY component.
Lift Teams

Definition of Lift Team

- Many definitions, preferred one is on liftteams.com

**DEFINITION OF A LIFT TEAM:** A DEDICATED GROUP OF INDIVIDUALS WHOSE PRIMARY RESPONSIBILITY IS TO SUPPORT CLINICAL STAFF WITH THE MOVING AND HANDLING OF PATIENTS IN ACCORDANCE WITH NATIONAL GUIDELINES AND BEST PRACTICE.
Myths vs Facts pertaining to Lift Teams

<table>
<thead>
<tr>
<th>Myths</th>
<th>Facts</th>
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<tbody>
<tr>
<td>Hire a bunch of strong men to manually lift.</td>
<td>Lift teams should follow best practice and national guidelines and utilize equipment when indicated.</td>
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<tr>
<td>Lift teams are not effective at reducing staff injuries.</td>
<td>Literature review shows that lift teams can reduce injuries by 60-80% and reduce cost by 80-90%</td>
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<tr>
<td>Why have a lift team if you have equipment and nurses are trained in using it?</td>
<td>Number one barrier to success of SPHM programs is buy-in and support of staff with using equipment. Lift teams help to reinforce and coach staff on use of lifting equipment.</td>
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<tr>
<td>Lift teams cost a lot of money.</td>
<td>Most lift team programs have a ROI within 1-2 years.</td>
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<tr>
<td>You can either start a lift team OR purchase equipment</td>
<td>Lift Teams need equipment to move and handle patients safely. You need BOTH</td>
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Patient Handling Injury (PHI) Rate per 100,000 productive work hours
1999-2016

71% reduction since Lift Team

Prepared by Employee Health Services
TGH Lift Team program

- **Started in March 2002 with 6FTE’s**

- **Current Lift team staff (31 staff):**
  - Manager
  - Injury prevention Coordinator (3 days/week ergonomics)
  - 4 Lift Team Supervisors
  - Data mgmt. coordinator
  - 19 Lift Team tech 1
  - 5 Lift Team tech 2

- **Lift team responsibilities:**
  1. Move & handle patients 75%
  2. Maintenance and inventory of lift equipment (clean slings, assign 1-2 dept each) 25%
  3. Educate on every call

94% reduction of external medical cost since Lift team started

Prepared by Employee Health Services
Excludes: internal and indemnity costs
TGH Lift Team job tasks

- 60% - Repositioning in bed
- 30% - Transfers in/out of bed to recliner, w/c, commode etc
- 10% Other:
  - Pick pts off floor
  - Vehicle transfers
  - Lateral transfers
- Also Assist skin care team, PT/OT, radiology, ER, out-pt procedure areas, transport etc

TGH Lift team program

- **Staffing:** Day: 6-8 staff, night: 4-5 staff (plus a Supervisor for each shift)
- Designated lift team staff that round in all ICU units at scheduled times.
- **Work alone** in collaboration with nursing staff (unless bariatric patient or patient with special needs.)
- Nursing staff required to be in room with lift team
- **Downtime:**
  - Maintenance and inventory of lift equipment:
    - Each tech has a designated area: re-stock slings, launder cloth slings, re-stock hover mats, charge batteries, assure equipment in proper storage location etc.
  - Educate staff on use of lift equipment
Lift team hiring criteria

- Patient care experience preferred BUT no a must
- Dependable, reliable, MATURE
- Able to work independently
- Great customer service skills
- Good communicator
- Physical criteria: stand/walk 8-9 miles/day, no fitness test

Lift team orientation

- Trained by supervisors and IP Manager:
  - 4-6 weeks training
  - Back care: anatomy, risk factors, body mechanics
  - Medical terminology and precautions
  - Knowledge base: SPHM legislation, OSHA, NIOSH, ANA standards, TGH Policy
  - Bariatric sensitivity
  - Equipment training
  - Equipment maintenance and inventory training
  - Customer service training

- All techs: 8 hour annual training and 60 minutes monthly training
Lift team paging criteria

- Patients who require a lot of assistance to get in/out of bed (mod assist to dependent)
- Dependent patients who are > 150 pounds and need repositioning assistance.
- Bariatric care

TGH Lift Team Procedure

- Staff contact lift team via TGH portal
- Each lift team tech carries a hospital issued IPAD
- Select “needed now” or enter their rounding times
- Lift team answer pages in order unless 911 call or priority (commode transfer, procedure areas etc)
TGH Lift Team Procedure

- Nursing role:
  - Must be present in the room
  - Manage tubes and lines
  - Inform team of precautions.
- Must have supplies in room prior to lift team arrival.
- Lift team obtain equipment
- Lift team waits 2-3 minutes if staff not ready
- Lift team try to engage nurse with equipment and educate on each call.
- Nursing responsible for making patient comfortable after transfer.

