

# Healthcare workers at higher risk of injury when assisting obese patients

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Western Australian healthcare workers face a growing risk of injury from treating increasing numbers of obese patients, according to Edith Cowan University (ECU) research.

Studies from ECU's School of Nursing and Midwifery reveal WA nurses, orderlies and other patient care professionals are among the most at risk for musculoskeletal injuries and reports of back, wrist, knee and shoulder injuries have increased when handling [obese patients](#).

It's a growing problem, with 42 percent of the Australian population predicted to be obese by 2035.

Lead researcher Kim McClean said staff were put at extra risk due to inadequate recording procedures.

"We found high levels of under-reporting of patient [obesity](#), with only 11 percent of patients coded as obese despite statistics demonstrating likely patient obesity rates of 33 percent," Ms McClean said.

"Without [accurate data](#) we can't ensure hospitals have appropriate equipment, staffing levels or training to reduce risks to nurses and other healthcare staff."

## **Physical and financial strain**

Studies show 46 percent of nursing assistants have reported being hurting themselves while lifting, moving or helping a patient, with 40 percent reporting back injuries when conducting these tasks.

Additionally, 50 percent of nursing staff consider leaving the job due to the physical stress and injury involved.

Ms McClean said the poor recording of obesity in patients also meant WA hospitals miss out on vast sums of vital activity-based funding (ABF), which reimburses healthcare organizations based on the type of patient care provided and the equipment needed to provide it.

"Obesity patients cost more to treat, however poor obesity recording is reducing potential hospital funding—in my [case study](#) by \$2.3 million per year," Ms McClean said.

## **A way forward**

Ms McClean's latest research shows the issue can be addressed.

Over 12 months, nursing staff attended education sessions emphasizing how to accurately record obesity data, were given tape measures, taught methods to measure heights of bed-ridden patients and other ways to better find out and record patients' body mass indexes (BMI).

After the trial, patient BMI recording rose from 6 percent to 33 percent, while height measurements increased from 12 percent to 33 percent.

It also saw more accurate obesity recording, which Ms McClean said could become easier for staff workers as hospitals move towards electronic health records.

"User-friendly improvements should be considered, such as compulsory recording of patient weight and height, embedded and automatic BMI calculators and 'check boxes' for obesity conditions which may affect treatment," she said.

"In the meantime, improvements can be made by aiming to record 100 percent of patients' weight, height and BMI, educating workers and making sure staff record the necessary information.

"All of this will result in a better ability to use obesity data to reduce the chances of healthcare [staff](#) being injured and hospitals receive the ABF reimbursements they should."

"Evaluating the Effectiveness of a Clinical Practice Intervention in Increasing Obesity Data Recording at a Western Australian Country Health Service Hospital: A Quasi-Experimental Controlled Trial" was published in the *Journal of Multidisciplinary Healthcare*.

**More information:** Kim McClean et al, Evaluating the Effectiveness of a Clinical Practice Intervention in Increasing Obesity Data Recording at a Western Australian Country Health Service Hospital: A Quasi-Experimental Controlled Trial, *Journal of Multidisciplinary Healthcare* (2021). [DOI: 10.2147/JMDH.S325903](https://doi.org/10.2147/JMDH.S325903)

Provided by Edith Cowan University

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