

Safe Patient Handling and Mobility Toolkit – Tool 2h

Sample: ABC Hospital Safe Patient Handling and Mobility (SPHM) Committee & Project Charter

Purpose Statement

The SPHM Committee is accountable for supporting the development and implementation of a safe patient handling and mobility program at ABC Hospital.

Mission

The Safe Patient Handling and Mobility (SPHM) Committee is dedicated to establishing and sustaining the infrastructure necessary to shift the organizational culture from manual patient handling to a minimal lift culture that is founded on SPHM principles. This includes the use of powered mechanical lifts, non-powered assistive devices, and evidence-based practices to facilitate safe lifting and early mobility of patients, with the primary goal of minimizing injuries to both patients and staff.

Vision

'Create a Culture of Safe Patient Handling & Mobilization while Enhancing Health Care Provider & Patient Safety'

Guiding Principles:

- Transparency and clear communication
- Evidence based practice
- Establishing and maintaining a Healthy Work Environment
- Patient/Family centered Care
- Assurance of quality
- Interdepartmental collaboration
- Interprofessionalism
- Accessibility
- Culture of inquiry and innovation

Goals:

- Reduce the incidence, severity, and costs of work-related injuries to nurses and other staff associated with patient handling and mobilization
- Improve quality of care and patient safety through safe early and progressive patient mobilization
- Enhance professional practice by promoting the health and wellbeing of staff

Scope

The program will be launched in the following unit(s) or department(s), which will serve as pilots:

Following completion of the pilot program(s), the program will systematically be implemented on all units/departments/locations where patient handling activities are conducted within the hospital and outpatient clinics.

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Functions:

- Identify, consult, and engage key stakeholders during the development, implementation, evaluation, and management phases of the SPHM program to facilitate the culture change that is required for program effectiveness and sustainability
- Develop a draft SPHM program plan that includes short and long term strategic and tactical elements
- Identify immediate and future goals and objectives for the SPHM program
- Assess current SPHM policies and procedures, job tasks and work processes, and physical work environment, to identify and prioritize areas for improvement
- Identify solutions (SPHM technology and best work practices) to prevent patient handling-related injuries
- Assess organizational readiness for the SPHM program and associated changes
- Identify and assist to address barriers and facilitators to program implementation and maintenance
- Establish timelines and deliverables
- Develop SPHM policy
- Assist the SPHM program champion and the program coordinator to:
 - Solicit appropriate allocation of resources (time, staff, and finance)
 - Develop and implement a communication plan
 - Select and implement SPHM technology (with caregivers and other stakeholders)
 - Develop and implement SPHM policy and processes to support the program
 - Develop competency based SPHM education and training program and informational resources for staff
 - Recruit and provide guidance, and support of unit-based SPHM champions or coaches
 - Conduct root cause investigation of patient-handling related injuries and incidents and action to prevent future incidents
 - Conduct ongoing systematic program evaluation including review of injury trends and costs and other metrics
 - Communication of program outcome and process measures to leadership, management, and employees
 - Sustain and modify the program as needed
 - To ensure that SPHM is incorporated in physical building modifications and major construction projects
 - Stay informed about best practice in Safe Patient Handling for new processes and technology

Reports to: Employee Safety Committee

Executive Sponsor/Champion: Chief Nursing Officer

Chair: SPHM Program Coordinator (*add Co-chair as needed*)

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Membership:

- Clinical Education
- Diagnostic Imaging
- Employee Health
- Environmental Services
- Ergonomics Specialist
- Environment of Care
- Facilities Maintenance/Clinical Technology
- Facility Designers
- Hospitalist (pilot units)
- Human Resources
- Information Technology
- Infection Control
- Inpatient Nurse Manager/s (pilot units)
- In-Patient Rehabilitation
- Labor Organization representative
- Nursing Director, Practice and Outcomes
- Perioperative Services
- Procurement/Materials Management
- Quality Management
- Safety & Environmental Health Manager
- Staff Nurses and CNAs (pilot units)
- Transportation
- Wound Care

Identify if any of the above are Ad-Hoc members

Meeting Frequency:

During program planning - Every other week on Thursday 12:00-1:30 PM. Then Monthly and as needed

Communication:

- Items to be presented/forwarded to the Employee Safety Committee will be identified at the end of each meeting
- Minutes recorded by a designee, to be available on SharePoint prior to the next meeting
- Minutes to be forwarded to the Employee Safety Committee; EOC Committee; and Leadership Council (as appropriate)

Review Period:

Annually - all program elements annually. Outcome measures - Quarterly

Submitted by:	
Effective date:	
Reviewed by:	
Approved by:	