

Transfers, Lifts, and Positioning

Date:

Instructor:

Description: This inservice gives information on preventing back injuries and how to safely lift, transfer, and position patients.

Objectives:

On completion of this inservice, participants will be able to:

List steps to take if back injury is suspected

Demonstrate safe lifting and transfer techniques

Demonstrate proper use of draw sheet, gait belt, transfer belt, sling lift, and powered standing assist device

Explain how to assist a falling patient

Outline:

Back Injuries

Prevalence

Signs and symptoms

Reporting

Body Mechanics

Potential problems when lifting

Techniques to prevent back injuries

Safe Transfers, Lifts, and Positioning

Hazards

Knowing patient needs

Techniques

Transfer and Lift Equipment

Safe use

Transfers, Lifts, and Positioning Outline

Transfers, Lifts, and Positioning

Lesson Plan and Speaking Notes

Instructor:

Bring a sample of all equipment to the meeting
Demonstrate how it is to be properly used
Have staff practice and demonstrate safe use of equipment

Preventing Back Injuries

Back injuries are the second biggest reason for lost days of work. (Colds are the biggest reason.)

Back injuries account for 25% of all work related injuries.

Health care workers have the second highest back injury rate in the country – only construction workers have more.

Back injury may involve muscles, ligaments, tendons, or discs.
Once your back is injured, you are way more likely to injure it again.

Most of these injuries are caused by improper body mechanics: methods of lifting, pulling, pushing, carrying, transferring

Signs of Back Strain

Learn to listen to them - ignoring them can cause way worse problems.

Ache, dull or sharp
Constant or comes and goes
Heat
Tingling
Tightness
Weakness

With cumulative trauma, you may not feel anything or just minor pain – then, a single or sudden movement can cause full blown pain.

When You Think You May Have Been Injured

Even if you think you and/or a patient may have been injured, you should have your supervisor fill out an incident report immediately.

Some injuries don't reveal themselves until hours later.

If there were witnesses, have them contribute to the report.

Document the time, place, and exact circumstances - describe in detail.

Potential Problems When Lifting

Unexpected load

Slip or fall

Weight of load is too heavy

Twisting or turning while lifting

Lifting odd shaped object

Reaching while lifting

Holding one position too long

Cumulative trauma

Pulling and dragging are especially stressful.

What are some principles of safe lifting techniques?

Body Mechanics - Techniques to Prevent Back Injuries

Ask for more assistance.

Reduce size of weight lifted – make sure load is balanced and even.

Use a secure and wide based stance.

Use your leg muscles, not your back.

Bend your knees, not your waist.

Lift straight up and slowly - Avoid jerky or hasty movements.

Leg muscles are stronger than back muscles.

Bend at knees, straightening legs and pushing up with them.

Don't bend from waist, but squat.

Hold load as close to body as possible.

Don't twist-feet and shoulders should be pointed in same direction.

Adjust height of load.

Reduce obstructions.

Use more mechanical aids.

Lifting and Transferring Patients is Especially Hazardous

They can shift weight suddenly
Dementia, confusion, sensory deficits
Combative
Equipment and furniture in the way
Confined or awkward spaces

Know the Patient's Needs

The patient's care plan should be very explicit on exactly how the patient is to be transferred and or lifted.
If you think changes need to be made to the way the patient is lifted, discuss this with the charge nurse.
Know the patient's weight bearing status and balance problems.
Always transfer to the patient's strongest side.
Know the patient's ability to understand and assist: Does the patient have confusion or sensory deficits? Is the patient combative?
Always explain to the patient what you are going to do.

Turning a Patient in Bed

Adjust bed to thigh level
Lower the bed rail
Place your knee on the bed
With one hand on the patient's shoulder, and one hand on the hip, roll the patient toward you

Repositioning a Patient with a Draw Sheet

Position one staff member on each side of the patient
Put the head of the bed down
Adjust the bed to waist level of the shortest helper
Bend your knees, and point one foot in the direction of the move
Grasp the draw sheet with both hands
Lift and move in unison – count together if needed

Transferring a Patient from Bed to Stretcher

Use two caregivers
Use a draw sheet
Adjust bed and stretcher to thigh level, and adjust wheels
Place your knee on the stretcher, and gently pull the patient onto the stretcher

Trapeze Bars

Should always be adjusted so patient's elbows are slightly bent when grasping
For patient who can partially assist
Have patient bend knees
Bend your knees, and point one foot toward the head of the bed
Place one hand under the patient's shoulder blades, and the other beneath her buttocks,
and gently move toward the head of the bed while patient pushes with feet

Gait Belt

Canvas belt without handles
Fasten it securely around the patient's waist
Grip the belt when moving patient

Transfer Belt

Used like gait belt, but wider and has padded handles on each side
Safer than gait belt

Posey belt

Fits over patient's torso
Walking belt with handles

Transferring a Patient from Bed to Wheelchair

Place the wheelchair at the head of the bed, and lock wheels
Adjust the bed to the lowest height
Place your feet shoulder width apart and bend your knees
Assist the patient to sit on side of bed by placing one hand under shoulder blades and the other under the knees –Let patient sit for a minute to make sure he is not dizzy
Place a transfer belt around the patient's waist
Grasp the transfer belt, and with your knees braced against the patient's knees, rock him to a standing position
Bend your knees and move your feet to turn and lower the patient into the chair

Assisting a Falling Patient

Do not try to stop the fall or hold the patient in a standing position
Stand behind the patient, using your forward leg to support her
Support patient under her arms, and slow the fall by gently lowering her to the floor
Protect the patient's head as much as possible

Transfer and Lifting Equipment

You must get training on how to use any equipment before the first time you use it

Make sure all equipment or assistance is available - OSHA recommends mandatory two person lifting for non-weight bearing patients

Use the equipment as it is designed to be used

Use equipment safely, with attention, and with good body mechanics

Report all defective, missing, or insufficient equipment to the charge nurse

Sling Lift / Hoyer Lift

For patients who are:

Totally dependent

Partial or non-weight bearing

Must use with two caregivers

Know weight limitations of device

Should have hand-held controls and emergency shut-off

Lock wheels of bed and lift before using

Widen base of lift to transfer

Apply sling properly and position it above shoulders and below buttocks

Insert metal bars into the appropriate slots on the sling

Make sure chain links are the appropriate lengths for the top and bottom

Secure the patient's arms and legs so they don't hang out of the sling during transfer

Use multiple slings so one sling can remain in place while the patient in the bed or chair

Powered Standing Assist Devices

For patients who are:

Partially dependent

Capable of some weight bearing

Cooperative

Can sit up on bed with or without assistance

Able to bend hips, knees, and ankles

Post-Test

Title: Transfers, Lifts, and Positioning
Name:
Date:
1. What are two mistakes people sometimes make when lifting?
2. Give two ways to lift safely.
3. What are two things you should know about a patient before assisting the patient with a transfer?
4. When repositioning a patient in bed, adjust the bed to the lowest height.
True False