



Your Back is not a Hinge

# Behaviour V's Client Management

## Two sides to every story

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# *MSD Injuries plateau*

☒ *Implemented mechanical manual handling aids,*

☒ *Risk management programs*

☒ *Training programs*

☒ *Competency reviews*

☒ *Behaviour modification*

☒ *Life style changes*

☐ *Individual mindset ?*

*To identify solutions we need to explore not only current climates but the evolution of the health industry to current day.*



*Understanding the reasons for specific behaviour can assist in understanding the most likely solutions for change?*

# *Breaking Barriers Defining Moment*

- 1. Establishing a reporting culture*
- 2. Finding a definite correlation between occupational violence and manual handling injuries*

# *Journey's start Year 2000*

GROUP		HEALTH (PUBLIC SECTOR)		
ORGANISATION:		DEPARTMENT OF HUMAN SERVICES, PUBLIC HOSPITALS AND OTHER PUBLIC SECTOR HEALTH ORGANISATIONS		
<b>CODE</b>	<b>TYPE</b>	<b>2000/01</b>	<b>2001/02</b>	<b>2002/03</b>
24	ACCIDENTALLY HIT	23	24	36
29	ASSAULTED	80	101	84
81	EXP. TO TRAUMATIC EVENT	18	148	28
82	EXP. TO WORKPLACE VIOLENCE	8	8	8
83	HARASSMENT	34	41	60
86	OTHER	38	41	57
	<b>TOTAL</b>	<b>201</b>	<b>363</b>	<b>273</b>

# BAD BEHAVIOUR breeds bad behaviour?



## Definition – Occupational violence

- Is the attempted or actual exercise by a person of any force so as to cause injury to a worker, including any threatening statement or behavior which gives a worker reasonable cause to believe he or she is at risk. (*NOHSC, 1999a;1*)
- “Any incident in which employees are abused, threatened or assaulted in circumstances arising out of, or in the course of their employment. (*ANF 2003*)

# High risk areas:

- **Emergency Departments**
- **Remote/rural**
- **Community nursing**
- **Mental Health/Psych services**
- **Aged Care**
- **Midwifery/maternity wards**



# Contributing factors

- Clients exacerbated by competing for attention
- Prolonged and untreated pain,
- Anxiety;
- Misconceptions where language translations or cultural traditions vary;
- Inadequate design of the environment;
- Unwelcome & coercive treatments;
- Specific events = too much ward activity at one time;
- Overcrowding; People and product
- Negative attitudes staff, Patients, Residents, Relatives, Family, Friends.
- Loss of freedom
- No smoking rules ..... the list goes on!

# Incident analysis

Do we record the number of client:

- ✓ Resistive episodes
- ✓ Non compliance
- ✓ Sudden assaults, biting, scratching, hitting?
- ☒ Perhaps only when associated with injury?

**Do we?**

- Investigate causative factors – “Triggers”

