
Lift Team Analysis & Recomendations

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Agenda

The UC Irvine Medical Center Lift team was created and funded for three years through the UC Office of the President.

O of P Funding expires this year. This proposal is to establish permanent funding for the Lift Team & to incorporate the Team to a Transport Pool.

The Lift Team is perceived very positively by our Nursing Staff. Elimination of the team would likely be of great concern to the CNA Union

Lift Teams are now very common – here is a sampling...

- Virginia Mason Hospital, Washington
- St. Francis Medical Center, Indiana
- Miami Valley Hospital, Ohio
- UC Hospitals
- Kaiser Permanente
- Salem Hospital, Oregon
- Community Health Network & Clarian Health, Indiana

Why Lift Teams Make a Difference

- Investments in programs, such as Lift Teams, are essential to retain older nurses
- Nursing staff is aging and patient's are becoming heavier
- The cost of nursing turnover is equal to two times the nurse's salary
- 12% of RN's leave the profession each year because they cannot physically do the job any longer
- Quality care & positive patient outcomes are associated with a highly skilled and caring nursing staff

Bureau of Labor Statistics Report 2003 & 2006

- Nursing consistently ranks as one of the top 10 occupations for work-related musculoskeletal injuries
- 35-80% of all nurses sustain back injury during their careers. Back injuries are the single largest cause of lost workdays for nurses
- 52% of all nurses complain of chronic back pain
- Nursing aides rank 3rd among occupations for job-related injuries
- Nursing Assistants experience three to four times more injuries than RN's

Evidenced Based Intervention

10-Hospital Study Lift Team Study

- 69% reduction in staff injury rate during patient lifting
- 62% reduction in incident rate
- 90% reduction in lost days
- 72% reduction in Workers Comp costs
 - Charney, W. Patient Lift Teams

Miami Valley Hospitals two year results after Lift Team created

- 30% reduction in staff injuries associated with patient handling activities
- 67 fewer injuries
- 134 fewer lost work days
- 1217 fewer restricted work days

UC Davis

- No workers compensation claims associated with patient handling activities in the first year after implementation of a Lift Team

Issues Contributing to Formation of Lift Teams

- Patient weight

- The average adult is 25 pounds heavier than in 1960
- 63.1% of adults in the US are now overweight or obese
- 34% of adults are obese, more than double from 30 years ago

- Nurses age

- 40% of the US nurse workforce is age 50 or older (AONE, 2011). The average age of an RN at UC Irvine is 42, and the average age of UC Nursing Assistants is 41.

Risk Management Principles

- Lifting is a skill, not a random task
- Lift Teams puts risk where it can be controlled: In small groups of teams rather than thousands of nursing personnel

Benefits of Integrating Lift team & Transport

- Improved supervision via combining the two separate functions of lifting & transport to one department
- Cross-training and dual competencies providing a larger pool for staffing
- Leveraging the use of the BMS/Transport System with single dispatch
- Combined resources provide greater redundancy
- Increase in dual function staff will reduce patient wait times
- More even workflows with the dual roles and less underutilized FTE time
- Centralized equipment inventory, maintenance and tracking
- Potential to greater incorporate volunteer assistance, particularly with inpatient and outpatient discharges
- Potential to create a new pathway for entry level positions

UCI Current Lift Team Guidelines

- Lift staff work in teams of 2
- The team rounds regularly on the nursing critical care units
- The team responds to calls for assistance on the units and in outpatient areas

Current Lift Team Budget

- Budgeted Staffing for 2010
 - Includes department supervisor & lift staff
 - 10.75 FTE
 - \$299,759 salaries
 - \$152,792 benefits
- \$4688 supplies
- Total Expenses: **\$457,239**

