How do national health guidelines work?
A realist analysis of the ACC
*Moving and Handling People (MHP) New Zealand Guidelines, 2012*

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Aim

To identify:
how and to what extent
the MHP Guidelines have worked
for whom, and
under what circumstances
Research questions

• How were the guidelines intended to work?  
  Stage 1
• Who have been reached by the guidelines?  
  Stage 2
• Who have used the guidelines?  
• How have the guidelines been used?  
• What is the outcome of the use of the guidelines?  
• What has influenced the use and the outcome?  
  Stage 3
Stage 1 - Method
How were the guidelines intended to work? - Programme Theory

- In-depth analysis of the Guideline document
- Interviews with developers
- Document review of material used to develop the Guidelines

Program theory of the 'Moving and Handling People Guidelines 2012'

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Programme theory?

External context: Hospitals, Aged care, Rest homes, Home care, other... Population and workforce change, Budget cuts

Internal context: Employment relations, Organisational structure, Management support, Culture...

Resource

Reasoning

Initiate change

Outcome: Reduced injuries

Outcome: Reduced injury claims

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The Moving and Handling People Guidelines

- A national guideline aiming to reduce MSD caused by moving and handling people
- The Guidelines recommend multifaceted interventions

**Organisational system**
- Policy development
- Workplace culture
- Monitoring and evaluation

**Key components**
- Risk assessment
- Techniques
- Training
- Equipment
- Facility design

*Implemented but not effective*
Programme theory of the Guidelines

Results

Improved working conditions
Reduced injuries

Decision to use sections to make changes
Initiate change, follow guidelines
Improved working conditions
Reduced injuries

Evidence
Economic
Ethical
Legal

Guidance on implementation in the Guidelines
Guidance Evidence based
Sustained changes

Distributed via mail lists, conferences, internet
OHS managers
Moving and handling coordinators

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**Context**
Increased staff turnover, rising health costs & budget constraints
Changing demographic patterns => Increased cost

**Reasoning**
Reduce absenteeism and staff turnover
Ensure cost-effectiveness
Provide return on investment

**Resource**
Moving and Handling People: The New Zealand Guidelines

**Economic mechanism**

**Outcome**
Reduced injuries related to MHP => Reduced cost of injuries
Context
Health and Safety legislation
Influence from government agencies
Obligations to apply other injury prevention programmes

Reasoning
Fulfil the legal requirements
Avoid persecution

Resource
Moving and Handling People: The New Zealand Guidelines

Legal mechanism

Outcome
Reduced injuries related to MHP
Context
Existing workplace culture
Existing MH programme
Changing demographic

Reasoning
The MHPG builds on research
Prevent injuries to staff and clients
Foster better working climate
Enhance quality of care

Resource
Moving and Handling People: The New Zealand Guidelines

Ethical mechanism

Outcome
Reduced injuries related to MHP
Stage 2 - Method
Who have been reach by the guidelines?
Who have used the guidelines?

Internet-based survey questionnaire

Public & Private Hospitals
Residential & Aged Care
Home & Community Care

Managers
People who handle people
Senior management

Equipment & Facility design
Education & Training Institutions

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Results - questionnaire
Awareness of the Guidelines

59% (362) were aware of the guidelines (N=612)

- 94% of MHP coordinators
- 91% of Trainers
- 86% of OHS managers
- 74% of H&S representatives

- 53% of Carers and Support Workers
- 48% of Nurses
Results - questionnaire
Awareness of the Guidelines

59% (362) were aware of the guidelines (N=612)

Awareness of the different formats of the guidelines in percentage

- Internet
- CD-ROM
- Hard copy

Only aware of one format of the Guidelines in percentage

- Internet
- CD-ROM
- Hard copy
Results - questionnaire
Read at least a section

• 50% (306) of all respondents had read at least a section of the Guidelines.
Percentage of respondents that are familiar with a section that have used it

14: Bariatric n=247
13: Auditing n=243
12: Monitoring n=274
11: Workplace culture n=294
10: Policy n=244
9: Facility design n=239
8: Equipment management n=306
7: Equipment n=334
6: Organising training n=271
5: Training n=306
4: Techniques n=336
3: Risk assessment n=328
2: Why MHProgrames n=325
1: Introduction n=288
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Percentages of respondents that have used a section perceiving that it has resulted in changes

<table>
<thead>
<tr>
<th>Section</th>
<th>Percentage</th>
<th>Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>1: Introduction</td>
<td>44%</td>
<td>125</td>
</tr>
<tr>
<td>2: Why MH Programs</td>
<td>57%</td>
<td>192</td>
</tr>
<tr>
<td>3: Risk assessment</td>
<td>60%</td>
<td>230</td>
</tr>
<tr>
<td>4: Techniques</td>
<td>55%</td>
<td>258</td>
</tr>
<tr>
<td>5: Training</td>
<td>60%</td>
<td>191</td>
</tr>
<tr>
<td>6: Organising training</td>
<td>68%</td>
<td>119</td>
</tr>
<tr>
<td>7: Equipment</td>
<td>65%</td>
<td>240</td>
</tr>
<tr>
<td>8: Equipment management</td>
<td>58%</td>
<td>131</td>
</tr>
<tr>
<td>9: Facility design</td>
<td>49%</td>
<td>67</td>
</tr>
<tr>
<td>10: Policy</td>
<td>56%</td>
<td>92</td>
</tr>
<tr>
<td>11: Workplace culture</td>
<td>54%</td>
<td>132</td>
</tr>
<tr>
<td>12: Monitoring</td>
<td>58%</td>
<td>122</td>
</tr>
<tr>
<td>13: Auditing</td>
<td>56%</td>
<td>94</td>
</tr>
<tr>
<td>14: Bariatric</td>
<td>56%</td>
<td>118</td>
</tr>
</tbody>
</table>

80
Conclusions so far

• The Hard copy and the Internet version of the Guidelines are most known
  – maybe not worth providing CD-ROM version
• The Technique and Training sections are most used and also perceived by more to have resulted in changes
• A higher percentage of H&S Practitioners/professionals are aware of the Guidelines
Stage 3: Case Studies
How have the guidelines been used? What is the outcome of the use of the guidelines? What has influenced the use and the outcome?

- In-depth interviews
  - MHP coordinators
  - Health and safety managers
  - Stakeholders

- Chronicle workshops

- Analysis of documents related to MHP
  - Procedures for risk assessment
  - Incident analysis
  - Training requirements related to MHP
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Olsen, KB

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