Work organization factors associated with patient-handling injuries among nurses and nurses' aides

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Background

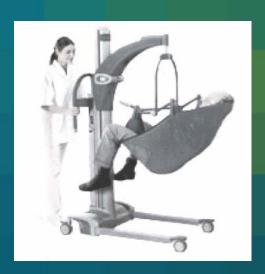
- Compared to workers in other occupations, nursing personnel are at high risk for workrelated musculoskeletal injuries
- Injury burden among nursing personnel attributed, in part, to physical demands of patient-handling tasks
 - Nurses' aides at particularly high risk

Background

- Current efforts to prevent injuries often focus on reducing physical exposures
 - "No-lift" or "Minimal-lift" policies
 - Specialized lifting teams
 - Patient lift equipment







Background

- Non-physical work factors have also been associated with musculoskeletal injury
 - Adverse work schedules
 - e.g., long work days, overtime, shift work
 - Poor staffing
 - Low social support at work
 - Low job control
 - High psychological work demands

Study Aim

 To measure the association of worker characteristics and work organization factors with self-reported musculoskeletal symptoms and patient-handling injuries

 To measure differences in patterns of work organization and outcomes of interest between nurses and nurses' aides

Nurses' aides...

- Are predominantly African-American
 - Growing immigrant population as well
- Have low educational requirements
- Receive low pay
 - Average_{North Carolina} = \$9.66/hour (\$20,090/year)
- Have few opportunities for advancement

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Nurses' aides...

Why are they considered vulnerable workers?

What factors contribute to their vulnerability?

Study Participants

- Nurses (RN/LPN) and aides
 - Large tertiary-care medical center
 - Smaller associated community hospital

Background...

- 2004: Stated policy shift to a 'Minimal-Manual Lift Environment'
- Mechanical patient lift equipment introduced on inpatient units



Study Data

Part of an ongoing 4-year evaluation of these interventions at preventing patient-handling injuries

Baseline Patient-handling tasks
questionnaires Musculoskeletal disorders
Work organization factors

Focus groups

Patient load and staffing levels

Work organization

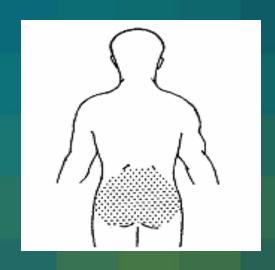
Worker characteristics

Equipment use/Barriers to use

Low Back Symptoms

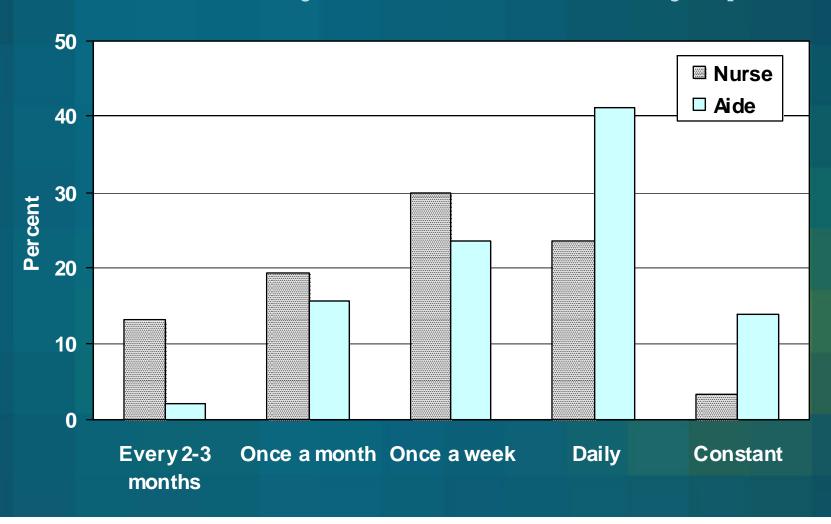
"In the last 6 months, have you had low back symptoms >3 times or lasting a week or longer?"

