

# Service Priorities and Programmes

**Electronic Presentations** 

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## Staff Empowerment for Control Landing Program

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#### Keywords:

Empower control landing manual handling osh

## **Introduction**

Manual Handling Operation (MHO) incidents ranked top three among other injury-on-duty (IOD) cases in KEC. Most of these incidents related to activities like transferring patients to and from beds/chairs, and assisting patients in ambulation/toileting. Analysis of incidents showed that staff was susceptible to injuries of sprain and strain when patients suddenly gave way or collapsed. More than 850 sick leave days from MHO due to patient-related activities were noted in 2013. Experts in Ergonomics and KEC OSH Team have launched Control Landing Program (CLP) since 2014 to reduce risks through conducting proper risk assessment and acquiring control landing skill. The best way to manage hazards at work should be sustained by the staff of the respective workplaces. We adopted a Train-the-trainer approach to equip supervisors and MHO coordinators of departments with appropriate skills. Their roles are not only to deliver the skills to frontline staff but also to ensure safe practices in their daily operations

## **Objectives**

To empower supervisors and MHO coordinators to conduct CLP and ensure safe practices To reduce staff injury rate arising from MHO due to patient-related activities

## **Methodology**

Formal training of Control Landing was initiated in late 2013 in United Christian Hospital (UCH) where proper risk assessment and control landing skills were demonstrated. Hand-on practices of scenarios in patient-related activities that had a higher chance of patients' give-way and collapse especially during transfer and ambulation were emphasized. Participants who were the workplace supervisors or MHO coordinators in the departments had received training by KEC OSH Team first. They were then provided with training kit and MHO checklist before transferring the skills to frontline staff and ensure proper practices. Owing to overwhelming response and positive feedback from the target participants, 5 additional classes covering 41 clinical units with 106 prospective trainers were conducted in 2014 and 2015. Monitoring related injury of respective departments was followed. Regular trend and cases analysis were sent to the department heads and KEC OSH Team provided post-training support to these departments for further refinement.

## <u>Result</u>

The number of MHO IOD due to patient-related activities per 100 staff in UCH was decreased by 38.3% from 0.47 in 2013 to 0.29 in 2015. The corresponding sick leave days were decreased by 45.6% from 566.5 days in 2013 to 308 days in 2015. Positive feedback was received from frontline supervisors and department heads. Training need analysis in 2015 supports the continuous conduction of Control Landing Program as one of KEC's annual initiatives and CLP will be extended to the other hospitals under KEC.