

# Foundations of Practice and Beyond

## Wednesday

### Stream B

Session 6 0930

Session 8 1300

### Heather O'Neill



## Leg Ulcer Dressing in the community, nurses perceptions of musculoskeletal risk factors compared with observed exposure

### Biography

Since qualifying as a physiotherapist in 1994 from the University of Ulster, I have worked in a wide variety of settings in Cardiff and Newcastle upon Tyne and have been part of a back care advisory team since 1997. I was involved in the DWP's job retention and rehabilitation pilot in the North East of England from 2003-2005 providing both physiotherapy and ergonomic assessment and set up a direct access staff physiotherapy service for Newcastle PCT in 2002. I recently completed an MSc in Health Ergonomics from the University of Surrey and continue to manage a back care advisory team comprising both physiotherapists and nurses. The team provides training, assessment, strategic intervention and occupational health physiotherapy mainly in the NHS but also to external organisations. I am a Registered Member of National Back Exchange and work occasionally as freelance trainer and ergonomic assessor

### Abstract

Community nursing has changed beyond recognition in the past 10-15 years. Nursing intervention is increasingly technical; no social care is provided and tasks undertaken by nurses are those which would previously have been performed in sterile, hospital environments. One such task increasingly reported as causing musculoskeletal discomfort is that of dressing leg ulcers in patients' homes. No known research studies have examined exposure to the musculoskeletal risk factors associated with this task. This study therefore aims to compare nurses' perceptions with the observed exposure and identify any recommendations for risk reduction.

Qualitative analysis is commonly used where there has previously been no research into a defined area; consequently ten community nurses were interviewed to investigate their perceptions of the risks. Observations of leg ulcer dressings were made with the same sample of nurses. Objective measurements and use of the Quick Exposure Check (QEC) were recorded for each stage of the task; nurses were asked at interview to score the observed dressing in the same way. Demographic information was also recorded.

Nurses' perceptions of the risk factors were mainly physical: awkward postures due to size and weight of the patient's leg and cluttered, unclean environments. Observation confirmed moderate exposure (QEC) to physical risk factors particularly in the cleaning and application stages of the dressing; these stages were also associated with the highest discomfort levels. Underlying the reported physical risk factors however was the perception that nurses do not have sufficient time in their day to complete their duties. Perception of physical risk factors appear to have been exaggerated due to time pressures required to complete the task.

Using a participative approach, risk reduction should involve trial of equipment such as stools and limb supports and a flexible approach to staffing to reduce perceived workload associated with this task.