



SAFE PATIENT SOLUTIONS FOR BARIATRIC PATIENTS

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The prevalence of nursing home resident obesity has more than doubled in the past 20 years, contributing significantly to the staff injuries. From 2000 through 2018, U.S. obesity increased from 30.5% to 42.4% with severe obesity increasing from 4.7% to 9.2%. The cost of back injuries in the American health care industry exceeds \$7 billion dollars annually. This figure represents an estimated 5%–15% of the total cost of back injuries across all occupations.

Heavy manual patient handling remains a key risk factor for work-related musculoskeletal disorders of the back, neck, and upper extremities. More than half of nursing assistant injuries are due to overexertion. Recurring injuries associated with repeated lifting can result in scarring and cumulative damage. Risk factors for injury include 1) force required; 2) repetition and frequency, and 3) awkward postures that place stress on the body.

With the implementation of proper educational materials, training sessions, and improved job mechanics, many back injuries are preventable.

CONSIDER THE HIGH-RISK ACTIVITIES THAT CAN LEAD TO INJURY OF BOTH THE PATIENT AND THE HEALTHCARE WORK WHICH INCLUDE:

- Lifting a leg
- Reaching outside of safe parameters
- Manually transferring patients in general, but especially cognitively impaired patients
- Supporting the patient to stand upright
- Repositioning a patient in a bed or a chair

- Changing an incontinence product
- Giving a bed bath or dressing/undressing a patient
- Applying anti-embolism stockings

IMPORTANT FACTORS THAT AFFECT PATIENT AND CAREGIVER SAFETY

- Level of cooperation and ability to assist
- Comorbidities such as respiratory compromise
- Ability to assist in making body parts accessible or to bear weight
- Overall strength
- Availability of proper equipment needed to handle for a bariatric patient

WHEN CONSIDERING DEVELOPING A PROGRAM THAT OFFERS THE SOLUTIONS FOR SAFE PATIENT HANDLING OF A BARIATRIC OR OBESE POPULATION, THERE ARE KEY ASPECTS TO CONSIDER

1. Be proactive

- Identify a process-oriented approach to caring for obese/bariatric patients.
 - What are your patient's needs door-to-door?
 - Identify a plan or process to address situations unique to your individual health care setting
 - Assess the type of equipment available/needed for the task

2. Establish protocols

Protocols and algorithms (Safe Patient Handling & Mobility Algorithms) can assist when determining the number of people and type of equipment to safely handle or move a patient.

- Three areas of equal importance:
 - Safe for the personnel
 - Safe for the patient
 - Encourages patient participation and independence

3. Develop a safe lifting policy for obese patients

- Concept of a "minimal lift" policy
- Establish a plan for the patient handling activity
- Seek input from the patient/family on successful strategies to minimize the number of actions/transfers required to accomplish the task
- Consider privacy and comfort issues
- Identify a task leader
- Review the sequence of the task with all assistive personnel

4. Insist on a multidisciplinary teamwork approach and effective communication

- Establish a Bariatric Task Force
 - Identify high risk tasks
- Leader should direct the patient handling activity
- Team/task force should regularly debrief
 - Identify any modifications needed to improve the procedure
 - Obtain feedback from patient
 - Revise the patient's plan of care as needed

5. Adopt an effective staff education program

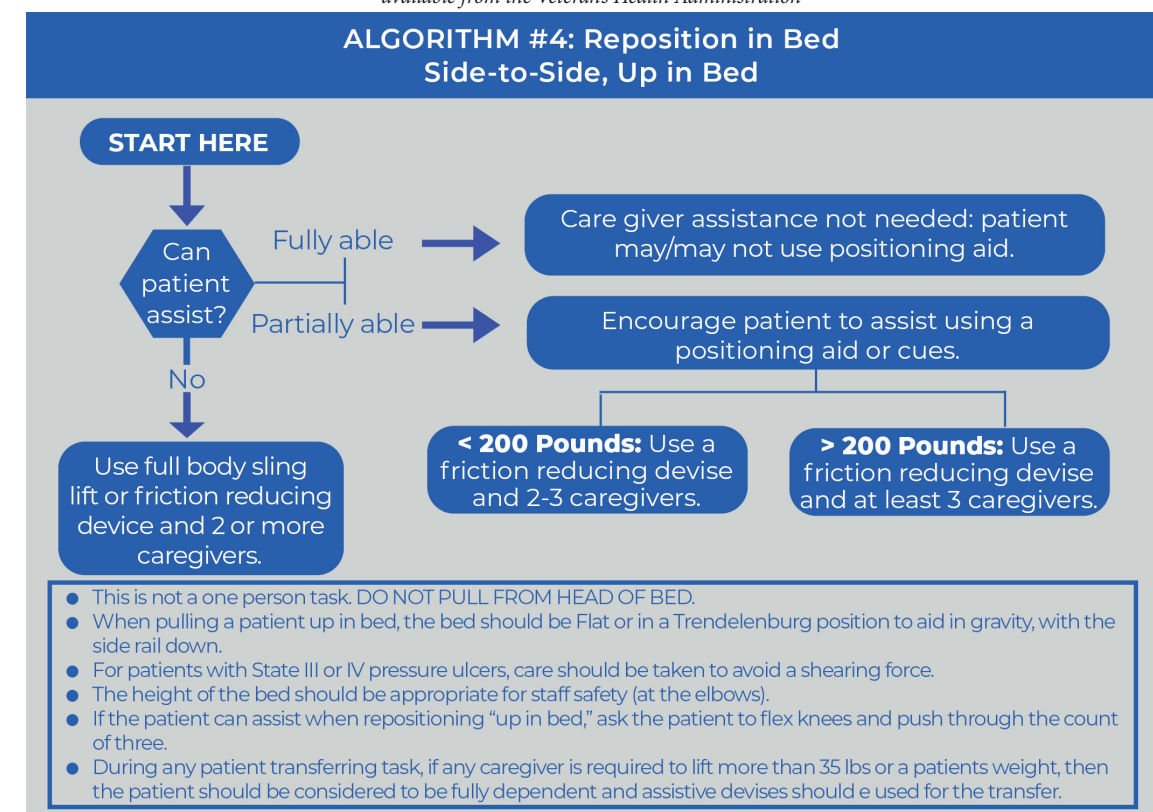
- Body mechanics and Equipment training
 - Staff/Caregivers need to know:
 - Weight capacity of standard items such as commodes, beds, scales, and recliner chairs
 - How to use the equipment with bariatric patients.
- Sensitivity Training
 - Demonstrate respect and sensitivity to the patient

In summary, it is essential that a facility have their staff aligned with each bariatric patients' specific needs. Which patients may require additional attention as described in the strategies discussed. Be open to designing specific facility programs and safety modules for both the patient and caregivers. With the implementation of a strategic plan on the necessary protocols and procedures for patient handling techniques there can be a significant reduction in musculoskeletal injuries for both patients, caregivers, and personnel.

SOURCES:

- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7278261/pdf/nihms-1591648.pdf>
- <https://www.cdc.gov/obesity/data/adult.html>

Sample of a patient algorithm from the seven algorithms available from the Veteran's Health Administration



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