



Workplace Safety for CNAs

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Purpose and Objectives

The purpose of this course is to inform CNAs regarding safety issues that may occur in the workplace. This includes bodily injury due to poor body mechanics, workplace violence and harassment.

After successful completion of this continuing education self-study CNA course, participants will be able to:

1. Explain why physical fitness is needed to prevent job injuries including how injuries develop
2. Identify proper body mechanics and tools that may be used in lifting and transferring patients
3. List situations that increase the risk of injury
4. State what to do if you are injured on the job
5. Describe situations that have a high risk for violence
6. Explain what to do when confronted with violence
7. Explain what to do if you are harassed at work

Introduction

The U.S. Department of Labor, Occupational Safety and Health Administration (OSHA) published the OSH Act of 1970. This Act was written to ensure that employees have a place of employment that is free from recognized hazards that are likely to cause death or serious physical harm U.S. Department of Labor, Occupational Safety and Health Administration (OSHA), n.d.)

Hazards include:

- Repetitive movements – things that are done frequently and repeatedly
- Patient handling tasks:
 - Moving patients while in an awkward position (stretching across the bed)
 - Pushing gurneys and wheelchairs up a ramp that take a great deal of strength
 - Lifting heavy objects alone
- Overexertion
- Workplace violence (staff and visitors)
- Workplace harassment (staff and visitors)
(OSHA, n.d.)

It is impossible to name all the hazards that a healthcare worker may encounter; therefore, it is important that the hospital has a safety and health program and that all workers are trained and understand the principles of the program.

Knowing how to recognize situations that will put you at risk for injury can empower you to prevent these injuries from occurring.

This course will address safe patient handling, workplace violence and harassment.

Statistics

According to the 2013 Bureau of Labor Statistics (BLS) report, musculoskeletal disorders made up 33% of all worker injuries and illnesses (OSHA, n.d.)

OSHA reports that from 2002-2013 there were 7.8 cases of serious workplace violence per 10,000 full-time employees. This rate of injury in healthcare is four times higher than any other industry (OSHA, 2014).

Harassment occurs at a frightening rate, over 50% of nurses and nursing students are verbally abused annually (OSHA, 2014).

It is important to note that the number of cases listed above are only the REPORTED cases. Many instances of injury, violence, and harassment go unreported.

Safe Patient Handling

Safe patient handling is essential when working in healthcare. One word that you will hear used when talking about safe patient handling is ergonomics.

Ergonomics is the science of fitting the job to the worker. Therefore, you may be asked to show that you can lift a predetermined amount of weight using correct body mechanics during your hiring process or physical. The employer is making sure you have the right skills for the job.

When there is a mismatch between the job requirements and the employee's ability or physical capacity, work-related injuries may occur (OSHA, n.d.).

Information provided in this section closely follows the recommendations found in the OSHA, e-tool Healthcare Wide Hazards: Ergonomics (OSHA, n.d.).

For more information go to: <https://www.osha.gov/SLTC/etools/hospital/hazards/ergo/ergo.html#content>

Musculoskeletal Disorders

Musculoskeletal disorders include injury and loss of function to muscles, bones, ligaments, tendons and spinal disks. These injuries may occur immediately or may develop over time. It is important to report the injury as soon as it occurs to enable your employer to help you get whatever treatment may be necessary now and in the future. These injuries are avoidable.

Signs and Symptoms to Report

- Aching back or neck
- Sharp or dull pain in any joint
- Pain, tingling or numbness in hands or feet
- Pain associated with specific activities
- Hot, inflamed feeling in a specific area of the body
- Unusual tightness or stiffness
- Shooting or stabbing pain in arms or legs
- Unusual muscle weakness and fatigue

Workplace musculoskeletal injuries are avoidable!

If you are injured on the job:

- **STOP** what you are doing
- **REPORT** to your supervisor immediately
 - Even if you think the injury is minor, remember, some injuries become worse over time

It is important to know the rules about injury reporting. Make sure you know what processes you need to follow in your facility.

Avoid Injuries

- Maintain good health:
 - Get regular exercise, nutrition, and rest
 - Extra weight puts stress on your knees; protect your knees by keeping your weight in the normal range
 - Exercise wisely, swimming is especially easy on knees, aerobics and yoga build strength, flexibility, and endurance
 - Stress, fatigue, and overexertion increase your chance of injury. Keeping to a fitness program may help overcome these risks
- Practice good posture:
 - Keep your body relaxed
 - When standing, change positions frequently
 - Wear supportive, comfortable low-heeled shoes
 - Support your lower back when seated
- Stretch and keep flexible:
 - Muscles need to be warm to work well
 - Stretch periodically throughout the day
- Use proper body mechanics:
 - This is a proven way to avoid injuries while standing, sitting, lifting, pushing, pulling, carrying, and reaching
- Rotate tasks:
 - Repeating the same motion over and over creates damage to the body
- Ask for assistance:
 - Know your limitations and get help or use assistive equipment
- Avoid whatever increases your risk of injury:
 - Injuries are more likely when you are unsure of what you are doing or are stressed, fatigued, or straining
 - Poor work habits, distractions, and substance abuse put you at risk. If you are faced with these situations, seek help from your supervisor.

