Short Commentary

Patient Mobility and Nurse Injuries: A Comprehensive Commentary

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Introduction

The increasing recognition of the impact of nurse injuries on both individual healthcare professionals and the broader healthcare system has prompted a surge in research efforts to understand and mitigate these occupational health challenges. Among the emerging areas of investigation, patient factors contributing to nurse injuries have gained prominence. This mini review examines recent research focused on the association between patient mobility and nurse injuries, with a particular focus on the study conducted by K H McLaughlin, et al. "Impaired hospitalized patient mobility is associated with nurse injuries" Occupational Medicine, 2023;, kqad135.

Recent Trends in Nurse Injury Research

Contemporary research in occupational health within healthcare settings has witnessed a notable shift towards proactive strategies for preventing nurse injuries. While earlier studies primarily explored the broad spectrum of patient-related risk factors, recent investigations have honed in on specific activities and patient characteristics. Notably, recent literature has emphasized the importance of patient mobility as a potential predictor of nurse injuries during manual support tasks, such as repositioning and transferring.

McLaughlin's Study Overview

The study by McLaughlin et al. addresses the scarcity of literature on patient mobility and nurse injuries, employing a comprehensive approach to link occupational health records with electronic medical records. By utilizing reliable tools such as the Activity Measure for Post-Acute Care (AM-PAC) and the Johns Hopkins Highest Level of Mobility (JH-HLM) Scale, the researchers establish a connection between patient mobility levels and nurse injuries. The study's design involves creating a matched cohort to analyze the influence of patient mobility on the odds of nurse injury, and the findings shed light on the intricate relationship between these variables.

Key Findings

The study identifies a strong association between lower levels of patient mobility, as measured by AM-PAC and JH-HLM scores, and an increased risk of nurse injuries. Notably, the analysis demonstrates the relevance of routine assessments of patient mobility in identifying high-risk scenarios for nurse injuries, particularly during manual support tasks. The findings contribute valuable insights into potential strategies for injury prevention and highlight the significance of considering patient mobility as a crucial factor in healthcare risk assessments.

The Tension Between Falls and Patient Mobility

The tension between patient mobility and preventing falls represents a complex challenge in healthcare. While promoting patient mobility is essential for preventing complications associated with immobility, such as pressure ulcers and muscle atrophy, a culture that aims to achieve zero injury may have unintended consequences. The study sheds light on the delicate balance that healthcare professionals must navigate between encouraging patients' movement for overall health benefits and mitigating the associated risk of injuries, not only to patients but also to the healthcare staff providing assistance. This tension underscores the need for tailored interventions and interdisciplinary collaboration to strike an optimal balance between promoting patient mobility and ensuring safety of patients and staff.

Future Directions

The study on the relationship between patient mobility and nurse injuries holds significant promise for shaping the future landscape of healthcare practices and policies. Several key areas demonstrate the potential impact of this research:

1.   Injury Prevention Strategies: The findings suggest that routine assessments of patient mobility, using tools like the AM-PAC and JH-HLM, could become integral components of injury

prevention strategies. Healthcare institutions may increasingly adopt proactive measures to identify patients at higher risk of causing nurse injuries during mobility-related tasks. This could lead to the systematic integration of safe patient-handling equipment and targeted interventions to mitigate injury risks.

2.   Personalized Patient Care: The study emphasizes the importance of considering patient-specific factors in healthcare risk assessments. In the future, healthcare providers may routinely incorporate mobility assessments into patient care plans, allowing for a more personalized approach. By tailoring care strategies to the mobility levels of individual patients, healthcare teams can enhance safety and minimize the risk of injuries to both patients and healthcare professionals.

3.   Technology Integration: As healthcare continues to embrace technological advancements, the routine assessment of patient mobility will be seamlessly integrated into electronic medical records and daily care routines. Automated systems may assist in capturing and analyzing mobility data, providing real-time insights that aid healthcare professionals in identifying high-risk scenarios promptly.

4.   Interdisciplinary Collaboration: The study's focus on mobility assessments, recorded by both nurses and physical therapists, underscores the potential for interdisciplinary collaboration in injury prevention. Future healthcare practices may encourage collaboration between different healthcare professionals, ensuring a holistic approach to patient care that addresses both mobility-related risks and broader health outcomes.

5.   Extended Applicability: While the study primarily focuses on nursing staff, the findings could have broader implications for various healthcare team members involved in patient transfers and repositioning. The insights gained from this study may prompt further research into the work-related injuries of other healthcare professionals, such as technicians, in-hospital transport teams, and staff at testing or treatment sites.

6.   Policy Development: The study's implications could influence the development of policies related to occupational health and safety in healthcare settings. Healthcare institutions and policymakers should consider incorporating routine mobility assessments into standardized protocols, aiming to create a safer working environment for healthcare professionals.

Conclusion

In conclusion, McLaughlin's study represents a commendable effort in advancing our understanding of the nuanced relationship between patient mobility and nurse injuries. The findings underscore the potential of routine mobility assessments in identifying high-risk patient scenarios and inform strategies for injury prevention among healthcare professionals. As research in this field continues to evolve, McLaughlin's study serves as a pivotal contribution, guiding future inquiries into optimizing patient care practices and ensuring the occupational health and well-being of healthcare professionals.