- 50.3% of respondents reported low back symptoms
- Low back symptoms more prevalent among aides (58.6%) than nurses (49.9%)



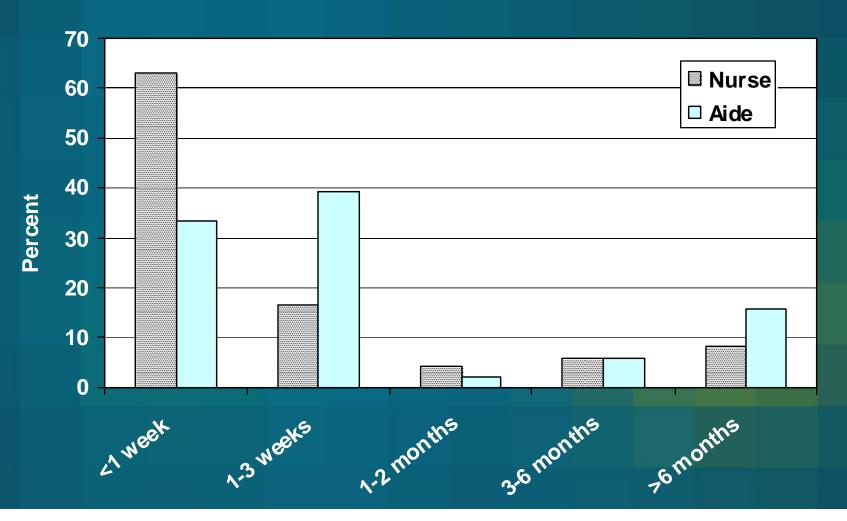
Low Back Symptoms: Frequency

"How often have you had low back symptoms?"



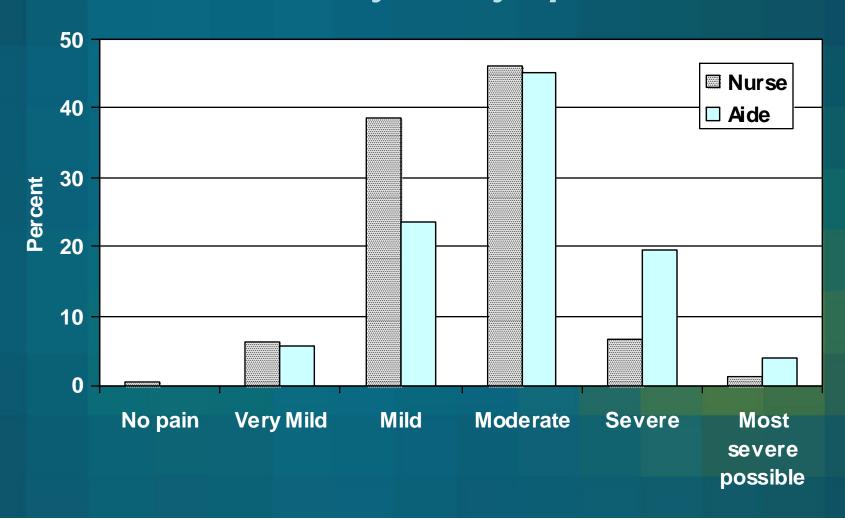
Low Back Symptoms: Duration

"How long did your symptoms usually last?"



Low Back Symptoms: Severity

"Describe how bad your symptoms have been."



Patient-Handling Injuries

"In the last 6 months, how many times have you injured yourself as a result of moving or assisting patients?"

- 35% of respondents reported at least one patient-handling injury
- Injuries were more prevalent among aides than nurses
 - Prevalence Ratio 1.3
 - 95% Confidence Interval (1.0,1.7)

Patient-Handling Injuries

- Among those who sustained a patienthandling injury in the previous 6 months:
 - 12% missed work
 - 32% sought medical care
 - 64% who sought medical care did not file a workers' compensation claim

Aides more likely to seek medical care

Aides more likely to file WC claim for medically-treated injuries

Pain as "part of the job"

"I think as a nurse, we all learn not to be honest with ourselves."

"The pain that I would have 2 years ago, I would rate it 10 out of 10. Now after 2 1/2 years, it's 3 out of 10 to me. My body got adjusted to that pain."

"I didn't hurt this morning because I had 3 days off, but give me to Wednesday. When I wake up, my whole body going to be hurting."

Working injured

When co-workers are injured

- "try to give the lighter assignment"
- "folks are very protective"