Move Safely

When transferring or lifting patients; it is important to use proper body mechanics and use transfer devices whenever possible.

Transferring

- Plan the move and coordinate the lift with others

- Use a wide, balanced stance with one foot ahead of the other
- Push, do not pull, whenever possible
- Get assistance if you cannot see over the item you are transferring

Lifting

- Test the weight of the load first
- Bend at the knees, NOT at the waist!
- Get a good grip and bring the load as close to the body as possible
- Tighten the abdominal muscles as the lifting motion begins
- Lift with the legs and stand up in a smooth, even motion
- Pivot on your feet if a change in direction is necessary, do not twist at the waist
- Avoid reaching above shoulder height
- Limit the number of lifts in one day

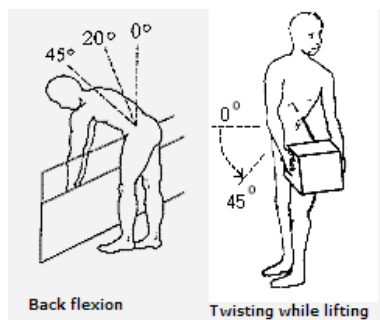


Image courtesy of OSHA (n.d.)

To avoid injury, do not bend at the waist or twisting while lifting a load.

Using Equipment

Manual lifting of heavy objects should not be done without an assistive device or help from another healthcare worker whenever possible. Many hospitals require that an assistive device be used when the object to be lifted weighs more than 30 pounds.

PROTECT YOURSELF AND OTHERS

Know and follow the weight guidelines available in your facility!

Not knowing is not an excuse for not following these guidelines.

Assistive Devices

This list does not include all the devices that are available. Be sure to know what assistive devices are available in your facility and get trained in the proper use of the device.

- | | |
|-----------------------------------|---------------------------|
| • Gait belts | • Transfer mats |
| • Lifting device or hoists | • Roller boards or mats |
| • Slide boards | • Transfer or pivot discs |
| • Draw sheet or incontinence pads | • Shower or toilet chairs |
| • Low-friction mattress covers | • Shower carts or gurneys |
| • Slippery sheets or plastic bags | • Pelvic lift devices |

Gait Belts

A gait belt is a device used to transfer people from one position or place to another, when a patient is cooperative and can bear some (partial) weight. The gait belt gives you a firm surface to hold onto. It gives the patient a sense of security as it is tightened. With this belt, you could move a patient from a standing position to a wheelchair or gradually lower a patient to the floor (if necessary) without injuring self or patient.

The gait belt is customarily made of cotton webbing and a durable metal buckle on one end.. The purpose for this is to put less strain on the back of the care giver and to provide support for the patient.

A gait belt is placed around the patient's waist and tightened until you can place two fingers between the belt and the patient's body. If the belt is loose, it may slip upward and injure the patient's chest (especially the female patient) or increase the risk for dropping the patient once the weight is put on the belt.



Image of gait belt provided courtesy of OSHA (n.d.)

Gait Belts

Key points for using a gait belt:

- More than one caregiver may be needed
- Belts with padded handles are easier to grip and increase security and control
- Always transfer to resident's strongest side
- Use good body mechanics and a rocking and pulling motion rather than lifting when using a belt
- Belts may not be suitable for use on patients who have had recent surgery or have a severe cardiac condition
- Ensure that the belt is securely fastened and cannot be easily undone by the patient during transfer
- Ensure that there is a layer of clothing between patient's skin and the belt to avoid abrasion
- Keep the patient as close to you as possible during transfer
- Lower bed rails; remove arms and foot rests from chairs, and other items that may obstruct the transfer

Sliding Board



Image of sliding boards,
courtesy of OSHA (n.d.)

Sliding boards are generally used in conjunction with gait belts. Some newer versions of sliding boards have devices that allow the patient to slide easily along the board without any lifting.

These devices are very useful for difficult transfers like car to wheelchair.

This type of sliding board protects against back injuries, brachial plexus injuries and conditions which can cause pressure sores.

Pivot Discs

Pivot discs are smooth round discs that can be used for standing and seated pivot transfers.



Image of a pivot disc,
courtesy of OSHA (n.d.)

Lateral Transfer Devices

The use of lateral transfer devices can help protect you from injury when other staff members are not available to help you. Become familiar with the specific lateral transfer device used on your unit.



Image courtesy of OSHA (n.d.)

Roller Sheets

Roller sheets are constructed of low-friction fabrics that glide over themselves during a patient transfer. They are used to reposition patient in bed and facilitate independent positioning.



Image courtesy of OSHA (n.d.)

Slip Sheets

Help to reduce friction while laterally transferring patients or repositioning patients in bed and reduce the force workers need to exert to move the patient.



Image courtesy of OSHA (n.d.)

