SITTING THE PATIENT BACK IN A CHAIR

When someone has slumped down in the chair, ‘The Handler’ is placed behind the patient’s hips. The mover then blocks the patient’s knees and, using the ‘Rocking Technique’ or with their own weight as counterbalance, slides the patient back in the chair.

90° HORIZONTAL TRANSFERS BETWEEN BED, COMMODE, WHEELCHAIR, ETC.

The patient is brought forward on the chair and the ‘The Handler’ is placed behind their hips. The patient’s knees are blocked with one of the movers in front and the mover uses the ‘Rocking Technique’ to give the patient enough momentum for the sideways transfer.
STANDING A PATIENT UP

Use your bodyweight to stand a patient up; keeping the patient’s knees between yours throughout.

STANDING A PATIENT UP WITH TWO CARER GIVERS

Using a through arm grip and ‘The Handler’ behind the patient’s hips, the ‘Rocking Technique’ can be used to provide momentum to stand the patient up.

MOVING A PATIENT UP THE BED WITH TWO NURSES, THE Handler AND SLIDE SHEET

For the heavier patient with a slide sheet in situ, use a through arm grip and ‘The Handler’ below the thighs and gently slide the patient up the bed. Use of ‘The Handler’ minimizes the drag on the patient’s upper body.

Do’s and Don’ts for Handling

- Do handle with the load close to your body and over the area between your feet.
- Do learn how to handle patients with skill and confidence. If uncertain, be sure to ask for more practical instruction.
- Don’t rely just on textbooks or posters.
- Do ask for guidance when a particular patient presents a handling problem or if there is a change in the patient’s condition.
- Do, when medical condition allows, encourage the patients/clients/disabled persons to do as much as they can to assist for themselves.
- Do use the principle of kinetic energy by gently rocking the patient to give enough momentum for the transfer and so minimize the need for lifting vertically.
- Don’t ever dead lift.
- Avoid all vertical lifting. Instead, go for the hoist.
- Don’t let patients lock their hands behind your neck; if anything goes wrong, your neck will ‘get it’.
- Don’t use ‘The Patient Handler’ to enable you to lift. It was not designed for that, but to make transfers easier.

Note:

All nurses and care givers should be trained, made aware of the risk of unskilled lifting and handling, taught how to assess risk and be given practical instruction to ensure that they are skilled in assessing patient handling needs.