



Jumping the Hurdles

Overcoming Obstacles to a Successful SPH Program
Part II

10th Annual New York State Safe Patient Handling Conference, Syracuse, NY

All of the speakers and presenters have signed Disclosure Statements indicating they have no Conflict of Interest or Vested Interests that conflict with their role at this conference.

Learning Objectives

Participants will be able to:

- List common obstacles to successful SPH program implementation
- Identify strategies to overcome identified obstacles to achieve a successful SPH program implementation

Safe Patient Handling Committees

NYS SPH law requirements:

“The purpose of the committee is to design and recommend the process for implementing a safe patient handling program for the health care facility.”

- Half management/half non-managerial direct care providers
- Labor & management co-chairs
- At least 1 non-managerial nurse
- At least 1 non-managerial direct care worker (non-RN)
- Include individuals with expertise or experience that is relevant to SPH

Safe Patient Handling Committees

“Committees are places good ideas go to die.” – *attribution: someone who’s worked on a lot of committees*

“A camel is a horse designed by committee.” – *attribution: someone else who’s worked on a lot of committees*

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Making committees work

- Real power sharing between management & labor
- Include all effected players (PT/OT, radiology, patient/resident reps, nursing educ., biomed, procurement, envir. services, finance, risk mgmt, transport, all patient treatment depts, union reps, etc.)
- Someone on committee has power to make things happen & get financial allocation
- Set timelines so actions don't stall
- Replace comm. members who don't regularly attend mtgs. (but make sure comm. members released to attend)
- Convenient mtg. time/location
- Create a plan to make sure facility takes SPH implementation as seriously as other programs (on JC survey, OSHA will cite, must-have for safe early mobility implem., press. ulcer/falls initiatives)

OSHA's guide to successful H&S programs

- **Management commitment**
- **Employee involvement**
- Worksite analysis
- Hazard prevention and control
- Safety and health training

Management commitment

- Present your case
- Find management allies
- Benefits to patients

Employee involvement

- Identify SPH champions
- Training
- Address employee concerns
- Increase employee input
- Pilot easy-to-use equipment
- Buy in!

Employee involvement – Buy in!

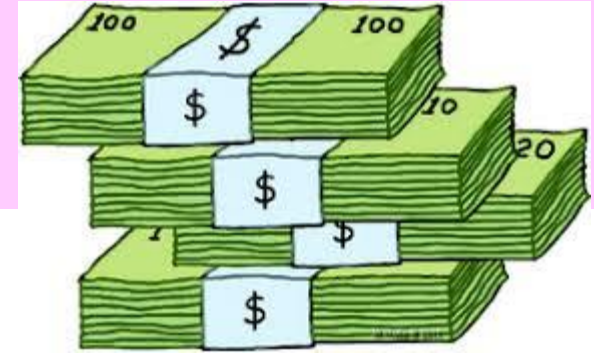
- Equipment readily available
- Adequate training
- Pilots w/ choices made based on employee input
- Communication between co-workers
 - Employees with jobs at other facilities that have successful SPH programs
 - Employees who have worked in other countries where SPH is the norm
- Culture change

Culture change



Bloodborne Pathogens

Financial resources



- Gather industry data
- Review workers' comp data/illness & injury logs
- Patient falls and pressure ulcer costs (not reimbursed)
- Costs of absenteeism and staff replacement
- Lots of studies available!

Any more hurdles we need to jump?