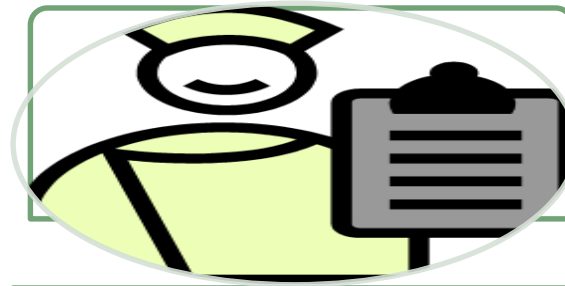
**Do we really**

- Safety 1 = Mitigate Risk!
- Safety II = Seize an opportunity

*There is always 2 sides to every story!*



Client

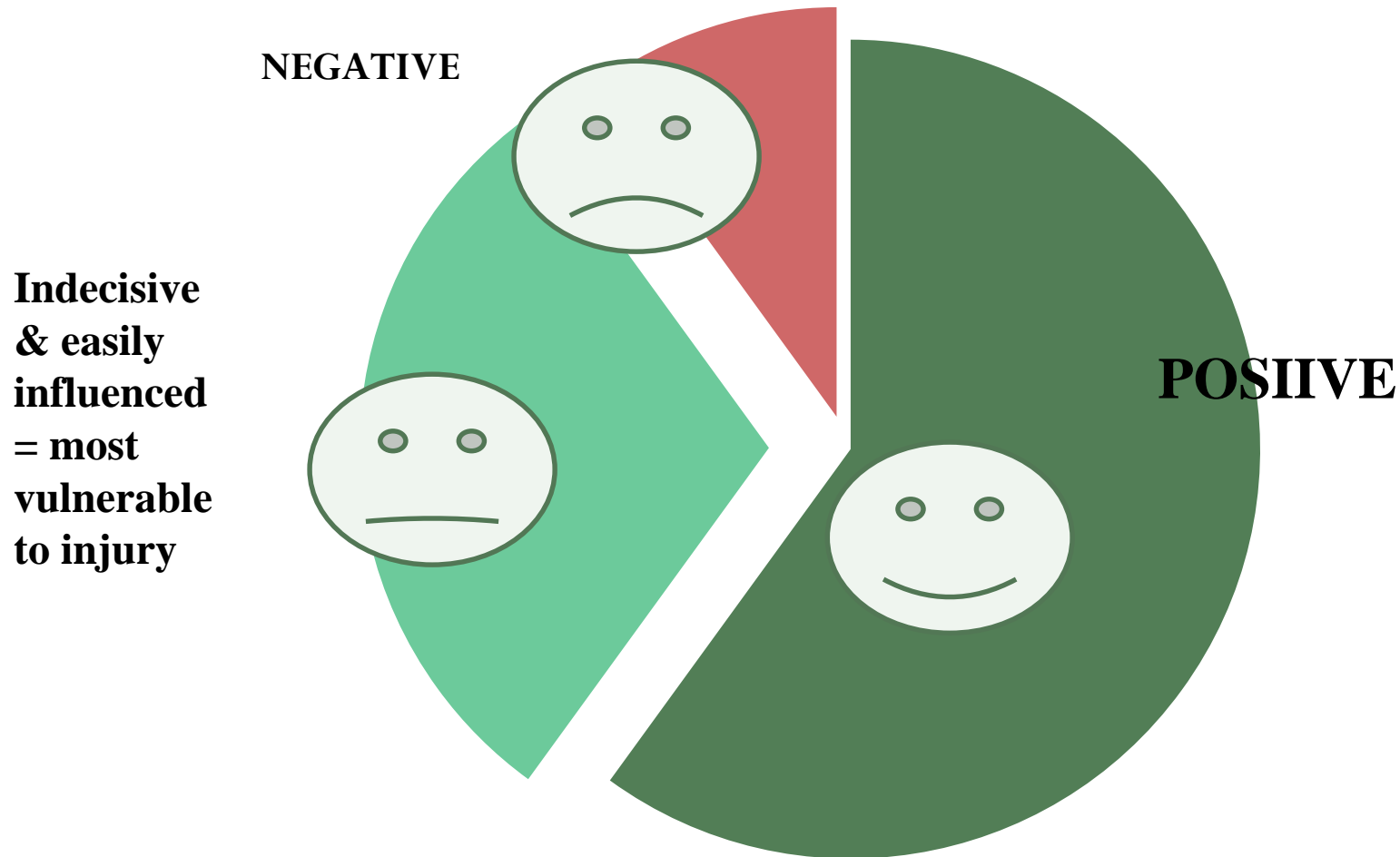


Care worker

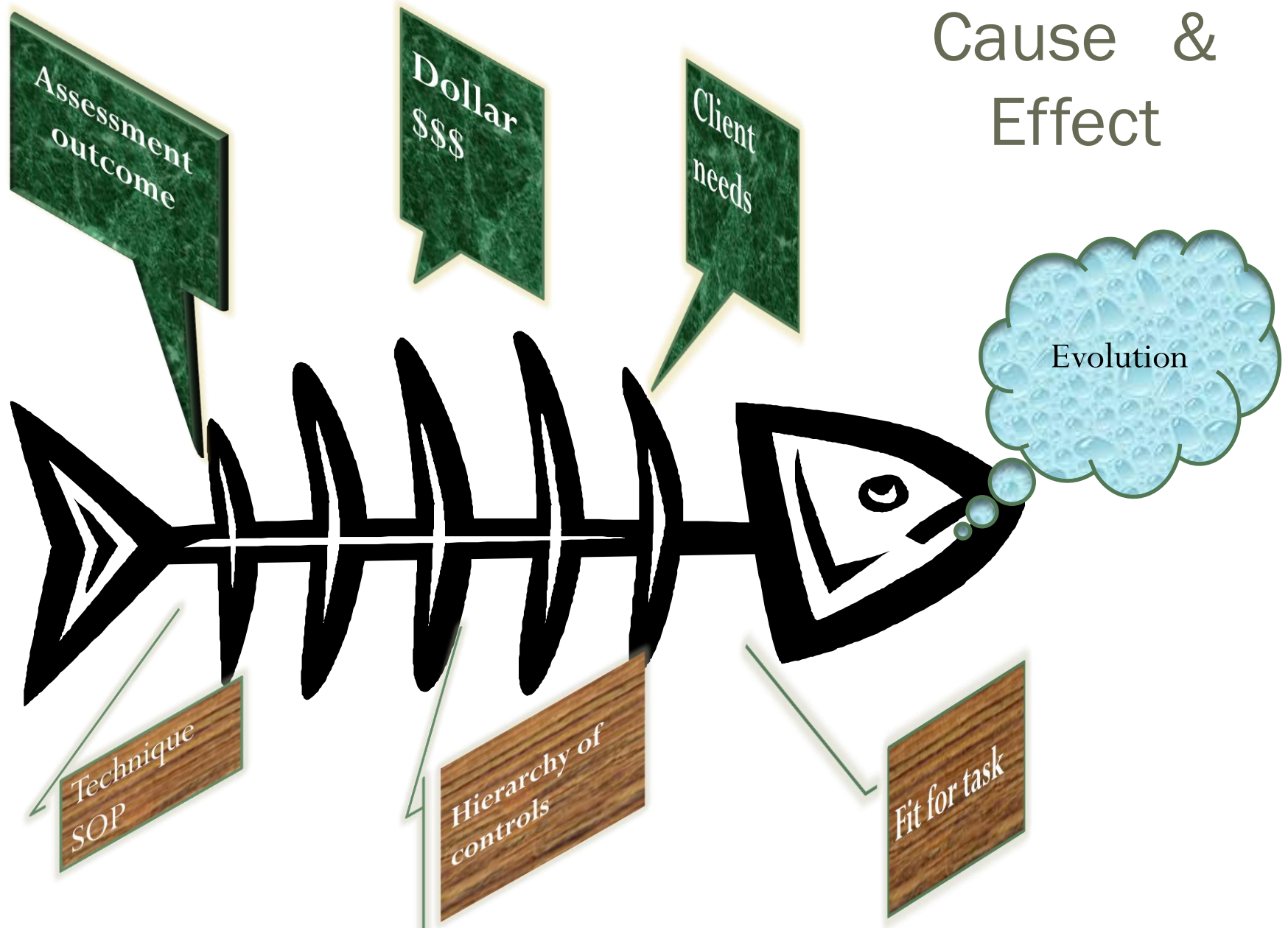


Winner ?

# *Understanding your culture*



# Cause & Effect



# *Simple Case study Hunting's chorea*



*Non touch*



*Spasm*

# Case Study: “HARRY”

- *ABI = 8 years (43yr old Male)*
- *Weight > 190lbs    Height > 6ft 3in*
- *Good speech skills occasional slurring of words when fatigued + Muscle spasm — Complains of pain on specific movements Left side turning in bed only.*
- *Questionable weight beared at times — generally strong upper body strength to raise him to a standing position with assistance.*
- *lower limb spasticity: painful to touch*
- *Wheelchair orientated - permanent*

# STOP Work Call for cessation of service: Based on his history

- ✓ *Confused and Agitated after day out*
- ✓ *Intrusive behavior*
- ✓ *Inappropriate language*
- ✓ *Episodes of physical aggression towards other residents and staff*
- ✓ *Increased resistance to touch*
- ✓ *Refusal to assist*
- ✓ *Non compliant*



# Issues For Workplace

- *Inconsistent information from staff,*
- *Rift between day & night staff*
- *Sense of powerlessness at grassroots*
- *Doctor belief that admission to a specialist facility unnecessary*
- *Behavior promoted as being a staff problem*
- *Disillusion with Management, in particular Unit Manager*
- *Change of attitude towards resident and family – less supportive, resentful*
- ◎ ***Poor practices reinforced by stakeholder complaints***

# *Perceived Risks*

- *High incident of sick leave*
- *High agency usage*
- *Upset relatives*
- *Breaches of policies & procedures*
- *Casual staff refusing shifts*
- *Rumors circulating within student placement circles*