Lift team Documentation:

- Document in patient medical chart
- Post transfer method or equipment on magnet outside door and/or Flag in chart.
SPHM education

- **Education:**
  - Training upon hire (3 hr class)
  - Annual training
  - New equipment training
  - Unit based

Other SPHM Education

- **Unit Peer leader program:**
  - LIFT Expert program (Leaders In Facilitating Transfers and repositioning)
  - Part of our clinical ladder
  - Meet quarterly for 2 hours
  - Instructors: IP Manager and Lift team supervisors
  - > 100 participants form various dept including: Nursing, ER, radiology, skin care, therapy, transport, procedure areas etc

- **Worker’s comp and IP talk for Managers:**
  - All new managers required to attend 2 hour class
  - Offered 3 times per year and open for clinicians and supervisors
  - Recommend attend every 2 years
Other SPHM education

• Educational sheets, bariatric guide, videos, equipment locations etc

Lift team coach at the bed side and reward staff

• Recognition programs:
  • recognize staff who utilize equipment on their own or come up with creative solutions.

• Coaching at bedside with actual patients: lift team, IP Manager, therapy staff, LIFT Experts. Effective way to learn
TGH Patient lifting equipment

- Purchased ~2 million of equipment since 2002 (~$150,000 each year)

- Current equipment:
  - Ceiling lift tracks over all ICU beds
  - Ceiling lift tracks in ~50% of all other beds
  - Most depts have:
    - One Floor lift
    - 1-2 Sit to stand device
    - 1 Standing aid
    - 1-4 hover pump
    - Slide sheets
    - Gait belts
    - Variety of slings (butterfly, mesh repo, limb holding, transfer)

Benefits of Lift Teams

- Safe patient handling experts that assist with high risk tasks.
- They are the role models and lead by example.
- Assist with culture change along with buy in and support.
- Educate staff on the units with actual patients.
Benefits of Lift Teams

- Assist with overcoming equipment barriers
  - Time factor: obtain and utilize the equipment
  - Equipment maintenance: charge batteries and work with biomed when equipment not working.
  - Equipment inventory: re-stock slings and other equipment
  - Equipment accessibility: clean out equipment rooms and re-arrange

- Decrease pressure ulcers (perform turning rounds in ICU units)
- Increase patient satisfaction (follow pt during length of stay and get pts OOB more frequently)
- Decrease in falls during transfers in/out of bed.
- Nursing recruitment and retention
- More time for other Nursing duties.
- Increased morale
- Nurses state less daily back pain
Benefits of Lift Teams

• Decrease injuries (60-90%)
• Decreased lost and restricted work days
• Decreased worker’s comp cost (80-90%)

2017 TGH Lift team survey results

• 885 respondents (75% RNs)
• Please rate the importance of the TGH Lift Team in performing your every day job duties (1 not important - 10 extremely important)
  • Overall score = 9.3

• How has the lift team benefited you or your patients?
  • 82% increased patient and family satisfaction
  • 74% experience less back discomfort
  • 66% patients get out of bed more frequently
  • 65% patients get repositioned more frequently
  • 59% patients fall less frequently when they get out of bed
  • 57% have more time for other nursing duties
  • 51% less fatigue at end of shift
Components to successful lift teams

- **Equipment** on each unit is crucial, Lift team should not manually lift.
- **Manager and Supervisors** for accountability, handle issues, enforce use of equipment, train etc.
- **Training lift team** to include knowledge base and customer service.
- **Educational programs for staff & peer leader programs**
- **Management support**
- **Staff buy in & support**
- **Market lift team**
- **Track outcomes**

Promoting your lift teams
Patient Handling Injuries
R.N. Injury Rate per 100 RN's
2001-2016

78% reduction of RN's injuries since 2001

Prepared by Employee Health Services

Patient Handling Injuries (PHI)
Low back injuries (rate per 100 Employees)
1999-2016

70% reduction in Low Back injuries since Lift team started in 2002.

Prepared by Employee Health Services
Summary

- Lift teams can be effective at reducing staff injuries and assist with promoting SPHM if set up correctly.
- Have all components necessary to assure success.
- SPHM & Lift team programs can have an impact on patient safety, patient satisfaction, skin integrity, nursing recruitment and retention etc.
Lift team additional resources

Lift team website

• Liftteams.com
  • FAQ, articles, blog, success stories
Join LinkedIn: lift team group

References

- Charney W. Handbook of modern hospital safety, 2010
- Short and Shea (2011) Lift teams; an effective strategy in safe patient handling. American Journal of safe patient handling and movement, 1 (2), 36-41
Questions

More information or questions: Contact Manon via email: mlabreche@tgh.org

WHYB Events

- **December 5-6**
  - WHYB Annual Worker Safety Conference
  - The Westin Lake Mary, Florida
Eligibility for Nursing CEU requires submission of an evaluation survey for each participant requesting continuing education:
https://www.surveymonkey.com/r/JHLVHRM

Share this link with all of your participants if viewing today’s webinar as a group

Be sure to include your contact information and Florida nursing license number

FHA will report 1.0 credit hour to CE Broker and a certificate will be sent via e-mail

We would appreciate your feedback even if you are not applying for CEUs!!

Web participants can stay logged in as the webinar closes to be redirected to the online survey (the link will also be provided in a follow up email)

THANK YOU!
WHYB Questions and Information –
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