

Advocating for Safe Facility Design

- Goal: Reduce Risk for Employee Injury and Overuse Conditions
- No one will disagree
- Target Chief Fiscal Officer with Injury Claims and staff replacement cost data.
 - Patient Handling
 - Equipment and Patient Transport

Safety Committee

- Meets regularly and has strong leverage
- Attend every meeting, be vocal.
- Form Employee Injury Prevention Sub-Committee with key people

Collect baseline data

Recommend action and get it in the budget

Collect outcomes data

Carpet Issues

- Carpet doubles the rolling resistance of wheeled equipment which increases physical demands and musculoskeletal injury risk for employees.
- Architects prefer carpet for appearance and noise control.
- Replacing existing carpet with vinyl is very expensive and difficult to get approved.
- Impact new construction, prevention works best



Gathering Evidence

Stretcher Type	Surface	Push Force	Initial Force	Sustain- ed Force
Standard Stretcher	Lin- oleum	Un- loaded	12.5 lbs	5 lbs
		Loaded >300 lbs	20	10
	Carpet	Un- Loaded	26.75	7.5
		Loaded >300 lbs	57.5	17.5

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- Organizational Support for abolishing carpet
- 1. Infection Control
- 2. Imaging: Ultra-Sound, Vascular, Radiology
- 3. Nursing
- 4. Transport
- 5. Environmental Services





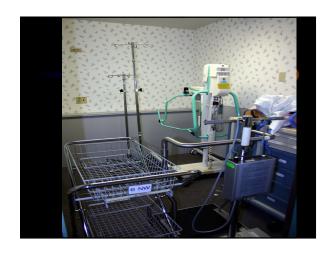
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- External Support
- 1. Workers Comp Insurers
- 2. Oregon Coalition for Healthcare Ergonomics
- 3. Nursing Associations
- 4. Risk Management Organizations
- 5. Design Associations



Patient Handling

- Greatest Risk to Employees
- 27% of all Workers Comp Claims
- Patient Repositioning is highest risk due to frequency of every 2 hours of every day
- Lift Equipment and Training are essential





- Injury Data
- Employee Injury Prevention Sub Committee
- Recruit Nursing Support
- Convince CFO
- Build Into the Budget and Defend It
- Training & Funding for it is essential