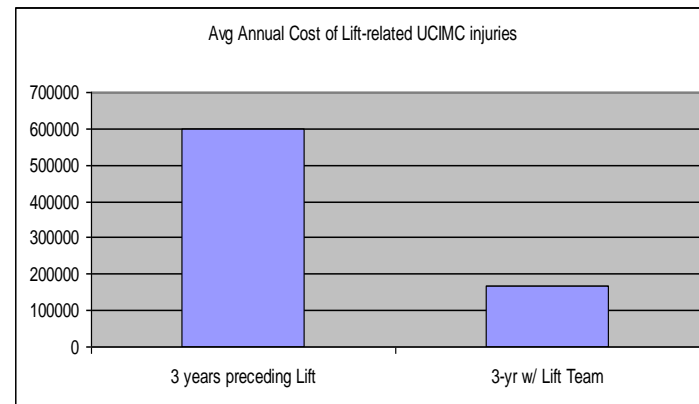
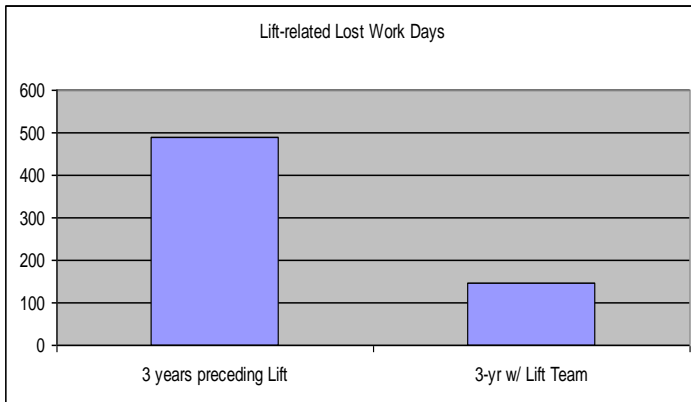
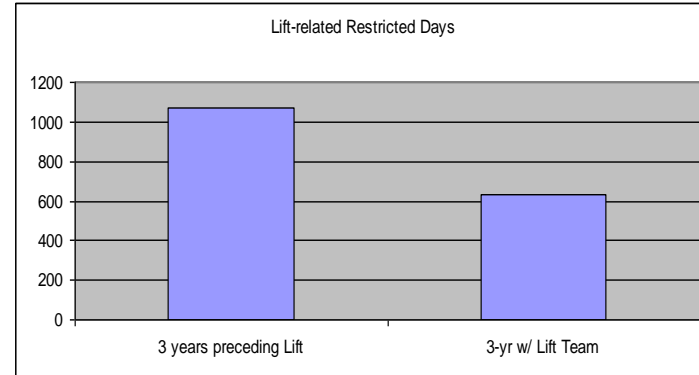
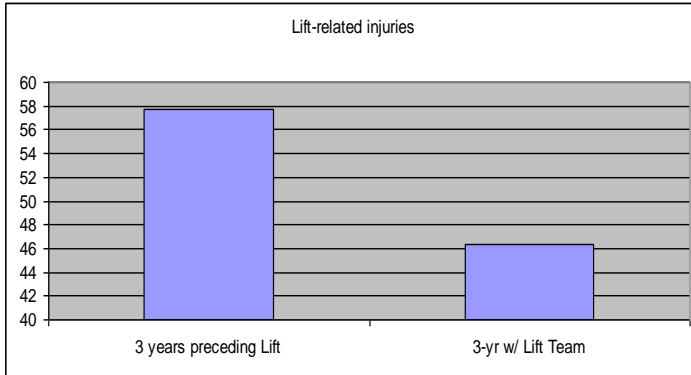
Specialty Lift Equipment Purchases

- \$130,000 of Specialty Lift Equipment has been purchased over the past 3 years to facilitate safe lifting

Employee Lift Training

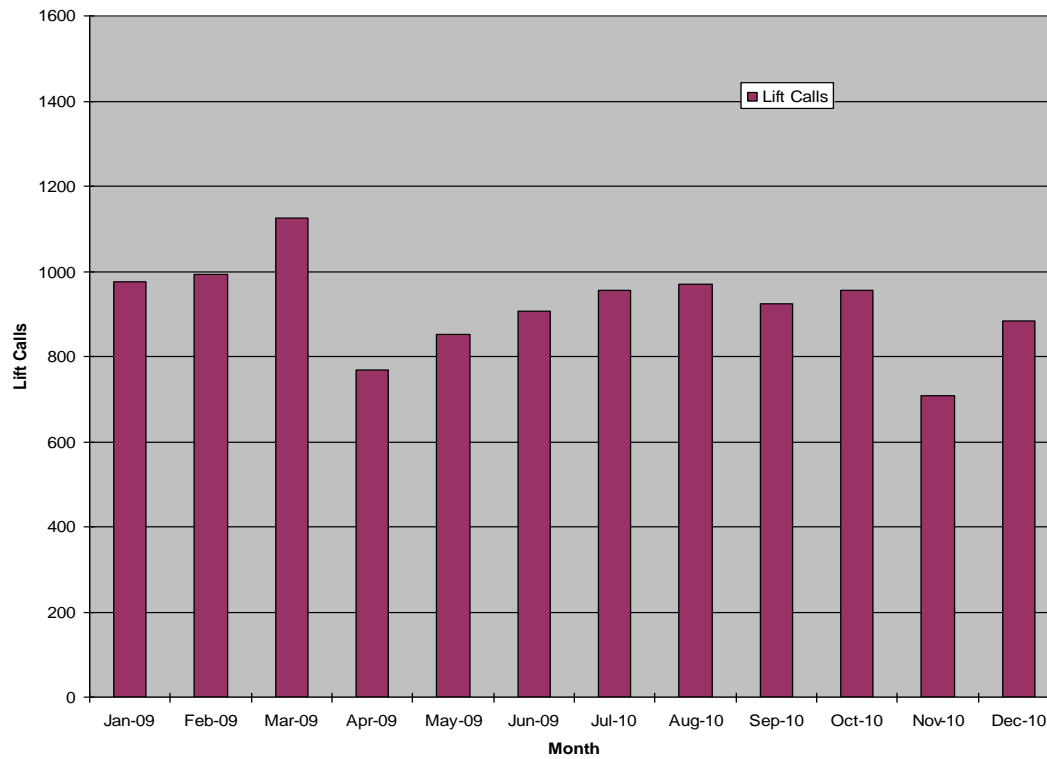
- New patient care staff receive training in new hire competency days for safe lifting techniques and training in lifting equipment
- Lift Team has embedded function of teaching patient care staff lift techniques & equipment training during their normal work flow