Test Your Knowledge

When moving patients or other heavy objects you should:

- A. Move the patient or object yourself as no one else is around to help
- B. Use an assistive device when the weight of the object is above your facilities policies**
- C. Use an assistive device on all patients and heavy objects
- D. Don't move the patient or heavy object

Rationale: Manual lifting of heavy objects should not be done without an assistive device or help from another healthcare worker whenever possible. Many hospitals require that an assistive device be used when the object to be lifted weighs more than 30 pounds.

PROTECT YOURSELF AND OTHERS

Know and follow the weight guidelines available in your facility!

Not knowing is not an excuse for not following these guidelines.

Workplace Violence

The information discussed in this section closely follows the information found in the OSHA publication: Workplace Violence in Healthcare.

For more detailed information go to: <https://www.osha.gov/Publications/OSHA3826.pdf>

One of the most common violent acts may be before or after work, especially in the dark.

Being aware of your surroundings can lower the risk of being assaulted.

- Ask to be escorted to your car by a member of the hospital security team
- Know the safe path between the parking area and the facility entrance
- Stay on sidewalks
- Do not cut across parking lots if possible
- Avoid walking in dark areas and next to heavy shrubbery
- Walk in groups
- Know the location of safe areas and emergency phones
- If in danger, make as much noise as possible and run to a safe area
- If you are alone at work outside of business hours:
 - Keep doors locked
 - Be alert for people without proper identification
 - Offer assistance, as they may be lost
 - Always enforce visitor guidelines
- Report suspicious individuals to security
- Keep your personal valuables out of sight
- Know how to reach hospital security in case of an emergency.

Preventing Workplace Violence

Nurses and nursing assistants are at highest risk for workplace violence in the hospital, because they are most closely involved with patients. Violence may occur anywhere in the facility, but is most often seen in psychiatric wards, emergency rooms, waiting rooms, and geriatric units.

Hospital violence is most likely to erupt if staff or visitors:

- Are under the influence of drugs or alcohol
- Have a history of violence
- Have certain psychiatric diagnoses

Circumstances that give rise to violence are:

- Not enough staff
- Patient transports
- Long waits for service or care
- Overcrowded, uncomfortable waiting rooms
- Working alone
- Lack of security
- Staff is not trained in handling potential or actual violence
- When the public is allowed to wander around
- Poorly lit corridors, rooms, parking lots, and other areas

Preventing Workplace Violence

It is an employer's obligation to address workplace violence. Facilities are encouraged by OSHA to have a prevention program and policy that includes zero-tolerance for violence (OSHA, 2014).

Follow your facility's violence prevention program and security measures

Safety and violence prevention programs should include training on:

- Appropriate use of restraints
- Procedures for restricted areas
- Security team functions and contact numbers
- Identification badges
- Computer use, including e-mail
- Reporting suspicious people or incidences
- Reporting unsafe areas
- Handling irate visitors, staff, or patients

Threats of violence include:

- Offensive comments
- Written threats, letters or notes
- Computer/phone threats
- Physical blocking of movement
- Enraged behavior

If you are confronted by a violent individual, avoid confrontation, get help, stay calm, and isolate patients.

Management of Workplace Violence

If a violent person confronts you:

Avoid Confrontation: Retreat to a safe place if possible. Never approach or attempt to disarm an individual with a weapon

Get Help: Get appropriate assistance. Use the facility's emergency code to summon behavioral response team or security personnel

Stay Calm: Do not threaten or agitate the offender

Isolate: Protect patients, lock doors, direct traffic away from area, and evacuate if you are able

Harassment

Harassment is unwanted behavior. Harassment may escalate to violence.

- Sexual harassment may target your gender or sexual orientation and is **illegal**.
- Racial harassment may target items such as your skin color, race, cultural background
- Cultural harassment may target your religion or other lifestyle preferences
- Workplace bullying is considered harassment

Always report harassment or bullying. These actions may get worse and become violent acts.

Test Your Knowledge

You are working in the Emergency Department when a patient arrives who has clearly been drinking and is intoxicated. You know that this patient puts you and your co-workers at-risk for:

- A. Workplace violence
- B. Musculoskeletal injury
- C. There is no risk
- D. Harassment

Rationale:

Hospital violence is most likely to erupt if staff or visitors:

- Are under the influence of drugs or alcohol
- Have a history of violence
- Have certain psychiatric diagnoses

Conclusion

Working in healthcare is a rewarding job! However, as with every job there are risks that must be identified and prevented if possible. As a healthcare worker, it is your responsibility to know and follow the safety policies in your facility. You can prevent a lifetime of pain by following the simple rules of body mechanics, using assistive devices to move patients and heavy objects. Reporting unsafe conditions, such as poorly lighted parking lots or corridors, suspicious behavior, and unwanted advances all help reduce workplace injury and violence.

References

U.S. Department of Labor Occupational Safety and Health Administration (OSHA). (n.d.). Ergonomics. Retrieved from: <https://www.osha.gov/SLTC/ergonomics/index.html>

OSHA. (2014). Workplace violence in Healthcare. Retrieved from: <https://www.osha.gov/Publications/OSHA3826.pdf>

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