Case Study of Musculoskeletal Disorder (MSD) Prevention/ Ergonomics Intervention

Title: Injury Reduction Strategy-Summit Category 1

Keywords: Long term care, Injury reduction, peer educators, staff safety

1. Organizations Involved (name or description)

[i.e., company/organization, labour/union, external consultant]

Long-term care site Summit-Island Health Authority, Victoria, BC

Lisa Diamond/Peter Donohue-Site Mgrs

MSIP Super Coaches (HEU members)

Evan McKay (OH&S MSIP Prevention Advisor)

Steven Rookyard (OH&S Violence Prevention Advisor)

2. Case Study Description

2.1 Introduction/Background

[What is the industry or type of organization? What is the size of the organization? What were the gaps or problems identified? How did you know there was a gap or problem?]

- The Summit Long-term care site is located at 955 Hillside Avenue in Victoria BC, owned and managed by Island Health Authority
- It is a 309 bed long-term care with just under 500 staff.
- It also contains a senior's day program and 4 bed community dialysis clinic

Island Health Authority is a regional Health Authority that encompasses Vancouver Island, surrounding islands and part of the British Columbia mainland with approx. 28,000 employees.

As with many health care providers, staff injuries play a role in the day-to-day operations and create gaps in staffing models due to elevated employee sick-time and subsequent significant cost expenditures. In an effort to address these issues, OH&S team developed a **Muscle Skeletal Injury Prevention (MSIP) Coach** role, which are peer educators focusing on MSI risk factors at sites, units. MSIP Coaches participate in a 5-day training workshop where injury reduction strategies and communication skills are taught.

In addition, the OH&S team trains peer educators to provide ongoing education in regards to **Violence Prevention (VP)** strategies, and, the **Infection Prevention and Control (IPC)** team trains peer educators on hand hygiene practices. Although these programs provide great information, Managers found it onerous to train and maintain volunteers to take on each of these roles.

In an effort to create efficiency of staff training, the leadership at Summit choose to create a **Super Coach Program** whereby chosen staff members would complete all the above mentioned tasks in a supernumerary position and cover all shifts in a 24 hour period.

To date we have trained 8 Super Coaches to provide in the moment support, audits, and training related to MSIP, VP & IPC.

2.2 Goal

What was the goal of this intervention or project? Write a short description of the goal.]

Improve staff safety and morale by following interventions:

- -Reduce staff MSI and violence related injuries with training, come along coaching, spot check audits with goal of reducing staff injures
- -To complete hand hygiene audits with goal of reducing transmissible infections







-To complete unit workplace inspection to fulfill provincial WSBC requirements for JOHS committee and thru mgmt./union collaboration and review of inspection and audits develop metrics for staff safety improvements.

2.3 What was Done and How?

[Provide details of the actions, what was changed, what resources were used/needed and how did the change get made?]

Step 1

Mgmt selected Super coaches based on criteria

Step 2

OH&S led 5 days of MSIP training workshop

OH&S led 3 days of Violence Prevention training

IP&C led online training to perform hand hygiene audits on units

Regularly scheduled supernumerary shifts providing 24 hour coverage

Step 3

Analysis on injury metrics to determine focused training (unit specific)

Step 4

Admin staff booked supercoaches for shifts, coaches perform tasks based on goals set in monthly Super coach mtg with site mgr and OH&S staff member.

Analysis of audits and staff injury trends to determine effectiveness and future direction of focus of staff training.

Ongoing support

- SharePoint sites have been established specific for the coaches. This allows for effective communication
 and sharing between the mentors and trainers. SharePoint is a location for specific tools and resources for
 the Super Coach role
- Leadership support is essential for approval of the time spent in the coach role.
- OH&S can communicate and support the coaches both independently, and under the guidance of local leadership
- Routine Virtual check-ins with the coach groups are efficient and effective.

Education that is focused on prevention mitigates risks & injuries as staff awareness is increased. Coaching for these safety topics needs to be supported in practice through mentoring, debriefs, and a non-blaming culture.

Achieving Staff buy-in was identified as a priority goal to strengthen the effectiveness of the Super Coach Program.

Selection criteria for Peer Coach / Super Coach training includes:

- Respected by peers
- Receives feedback willingly
- Relevant knowledge of the clinical area of work and site-specific practices
- Proven group facilitation skills

Coach training largely focuses on interpersonal skills, such as giving/receiving feedback and identifying the best moments for Peer Coach support.

2.4 Result of the Changes

[What were the result of the changes and how do you know?]

reflect those of the Province.









3. Success Factors and Challenges

[What contributed to the success or lack of success of the intervention? What challenges were faced?]

Successes

- Reduced injury incidents
- Improved general staff morale-staff see improvements and programs based on their input.

Challenges

- Coaches periodically pulled from coaching shifts due to short staffing
- Initial coach training is substantial

4. Transferability

[Do you think this intervention would work in other workplaces? Why or why not?]

The Super Coach model appears to be an appropriate model for health care teams in busy Acute and LTC where there are 24hr shifts and multi discipline teams working together.

Smaller, specialized teams typically have Clinical Educator roles or similar which cover the staff safety training and support

Although MSIP Coaches, Violence Prevention facilitators and Hygiene Auditors exist in many Island Health Authority sites, it depends largely on management support and size of facility to support a Super Coach program.







OH&S department will continue to monitor success of Summit Super Coach program before entertaining largescale implementation.

5. Further Information

[Please provide the name of a person/organization and contact information for whom we could communicate about this case study]

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6. References or Resources

[If any, please provide main reference(s)/document(s)]







pvpc-roles-responsib process-msip-coach-longterm-care-onboa ilities-facilitator-select selection.pdf rding-checklist-nursing

Definitions:

MSI - Musculoskeletal Injury

MSIP - Musculoskeletal Injury Prevention

HEU - Hospital Employees Union

IH - Island Health Shared Services BC

JOHS - Joint Occupational Health & Safety committee

OH&S - Occupational Health & Safety dept

IP&C - Infection Prevention Control

VP - Violence Prevention

Super Coaches - direct care employees selected by leadership using established selection criteria that undergo training by OH&S and Infection Prevention and Control staff to be peer mentors/coaches for safety in the areas of MSIP, Violence Prevention and Infection Prevention.

7. Attach Photographs/Figures (Optional)

[Pre and post comparisons are ideal]