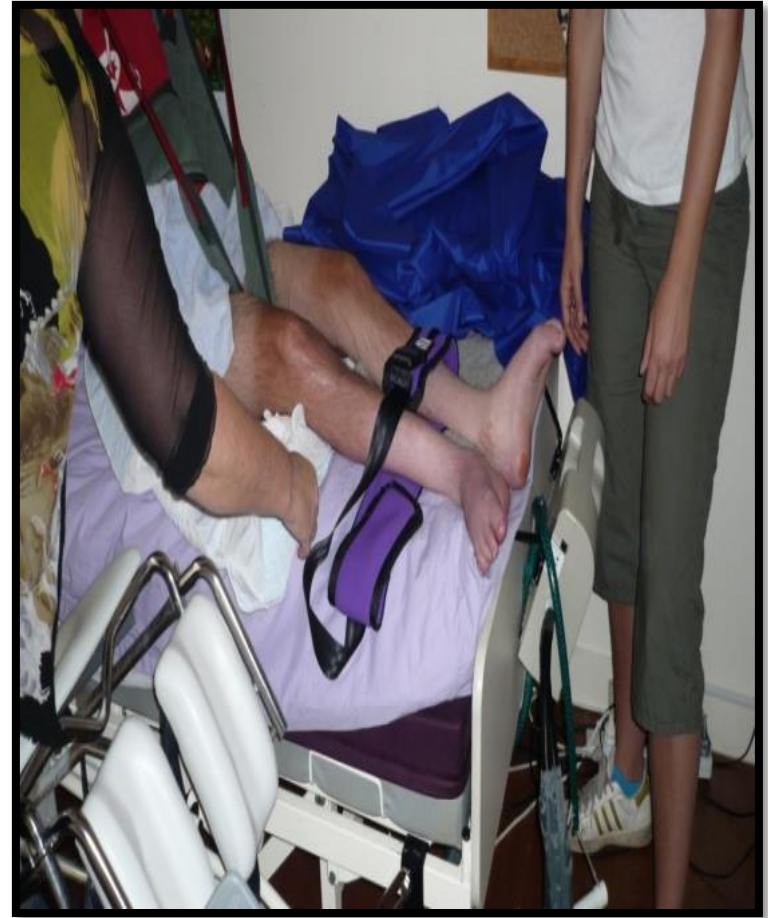
# Behavioural risk adaptability



# Handling methods = change

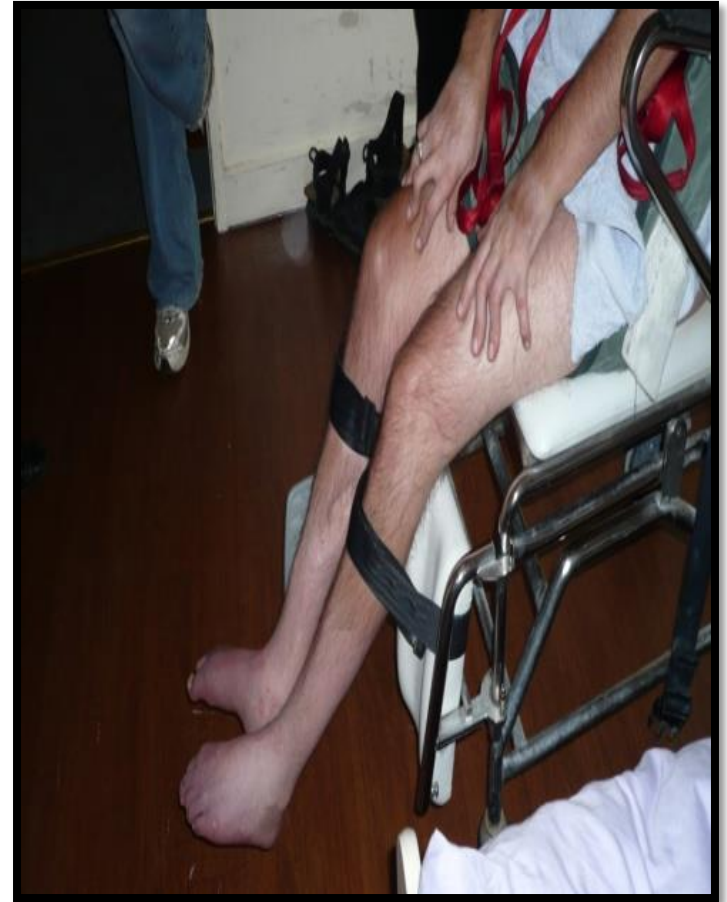


# *Transfer change*

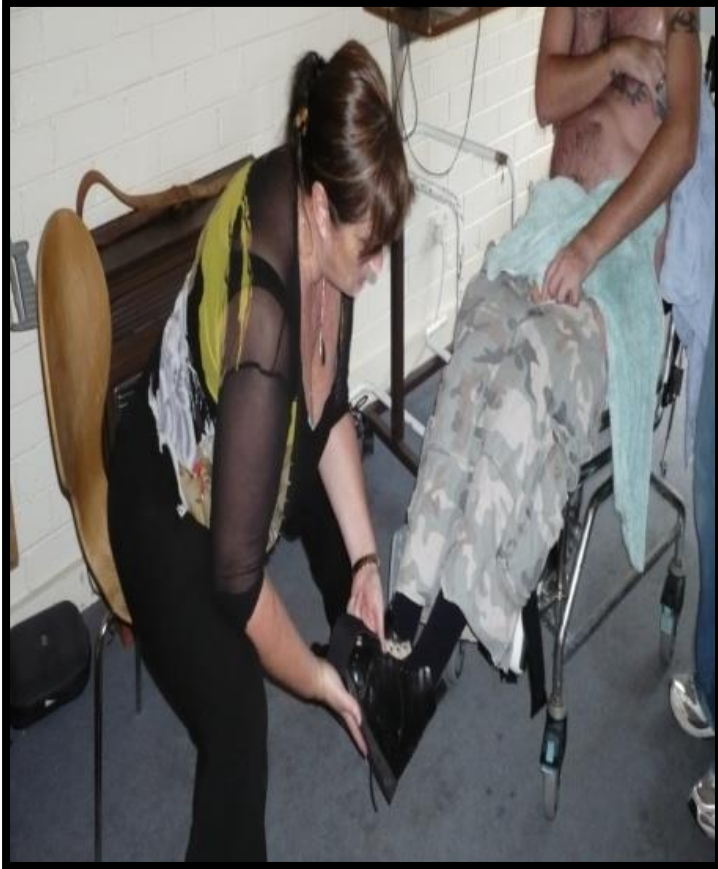




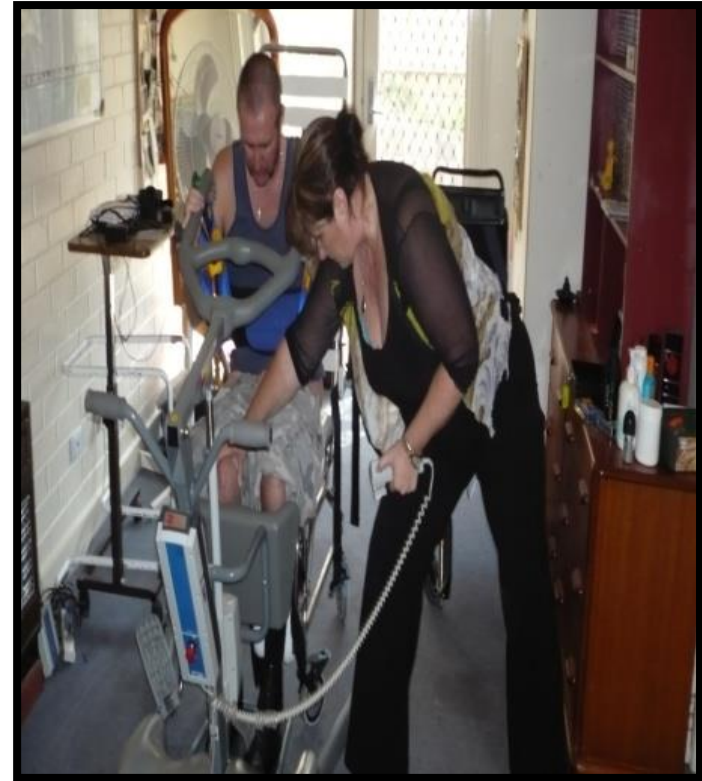
# *Method change*



# *Postural compliance*



# *Equipment & Design reviews*





*Limit assistance*



*Time!*



# Risk Management

## *Immediate*

- *Position of his bed*
- *Use slide sheet – self assist with upper body*
- *Tilt back shower chair*
- *Slide transfer legs*
- *Allow time for leg drop naturally*
- *Do not rush*