Strong Return on Investment: Decrease in lift related injuries, restricted days, lost work days and injury costs!



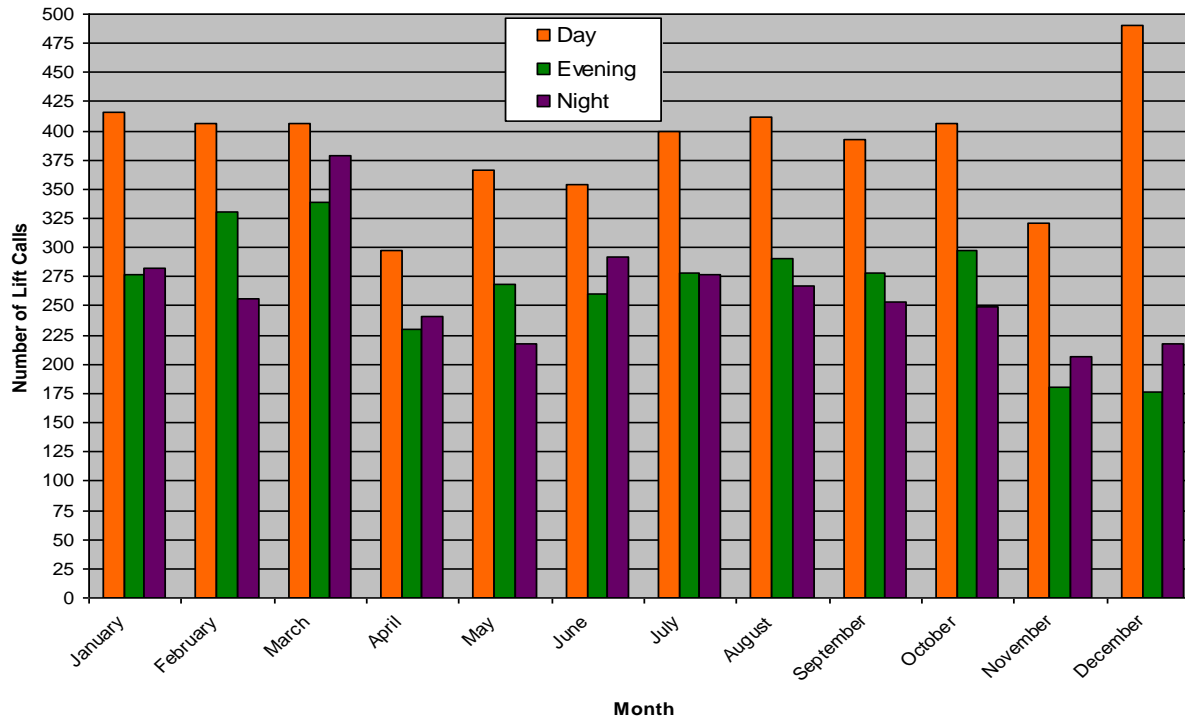
UCI 2010 Lift Team Stats

COMBINED SHIFTS MONTHLY LIFT CALLS
January 2010 - December 2010



Lift Team Stats by Shift

**TOTAL LIFT CALLS PER SHIFT
JANUARY 2010 - DECEMBER 2010**



Recommendation

- Create a Transport Department, reporting through Imaging Leadership, which includes both Transport and Lift Team to begin fiscal year 2012.
- The two specialties would operate from one dispatch center with one dispatch supervisor using the Bed Management System (BMS).
- The combination of reduced workers comp injury costs and reduced replacement labor for lost work days neutralizes the cost of continuation of the Lift team