The use of a lateral transfer device instead of a drawsheet for the identified patient transfers has resulted in a significant reduction in our healthcare worker injuries and associated cost. We will continue to track patient handling injuries on a monthly basis to validate the ongoing success of our new protocol.

The objective of our project was to reduce patient handling injuries during lateral patient transfers.

- **BACKGROUND**
  - The high risk for work-related musculoskeletal injuries among nurses and is a well-known safety issue.
  - The incidence rates for various types of healthcare workers range from 103.6-220.6 per 10,000 full-time healthcare worker.
  - Data support that exertion, which is the force or effort required to lift, move, or handle patients, is a major contributing cause of work-related injury, with lateral transfers and patient repositioning in bed being the most frequent patient handling activities.
  - Without the use of various types of safe patient handling equipment, the forces exerted regularly on healthcare workers’ musculoskeletal system while manually moving and lifting often exceed a level that can be safely tolerated by the human body.
  - The need for nurses and nursing assistants in all areas of the hospital to engage in patient handling activities repeatedly throughout the day puts them at high risk for injury.

- **METHODS**
  - Jan’12 - Jun’15 (42 months) our facility had 41 patient handling injuries associated with lateral patient transfers.
  - The standard of care for lateral patient transfers was draw sheets.
  - On July 1, 2015 we implemented a new protocol for lateral patient transfer in the Operating Room for all patients, Emergency Room for patients arriving by ambulance and/or immobile and for medical-surgical patients with mobility limitations.
  - The new protocol required the use of a lateral transfer device instead of a drawsheet during lateral transfer.
  - All staff were educated on the proper use of the device.

- **RESULTS**
  - Our facility saw a 100% reduction in patient handling injuries related to lateral patient transfers in the first month of implementation which has continued to stay at zero injuries for 13 months post-implementation.
  - Staff report that patient transfers are much easier when using the device.
  - During the 13-month implementation period, the cost of purchasing the lateral transfer device was $24,300, but our cost avoidance from injury reduction was $292,500, providing an ROI of $268,200.
  - During this time there were two new patient handling injuries, both of which occurred when the lateral transfer device was not being used.

- **CONCLUSIONS**
  - The use of a lateral transfer device instead of a drawsheet for the identified patient transfers has resulted in a significant reduction in our healthcare worker injuries and associated cost. We will continue to track patient handling injuries on a monthly basis to validate the ongoing success of our new protocol.

References: