

# Victorian Nurses Back Injury Prevention

BULLETIN

## The Victorian Nurses Back Injury Prevention Project

In response to growing concern amongst nurses and the health industry regarding the unacceptably high rate of back injuries in the nursing profession and the enormous human and financial costs associated with such injuries, the Victorian Nurses Back Injury Prevention Project (VNBIPP) was established to assist health care organisations to implement programs to prevent back injuries amongst nurses.

The aims of the Project are:

- To assist facilities to implement back injury prevention programs based on no lifting principles.
- To facilitate long-term cultural change in health care organisations by encouraging new attitudes aimed at eliminating unsafe practices that have traditionally led to a high risk of injury amongst nurses. It is expected that programs will recognise that staff safety is of equal importance to patient safety.
- To assist health care organisations to implement effective procedures for risk identification, assessment and control of patient handling injuries among nurses.

The Minister for Health established the VNBIPP Committee in October 1998 to support the development and implementation of back injury prevention initiatives targeting nurses working in the public sector. The objectives of the VNBIPP Committee include:

- The development of a process and framework for the implementation of nurses' back injury prevention programs in public health care facilities across Victoria.
- The establishment of a process for ongoing monitoring and evaluation of the programs at the individual facility level as well as the overall project.



### Victorian Nurses Back Injury Prevention Project Committee members left to right

**Back row:** Cassandra Finning (Division 1 Registered Nurse), John Stanway (Health Service Management), Allison Williams (Royal College of Nursing–Victorian Chapter), Ruth White (Australian College of Nurse Management), Mathew Casey (Victorian Healthcare Association) **Front row:** Belinda Gilsean (Nurse Policy Branch, DHS), Anna Kokkolis (Division 2 Registered Nurse), Claudia Trasancos, Chair (Nurse Policy Branch, DHS), Jeanette Sdrinis (Australian Nursing Federation (Vic)), Elizabeth Langford (Injured Nurses Support Group), Fiona Begg (Occupational Health and Safety Consultant)

**Absent:** Ros Kushinsky (Victorian WorkCover Authority), Mandy Heather (Metropolitan Health Services Nurse Executive Group)

**Past members include:** Jill Beattie (Royal College of Nursing–Victorian Chapter), Ross Armstrong (Victorian WorkCover Authority), Ella Lowe (Health Services Nurse Executive Group), Frank Mielke (Victorian Healthcare Association), Anne Turnbull (Australian College of Nurse Management), Jennifer Gale (Metropolitan Health Services Nurse Executive Group), Stan Capp (Victorian Healthcare Association), Lance Kenningham (Victorian WorkCover Authority)

## Background

The international and national literature indicates that there are benefits to be gained when facilities implement back injury prevention programs based on no lifting principles and policies. These gains include reduced injury rates for staff and patients and significant savings in terms of workers compensation and other injury associated costs.

Under Occupational Health and Safety (OH&S) legislation, employers are required to provide a working environment for their employees that is safe and without risks to health as well as to ensure the health and safety of patients and residents. The Manual Handling Regulations 1999 place legal requirements on employers to provide equipment and aids to assist employees to carry out manual handling tasks and to provide training to staff in the correct use of equipment and safe handling of patients.

In 1996, Elizabeth Langford, from the Injured Nurses Support Group, conducted a survey that examined the impact of injury on nurses, the industry and the community. The Injured Nurses Support Group raised the profile of injured nurses through different media outlets and, following their report, the Australian Nursing Federation (Vic Branch) adopted a No Lifting Policy in March 1998. This policy is based on the model developed by the Royal College of Nursing (UK).

### Implementation of Programs

Since the Project commenced in 1998, three rounds of funding have been allocated on a submission basis to 111 public health care facilities to implement a nurses back injury prevention program within their health care facility. A total of \$6.2 million has been committed to the Project to date. 51 health care facilities were funded in Round 1 of the Project, 28 in Round 2 and a further 32 facilities in Round 3. A secondary component of Round 3 included the provision of additional funding to 72 health care facilities funded in Round 1 and 2 to rollout their nurses' back injury prevention program within their facility.

Public health care facilities have been required to demonstrate a commitment to ensuring:

- Their nurses' back injury prevention program is supported by a designated program coordinator and that adequate time and resources are allocated to the position.
- Comprehensive training and refresher training for nurses is formalised and incorporates a structured and regular process for assessing staff competency regarding back injury prevention practices.
- A comprehensive assessment of the handling needs of each patient or resident, which considers the physical and cognitive abilities of the patient or resident, forms part of routine practice and incorporates a review process.
- Regular equipment audits involving nursing and OH&S representatives are a structured part of the program.
- Clinical nurses are adequately represented on the Committee overseeing the ongoing implementation of the program.
- Processes for monitoring the ongoing effectiveness and sustainability of the program are formalised with results fed back to staff.
- The program, including the policy to support the nurses' back injury prevention program, is regularly reviewed and updated to reflect current best practice principles.

## Evaluation of Programs

**A** condition of the government funding provided to health care facilities was that they take part in ongoing monitoring and evaluation of the effectiveness of the programs they have implemented. Health care facilities have been required to collect information regarding injury and WorkCover claims data. Questionnaires targeting nursing staff and program coordinators at each funded facility have also formed a key aspect of the evaluation process to assess changes in practice and organisational culture.

Results from the analysis of data from health care facilities funded in the Round 1 of the Project are being finalised. A summary of the findings to date is detailed below. An evaluation of the impact of programs implemented as part of Rounds 2 and 3 of the Project is also currently underway.

### Preliminary Findings

La Trobe University and Health Arena have completed an analysis of data supplied by 36 of the 51 facilities funded in Round 1 of the Project. The data was collected 12 months after funding was allocated.

### Nursing Staff Questionnaires

A total of 807 nurses across 36 health care facilities completed a questionnaire to ascertain changes in practice regarding patient handling and knowledge of no lifting principles since program implementation. The responses provided by nurses indicate a change in culture regarding the handling of patients.

- 88% of nurses indicated they typically choose to use lifting devices and aids to move or transfer patients.
- 72% of nurses indicated they are using equipment more since their program was implemented.
- The majority of nurses also reported improvements in accessing equipment, although improvements in the storage of equipment were not universal.
- 88% of nurses indicated their facility had adopted a 'No Lifting' policy.
- 76% of nurses indicated they are represented on consultative structures established to oversee the implementation and maintenance of their program.
- 70% of nurses indicated procedures for hazard identification, risk assessment and risk control have been maintained throughout the implementation of their program.
- 64% of nurses indicated a comprehensive patient/resident assessment tool has been established and maintained.
- 75% of nurses indicated their program encourages early reporting of incidents and injuries.
- 77% of nurses felt that their program would result in long-term cultural change.



#### Evaluation team

Left: Dr Jennifer Keating, Senior Lecturer, Faculty of Health Sciences, La Trobe University,  
Right: Melissa Mitchell, Senior Consultant, Health Arena

### Injury Data

Program co-ordinators at each of the health care facilities were asked to provide data on the number of sprains, strains or musculoskeletal injuries sustained by nursing staff two years before, one year before and one year after the nurses' back injury prevention program was implemented within their facility. Preliminary findings from Round 1 facilities appear to indicate reductions in the number of injuries sustained by nurses when involved in patient handling activities. Further data is required to substantiate these findings. This data is being collected from facilities implementing nurses' back injury prevention programs as part of Round 2 and 3 of the Project.

## Ongoing Evaluation

La Trobe University and Health Arena are also conducting an evaluation of health care facilities funded in Round 2 of the Project along with those facilities that received their initial funding allocation as part of Round 3. Questionnaires for nursing staff and program coordinators will be distributed to capture the impact of back injury prevention programs 12 months after their implementation. With input from the VNBIPP Committee, La Trobe University and Health Arena have modified the questionnaires initially distributed to Round 1 facilities to streamline the data collected and facilitate the development of a database to support longitudinal evaluations of the effectiveness of the nurses' back injury prevention programs. Interim results pertaining to facilities funded as part of Round 2 of the Project are due early 2002.

## Terms of Reference

The terms of reference of the VNBIPP Committee are:

1. To develop a framework for the implementation of nurses' back injury prevention programs based on no lifting principles in public health care facilities.
2. To examine the findings of the local and statewide longitudinal evaluations of the nurses' back injury prevention programs.
3. Based on these findings, to develop a framework for rollout of back injury prevention programs throughout public health care facilities.
4. To provide advice on how best to sustain and further develop the initiatives relating to the prevention of back injuries amongst nurses.
5. The term of appointment for members of the Committee is 18 months subject to ongoing review.
6. The Committee should co-opt individuals with specific expertise at any given time as the need arises.

### Membership of the VNBIPP Committee

Injured Nurses Support Group	Health Service Occupational Health and Safety Consultant
Australian Nurses Federation (Vic)	Health Service Chief Executive Officer/General Manager
Royal College of Nursing, Australia	Hospital Director of Nursing
Victorian Healthcare Association	Employed Division 2 Clinical Nurse
Victorian Workcover Authority	Employed Division 1 Clinical Nurse
Australian College of Nurse Management	Department of Human Services

## Feedback

Please direct comments or feedback on the Victorian Nurses Back Injury Prevention Project to:

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