**Introduction**
Healthcare workers are one of the most common professions with occupational injuries, outranking: truck drivers, laborers, assemblers, and janitors. Nursing staff perform frequent physical activity related to helping patients with mobility and ambulation, turning, repositioning, and assistance of ADLs. Nurses also perform strenuous physical activity such as lifting patients and equipment and standing for prolonged periods; all of which increase the risk of musculoskeletal injury/disorders.

**PICO Question**

**Population:** Adult in patients, on 6AC & 3SA requiring physical assistance from nursing

**Intervention:** Incorporate lift teams into to assist nursing with ambulation, lifts, turning, and other strenuous activity as needed.

**Comparison:** Number of work related injuries on units not implementing a lift team

**Outcome:** Reduction of staff injury, workman’s compensation claims, & lost time

**Question:** Can Lift Teams help reduce injuries to nursing staff while promoting safety and security of our patients?

**Methods**
A literature search was conducted using CINAHL, EbscoHost, and PubMed databases.

**Key words:** lift team(s), safe patient handling, work related musculoskeletal disorders, fall prevention, manual lift, mechanical devices

**Inclusion Criteria:** Articles within 10 years, inpatient hospitals, lift teams.

The initial search yielded 282 articles. 7 were included for this project.

<table>
<thead>
<tr>
<th>Article</th>
<th>Methods</th>
<th>Results</th>
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<tr>
<td>Mayeda-Letournea, J., PT,MHA. (2014)</td>
<td>Critical review of safe patient handling literature was conducted</td>
<td>Post lift team intervention, staff injury was reduced 55-62% with patient transfers, turning and lifts</td>
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<tr>
<td>Kutash, M., Short, M., Shea, J., &amp; Martinez, M. (2009).</td>
<td>Literature review of importance of successful safe patient handling program.</td>
<td>82% reduction in RN injury rate, 97% reduction in workers’ compensation costs for patient handling injuries, and no work related back injury since 2001. Also reduction in lost work days and modified duty days.</td>
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<tr>
<td>Hobbs, T., Wolverton, C., &amp; Clevenger, K. (2007).</td>
<td>Literature review on positive outcomes for lift teams</td>
<td>All staff benefit because staff are less tied up with moving one patient. Lift teams enhance patient satisfaction and security.</td>
</tr>
<tr>
<td>Nelson, A., Lloyd, J.D., Menzel, Nancy., &amp; Gross, Clifford. (2014)</td>
<td>Meta-analysis of two randomized control trials</td>
<td>Handling tasks frequently performed in unfavorable conditions. A single approach has not shown effectiveness in its isolation, a multifactor approach needed.</td>
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**Discussion**
As discussed by the American Nurses Association at a recent briefing to Capitol Hill, “Nurses and health care workers experience the highest rate of nonfatal occupational injuries and illnesses in any industry”. Improper and unsafe lifting techniques put nurses and patients at risk for injury and harm. Lack of training, resources, and staff puts nurses in challenging situations for promoting the safest environment for their patients.

**Conclusions**
Studies have shown that implementing a uniformed approach for safe patient mobility and ambulation; focusing on proper body mechanics, availability of mechanical assistance, and well trained staff, saw a reduction in work-related injuries to staff and an increase in patient safety and satisfaction. Further research and discussion by Hershey Medical Staff could prove beneficial to our hospital and align with our Inspired Model for improved patient safety and quality measures.

**References**


AAOHN Journal, 51(6), 246-251.