Mechanical lifting devices have been developed to reduce healthcare worker injuries related to patient handling. Since the implementation of floor lifts and ceiling lifts, the severity of musculoskeletal injuries (MSI) to healthcare workers have been reduced. This study was conducted to evaluate ceiling lifts in comparison to floor lifts based on transfer time, patient comfort, and staff perceptions in three long-term care facilities.

In this study, a total of 119 resident transfers were observed in three long-term care facilities. The majority of transfers were from chair to bed and bed to chair. Transfers performed with ceiling lifts on average required less time than with floor lifts or manual methods. Alternatively, it took longer to complete repositioning tasks with a ceiling lift when compared to manual techniques, such as sliding sheets or soaker pads.

Residents found ceiling lifts on average to be more comfortable than floor lifts. Staff also perceived ceiling lifts to be the least physically demanding, followed by floor lifts, then manual transfers with co-workers. In addition, staff members felt that transferring a resident using ceiling lifts was less difficult, more efficient, more easily accessible, lowered the risk of injury, required less assistance, and was safer for patients compared to floor lifts.

Staff preferred using ceiling lifts over floor lifts for transferring and repositioning tasks. Ceiling lifts were perceived to be less physically demanding, easier to use, more accessible, and safer for staff compared to floor lifts.

It is important to ensure that staff members use ceiling lifts correctly to achieve maximum benefit with respect to injury reduction and time. Although ceiling lifts take longer than manual methods for repositioning, manual lifting increases risk for injuries and may result in time-loss from work and long-term pain. Therefore, more research is required on the use of ceiling lifts for repositioning tasks and strategies to overcome the additional barrier of time.

- In the study period, a total of 119 patient transfers were observed in the three long-term care facilities. Of these transfers 78 were from chair to bed, 32 were from bed to chair and 28 were repositioning/boosting tasks
- Transfers performed with ceiling lifts required on average less time (bed to chair transfers: 156.9s for ceiling lift, 273.6s for floor lift)
- 97% of the surveyed employees said if they had the choice they would prefer to use ceiling lifts to transfer and reposition/boost patients over floor lifts
- On average, ceiling lifts were more comfortable than floor lifts for patients

Full text of this report has been submitted for publication, and is not yet available for general distribution. For more information, please contact OHSAH.