



Priority #1 Safety



Preventing Workplace Injuries Among Perinatal Nurses

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Health care injuries are a growing concern. According to the Bureau of Labor Statistics (2014a), the health care and social assistance industry has one of the highest numbers of reported workplace injuries compared with other professions. Because of the hazards of manual lifting, the official stance of the American Nurses Association (ANA) is to support “actions and policies that result in the elimination of manual patient handling” (2015, para. 2). One such policy is the *Nurse and Health Care*

Worker Protection Act, which, if passed, will set a national standard for safe patient handling practice (ANA, 2015; Brown, 2015). The ANA continues to advocate for safe patient handling policies, but a mandated national standard has not been adopted (ANA, 2012).

The Toll of Workplace Injuries

Workplace injuries cause significant problems for health care administrators, employees, and

Abstract Many aspects of perinatal nursing put nurses at risk for injuries, including frequent repetitive bending, lifting of clients, and exposure to potentially large amounts of body fluids such as blood and amniotic fluid. Violence is also a potential risk with stressful family situations that may arise around childbirth. Workplace injuries put a health care facility at risk for staff turnover, decreases in the number of skilled nurses, client dissatisfaction, workers’ compensation payouts, and employee lawsuits. Through the use of safety equipment, improved safety and violence training programs, “no manual lift” policies, reinforcement of personal protective equipment usage, and diligent staff training to improve awareness, these risks can be minimized. <http://dx.doi.org/10.1016/j.nwh.2015.12.003>

Keywords perinatal nursing | safety | violence | workplace injuries



consumers. Workplace injuries resulting in compensation claims are expensive, with hospitals paying approximately \$0.74 per \$100 for injury claims, for an average facility loss of \$7,770 per claim (Aon Risk Solutions, 2014). The total cost to a health care organization to replace a nurse after an injury is estimated to be \$25,450 to \$38,280 (Morgan & Chow, 2007).

A nurse who sustains an injury may endure acute and chronic pain, temporary or permanent disability, loss of income, loss of mobility, emotional stress, job dissatisfaction, and decreased quality of life. Some employees never file claims but continue to work with unreported injuries and chronic pain, often resulting in major career changes or a decision to change within the field of nursing.

Employers bear the burden of costs related to staffing changes, overtime pay of current nurses, training of new nurses, loss of productivity, increased use of sick time and call-ins, workers' compensation filing, and employee lawsuits. The cost to train a perinatal nurse is

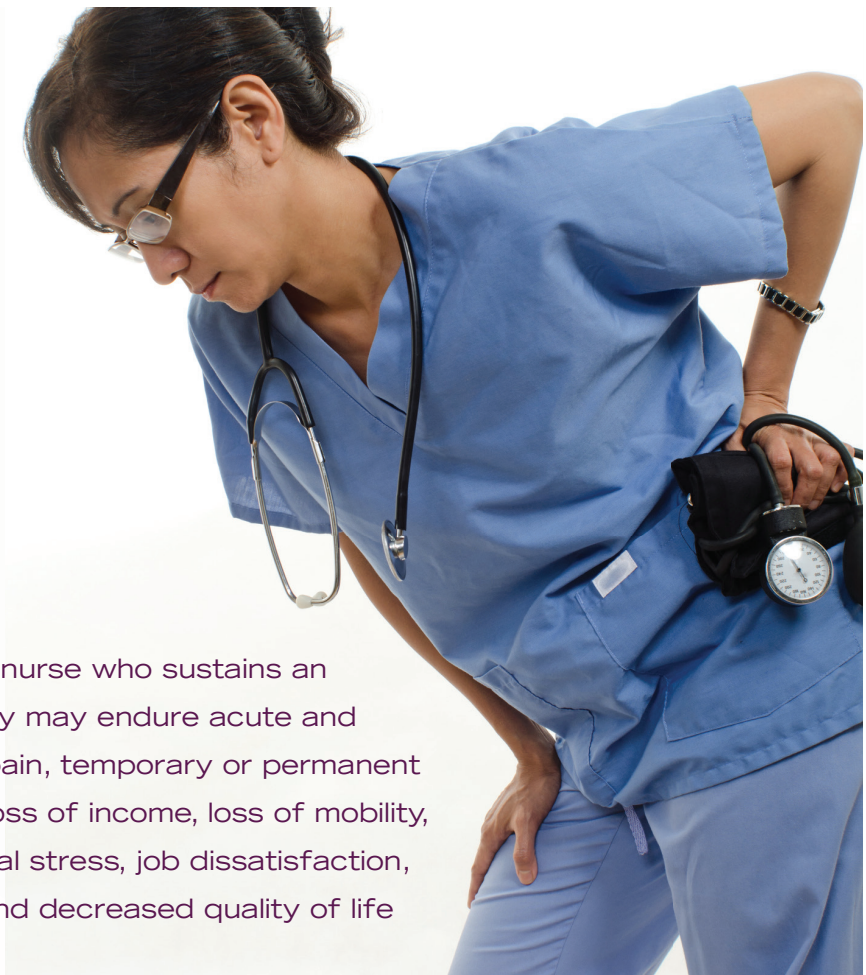
generally thought to be expensive because of the additional training time for specialty skills beyond typical medical–surgical care, such as fetal heart monitoring. Turnover of nurses in a specialty field is estimated to cost \$64,000, which is more than in a nonspecialty field (Strachota, Normandin, O'Brien, Clary, & Krukow, 2003; The Advisory Board Company, 2000). Because the obstetric area is one of the areas at highest risk for potential litigation, it is vital that health care facilities retain experienced perinatal nurses to ensure patient safety and quality of care.

Issues Specific to Perinatal Nursing

Perinatal nurses may be at risk for injuries specific to their specialty nursing duties, such as moving heavy equipment including beds, infant warmers, instrument carts, and infant resuscitation equipment; transferring pregnant women (who have gained weight during pregnancy) who may be immobile from epidurals and spinal; repetitive bending over cribs; and other

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