*What can we do today when the money box is empty*

## *Prepare for:*

- *Mentor assistance training*
- *XY (H) ceiling hoist*
- *Tilt back wheelchair*
- *Clothing change*
- *Bed change*
- *Room redesign*

*What can we do tomorrow when the money is found.*

# Change Response

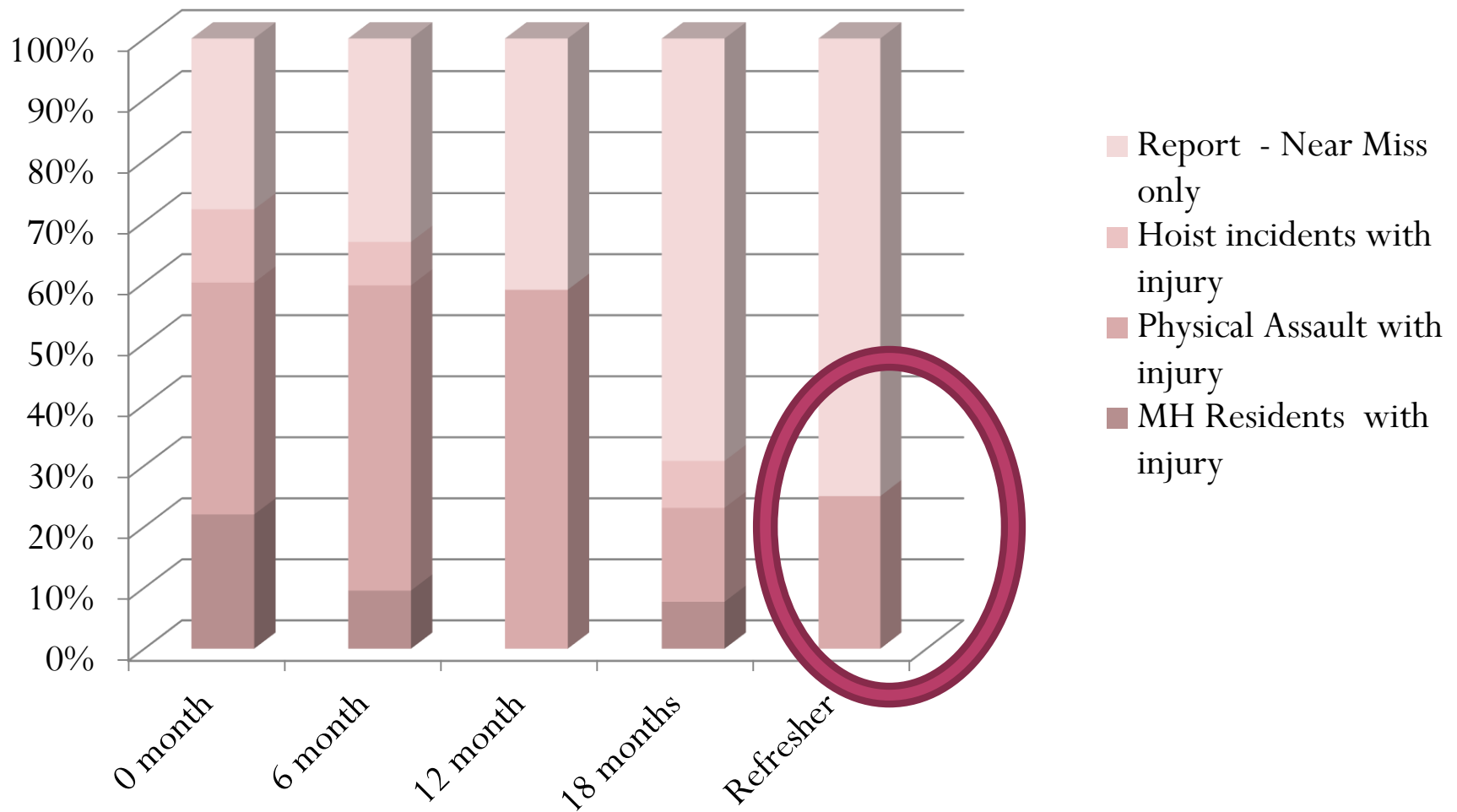
- *Acknowledgement of the problem*
- *Charting of behaviour*
- *Family meetings*
- *Problem solving approach*
- *Staff education*
- *Performance management*
- *Team building / staff debriefing*

