

Heemstra, Sarah

From: Heemstra, Sarah
Sent: Tuesday, February 19, 2019 1:37 PM
To: Heemstra, Sarah
Subject: Infection Prevention Champions Program: Ergonomics

Infection Prevention Champions Program



SGNA
Society of Gastroenterology Nurses and Associates, Inc.

Dear Champion,

This next letter will focus on ergonomics. Ergonomics is fitting the conditions and demands of the job with what the worker can do safely without harm to self or others. Ergonomics plays a big role in everything we do at work and how we function or do not function properly. Why is ergonomics important? When the demand on our body is greater than what we are capable of doing, an injury can occur. Injuries can also result from the physical environment of the work place. Nursing has been reported to have one of the highest work related incidences of musculoskeletal injuries (currently ranked 5th according to the ANA, 2013). These injuries to the back, shoulder and other joints can reduce one's ability to work and can increase healthcare cost for the worker. In addition to workers' compensation costs, musculoskeletal injuries lead to less direct costs such as loss of nurses from the workforce, early retirement, preventable disability, and nurse turnover (Hodgson, Matz, & Nelson, 2013). In 2010, the American Nurses Association (ANA) reported that in one year alone there was an estimated three months of work lost per 10,000 hospital employees due to back injuries. Imagine how costly and disruptive this can be to the work place.

There are multiple activities within endoscopy related to repetitive strain that can injure the body. Injuries can occur when maintaining awkward postures in procedures (such as when applying abdominal pressure), and when lifting patients or standing over a sink cleaning scopes for extended periods of time. Repetitive hand motion, used in ERCP and brushing scopes, can lead to wrist strain or injury over time. Any procedure requiring the use of lead for fluoroscopy can increase risk of injury due to the weight of the lead, especially during complicated or long procedures.

What can be done to lessen one's risk of injury? The ANA's Safe Patient Handling and Mobility Standards (SPHMS) provide a model for designing, supporting and maintaining an ergonomically safe environment (ANA, 2013). A brief description of each standard follows. Refer to the position statement for more comprehensive information.

1. Establish a culture of safety that includes collective and sustained commitment from administration, employees, and ancillary serves.
2. Implement and sustain a safe patient handling and mobility program by using key strategies.
3. Incorporate ergonomic design principles to provide a safe environment of care.

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4. Select, install, and maintain safe patient handling and mobility technology that meets ergonomics standards (e.g., safety lift belts, mechanical lifts, monitors at appropriate levels, two piece lead aprons, adjustable beds).
5. Establish a system for education, training, and maintenance.
6. Integrate patient centered safe patient handling and mobility assessment, plan of care, and use of technology.
7. Include SPHMS in reasonable accommodation and post injury return to work.
8. Establish a comprehensive evaluation system.

An ergonomic risk assessment of the unit can be performed by occupational medicine department. They can provide practical solutions for reducing injuries based on your physical environment and work load. Simple things like adjusting the height of the computer screens and raising the stretchers to a good working height can help make your place of employment more ergonomically friendly. Look around and see what changes can be made to protect yourself and your peers from musculoskeletal and other injuries.

Requirements should either be emailed to Champions@sgna.org or faxed to 312-673-6694 as due. The the upcoming assignments are as follows:

1. Review the SGNA position statement [Ergonomics in the Gastroenterology Setting](#).
2. Continue to develop and implement infection prevention education for your peers (total of 120 minutes).
3. Seek opportunities to educate yourself on infection prevention topics (total 180 minutes).

These bi-monthly letters will be [archived](#) for you to access as needed. As always, SGNA is available for any questions or difficulties you may have.

Sincerely,
The SGNA Infection Prevention Work Group

References:

American Nurses Association (2010). Handle with Care Fact Sheet. Retrieved February23, 2010 From <http://www.nursingworld.org/MainMenuCategories/ANAMarketplace/Factsheets-and-Toolkits/FactSheet.html>

American Nurses Associates (ANA). (2013). *Safe patient handling and mobility: interprofessional national standards*. Silver Spring, MD: American Nurses Associates

Hodgson, M.J., Matz, M.W., & Nelson, A. (2013). Patient handling in the Veteran's health administration: facilitating change in the health care industry. *Journal of Occupational and Environmental Medicine*, 55(10), 1230-7.

Shergill, A. K., McQuaid, K. R., & Rempel, D. (2009). Ergonomics and GI endoscopy. *Gastrointestinal Endoscopy*, 70(1), 145-153.

Society of Gastroenterology Nurses and Associates (SGNA). (2014). *Ergonomics in the gastroenterology setting* [Position Statement]: Chicago. Author.

Recommended Reading:

<http://ananursece.healthstream.com/Pages/Product.aspx?ID=8c29ae61-b3ce-e211-ae19-001517135351&DisplayName=Navigating%20the%20New%20Safe%20Patient%20Handling%20and%20Mobility%20Interprofessional%20National%20Standards>

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