...but it is a burden

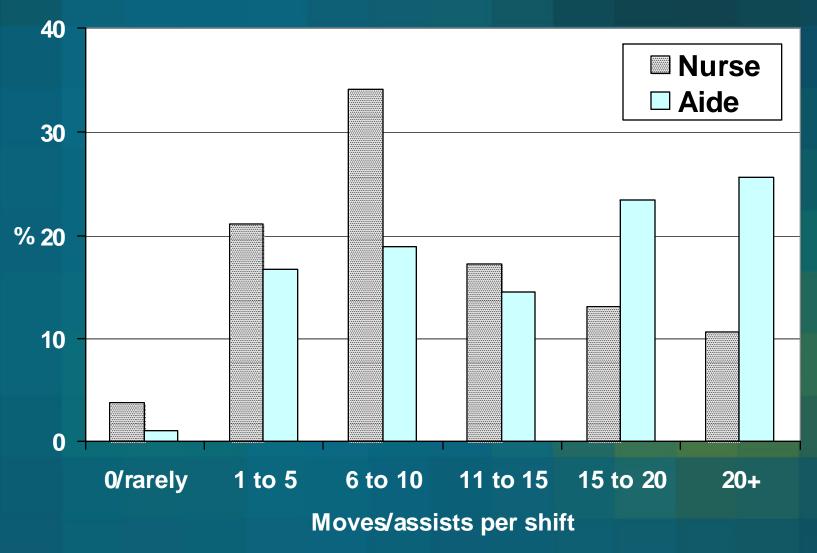
- "That means you have heavier patients on you.
 That's a lot of work."
- "I think it also affects morale of the staff."
- "I would rather someone stay out ...rather than not be able to take a full assignment."

Working injured

Lift equipment not helpful for staff on restricted work duty

- "Heavy" and "cumbersome"
 - "It's hard for me to maneuver the [sit-tostand lift] because of my back problem."
- Use often requires re-arranging of patient room

Baseline questionnaire: Patient-handling activity per shift



Characteristics of patient population

More obese

 "Fatter and fatter," "More and more of our patients are coming huge"

Higher acuity

"Sicker and sicker," "multi-system problems"

Faster turnover

Staffing levels

"Tighter than a rubber band"

- Affects patient care
- Variability in day/night resources

"Stretched pretty thin" with additional job responsibilities

- Joining committees
- Leadership for adjunct initiatives

Work Organization Factors

(Job Content Questionnaire, Karasek)

Decision latitude

Psychological demand

Physical demand

Hazardous conditions

Job insecurity

Job dissatisfaction

Social support

Isometric load

All associated with patient-handling injury!

Compared to nurses, aides reported significantly....

lower Decision latitude

Psychological demand

Physical demand

Hazardous conditions

Job insecurity

Job dissatisfaction

Social support

Co-worker support

Supervisor support

Isometric load

"If you notice, nurses they like they supervise us, and I tell my nurse, 'You all the nurses, not the supervisors. You just the nurses.' I think that's what it is, 'cause they give them a lot of authority over [aides]. Nurses have a lot of authority. You're basically working for the nurses." ~ Aide, Surgical ICU

Compared to nurses, aides reported significantly....

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Isometric load

"I had one [nurse]...She was in the patient's room...and the patient told her that she needed to use the bathroom. She walked out of the patient's room, closed the door, walked around and looked for me. [She] said, 'Number five needs a bed pan.'

My quick response was ('cause I had just observed her), 'What are you doing?'

[She said], 'I'm busy.' So she waited about five or ten minutes... '[Mary]...DID WE get the bed pan for room five?'

I don't know, did we?"

~Aide "Mary," Heart Services

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Isometric load

"[That nurse aide] had worked all that day, like I said, by herself. Did all the work on the unit, all the baths, all the accu-checks, all the beds, everything. And then that nurse, the charge nurse, had the nerve to tell her, 'Now you can go to 3100 and help them out.' She said they just threw her away like a dog."

~Aide II, Heart Services

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Psychological demand

higher Physical demand

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lower

Co-worker support

Supervisor support

Isometric load

"When you go in, in the morning, depending on who the nurse is, they have a certain expectation from you. If you have 10 nurses that have all those expectations, some days it can be totally impossible... You feel like you're always disappointing somebody, so that's what I don't like about the job." ~ Aide, General Surgery

Conclusion

- Work performed by nurses' aides is crucial to fulfilling direct patient care tasks
- Nurses' aides characterized by relative lack of autonomy in the workplace
 - Less able to cope with physical, psychological or social burdens
 - Difficulty in adjusting work schedule or tasks
 - Less able to prevent subsequent health consequences

Conclusion

- Low-back symptoms and patient-handling injuries were prevalent among this group of acute care nursing staff
 - Aides at higher risk than nurses
- Our findings suggest
 - Advantages to considering various research methods to reach vulnerable workers
 - Interventions aimed at reducing musculoskeletal disorders should focus on physical and psychosocial factors of direct patient care

"Just work with me. I work with you; you work with me. It's a team effort; it's not no 'big I's' and 'little u.' It's just working together..."

"We gotta have some kind of understanding, 'cause we have to all make this work."

THANK YOU

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