*Risk management adaptability*  
*= Evolution*

*Motto:*

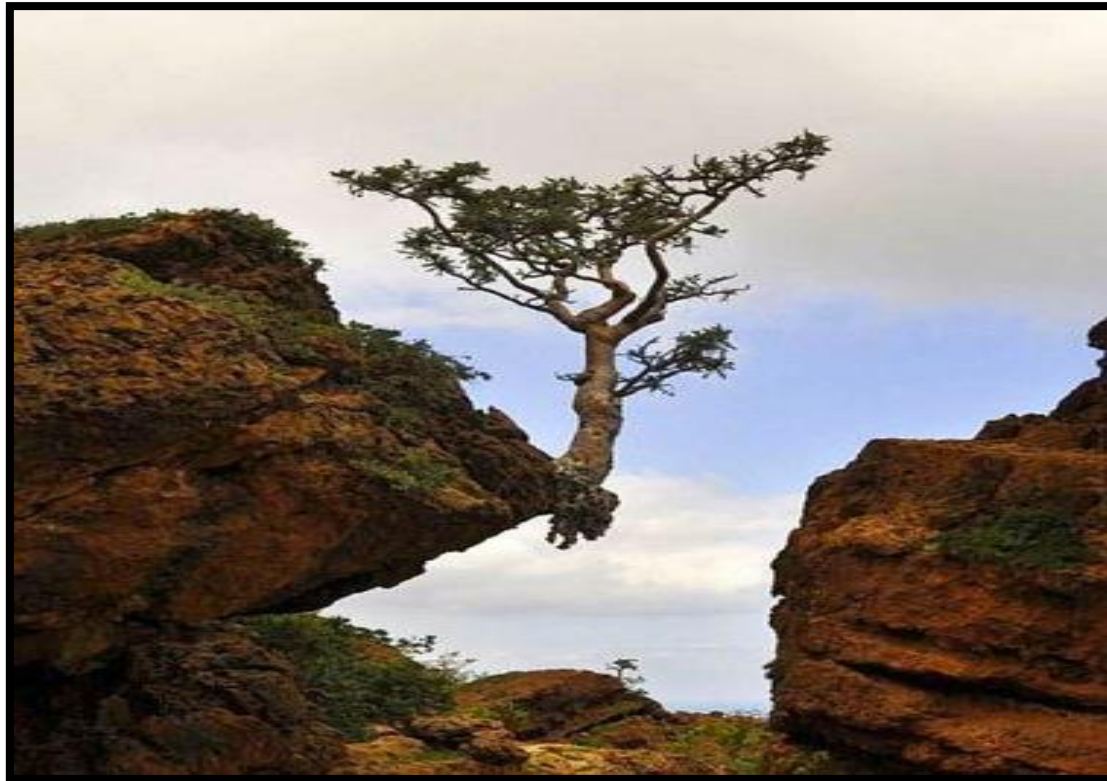
*Approach with confidence but expect the  
unexpected nothing is certain.*

# National large AC Employer (2000 EFT)



# *Changing behavior*

## *What does it take?*





# We have come a long way



***ARE  
WE  
THERE  
YET?***



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# References

- [2] Hignett S, Crumpton E. Competency-based training for manual handling. *Applied Ergonomics*. 2007; 38: 7-17.
- [3] Wright, P. 2003 – 2006, National Benchmarking studies – Back attack – Research papers – Preventative Injury Planning Strategies P/L: Files 2003 – 2008 - 2012.
- [4] The Chochrane Collaboration: Verbeek JH, Martimo KP, Karppinen J, Kuijer PPFM, Vikari-Juntura E, Takala EP Manual (2011) Material Handling and assistive devices for preventing and treating back pain in workers Cochrane Library 2011 Issue 6.
- [5] Kari-Pekka Martimo, Jos Verbeek, Jaro Karppinen, Andrea D Furlan, Esa-Pekka Takala, P Paul F M Kuijer, Merja Jauhiainen, Eira Viikari-Juntura. (2008) Effect of training and lifting equipment for preventing back pain in lifting and handling: systematic review. *BMJ*, Vol 23, 336, 429-431.

# Questions?



LUNCH