The Lifting Paradigm: Why paramedics routinely lift patients off the ground, and what they should be doing instead.

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1. **Introduction**

Paramedics frequently suffer musculoskeletal injuries because they perform heavy physical work in uncontrolled environments. There is a perception that the hierarchy of control can't be applied to emergency services settings because their work environment is always different. Maguire et al. (2014) found that the paramedic profession is one of the most dangerous occupations in Australia, with a risk of serious injury more than seven times higher than the national average. Most of these injuries occur from lifting, and the injury risk in Australia is similar to that in the United States (Maguire et al., 2014).

In most ambulance services in Australia and overseas it is routine practice for two paramedics to lift the full weight of a patient, most commonly from the ground. This presentation explores why this high risk task is so widespread in emergency services, and the alternatives available.

2. **Practice Innovation**

In response to injuries associated with lifting patients the SA Ambulance Service no longer utilises any task which involves two paramedics lifting a patient from the ground. This presentation will outline the various solutions and equipment implemented to eliminate this task and the results of this program.

3. **Sources of Information**

The lifting practices adopted by interstate and overseas paramedics are discussed, along with an analysis of the safety culture and language within emergency services that makes manual lifts so prevalent in this context when these lifts have been abandoned by other areas of healthcare. The wide array of equipment available that is complicit in reinforcing the notion that it is safe for paramedics to lift patients off the ground is also explored.

Some vignettes from SA Ambulance Service lifting incidents are utilised to highlight the rationale for paramedics choosing to lift patients despite awareness of alternatives available to them.

4. **Findings**

The perception that the hierarchy of control can’t be used in emergency services because of the uncontrolled environments that paramedics work within has been demonstrated to be false. There are many opportunities to influence the equipment, decisions and techniques that paramedics perform to eliminate or reduce the characteristics of hazardous manual tasks.

Alternatives to lifting patients manually are presented, including strategies to mechanically lift, slide, or assist patients in a way that avoids the high forces and awkward postures associated with lifts.

The SA Ambulance Service has seen a marked reduction in lost time injuries by removing high risk work practices and providing alternatives for paramedics to utilise. The graph below shows the number of body stressing (manual handling) claims and the lost time injuries for the last 6 years.
5. Discussion

Manual tasks risks can be controlled in ambulance services. The current lifting paradigm gives paramedics the mistaken impression that provided they 'lift right' it is safe for two workers to lift a patient from the ground. Training paramedics to recognise the high forces and awkward postures involved in lifting and providing effective alternatives creates markedly better results. Effective control measures being implemented in the SA Ambulance Service are presented and discussed.

References