The Use of Mechanical Lifts in Preventing Workplace Injuries in Nursing Staff  
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Introduction
Nurses are highly susceptible to work place injuries related to lifting and transferring patients. These injuries cause increased costs and decreased nurse satisfaction leading to negative patient outcomes. Evidence shows that mechanical lifts are effective in preventing these injuries, however, multiple barriers have been identified as causes of noncompliance.

PICO

P: Medical-Surgical Nursing Staff  
I: Use of Mechanical Lifts  
C: Nursing Staff Transfers Without a Lift  
O: Nursing Staff Injury Rates

Question: Does the use of mechanical lifts when transferring patients affect staff injury rates?

Methods
PubMed, EBSCOHost, CINAHL were used to conduct a literature review using the key terms:
• Patient/mechanical lift  
• Injury prevention  
• Workplace injury

A survey was also conducted on a medical floor with 5 multiple choice questions.

Survey Results
• 44 respondents total: 32 RNs and 12 CNAs  
• 20% of respondents have not received lift education in the past year  
• 81% have used a lift 2x or less in the past month  
• Lack of time and lack of maneuvering space were identified as the greatest barriers on the floor

Literature Results
A literature review confirmed the prevalence of high injury rates in nursing related to manual patient transfers and the effects on both increasing hospital costs and decreasing nurse satisfaction. Despite the evidence, several barriers to use of lifts have been found to include:

• Lack of time  
• Lack of education  
• No formal policy  
• Lack of maneuvering space  
• Lack of perceived need

Limited use of a lift results in an increase in nurse sick time and need for worker's compensation. Negative patient outcomes such as increases in rates of falls, pressure ulcers and skin tears occur when manually lifting patients.

Recommended Interventions
The review of literature recommended incorporating the following interventions into practice to promote the use of mechanical lifts:

• Implementing a zero lift policy (articles 2, 3, 4, 5)  
• Increasing staff education and new hire education (articles 2, 4)  
• Yearly competencies for staff (article 2)

Conclusion
This topic is difficult to research since the negative outcomes from manual patient lifting are difficult to measure (staff discomfort, fatigue, and patient comfort). However, there is quantifiable evidence that shows that the use of mechanical lifts helps to maintain the safety of both health care staff and patients. Further research is recommended on how a “zero lift policy” would impact workplace injuries. Incorporating mandatory training during nursing orientation of new hires and yearly competencies that require demonstration may also increase the use of lifts. An increase in compliance will need to come from a raised awareness of this issue and a shift in nursing culture.

References