# Lateral Transfer

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Activity: Resident Handling

Description: Gurneys with transfer devices



When to Use: Transferring a partial- or non-weight-bearing resident between 2 horizontal surfaces, such as a bed to a stretcher or gurney in supine position.

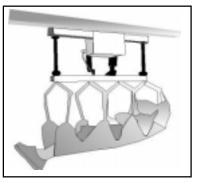
**Points to Remember:** Two caregivers are required to perform this type of transfer. Additional assistance may be needed depending on resident status, e.g., for heavier or non-cooperative residents. Motorized height-adjustable gurneys with built-in slide boards are preferred to those adjusted by crank mechanism to minimize physical exertion required by caregiver. Always ensure that lifting device is in good working order before use and is rated for the load weight to be transferred. Ensure wheels on equipment are locked. Ensure transfer surfaces are same level and at caregiver's waist level to avoid extended reaches and back flexion.

References: 13, 16, 39, 72

# Lateral Transfer

Activity: Resident Handling

**Description:** Ceiling-mounted device with horizontal frame system or litter



When to Use: Transferring residents who are totally dependent, non-weight bearing, have other physical limitations, or are very heavy and cannot be safely transferred by staff between 2 horizontal surfaces, such as a bed to a stretcher or gurney in supine position.

**Points to Remember:** Motors can be fixed or portable (lightweight). Device can be operated by hand-held control attached to unit or by infrared remote control. Always ensure lifting device is in good working order before use and is rated for the load weight to be lifted.

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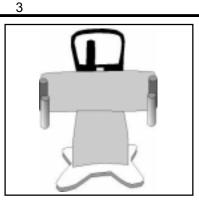
References: 40, 47, 55, 88

#### Lateral Transfer

Activity: Resident Handling

**Description:** 

Free-standing lateral transfer devices used with height-adjustable stretcher or gurney



When to Use: Transferring a partial- or non-weight-bearing resident between 2 horizontal surfaces, such as a bed to a stretcher or gurney in supine position.

**Points to Remember:** Two caregivers are required to perform this type of transfer. Additional assistance may be needed depending on resident status, e.g., for heavier or non-cooperative residents. Always ensure that lifting device is in good working order before use and rated for the load weight to be transferred. Ensure wheels on equipment are locked. Ensure transfer surfaces are at same level and at a height that allows caregivers to work at waist level to avoid extended reaches and back flexion.

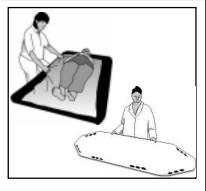
References: 16, 54

#### Lateral Transfer; Repositioning

Activity: Resident Handling

#### Description:

Draw sheet to be used in combination with frictionreducing devices such as slippery sheets, plastic bags, low friction mattress covers, or slide boards



When To Use: Transferring a partial- or non-weight bearing resident between 2 horizontal surfaces such as a bed to a stretcher or gurney in supine position or when repositioning resident in bed.

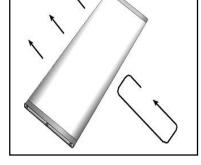
**Points to Remember:** Two caregivers are required to perform this type of transfer. Additional assistance may be needed depending upon resident status, e.g., for heavier or non-cooperative residents. May not be suitable for bariatric residents. Use a good hand-hold by rolling up draw sheets or use other friction-reducing devices with handles such as slippery sheets. Narrower slippery sheets with webbing handles positioned on the long edge of the sheet may be easier to use than wider sheets. Look for a combination of devices that will minimize risk of skin trauma. Ensure wheels on equipment are locked. Ensure transfer surfaces are at same level and at a height that allows caregivers to work at waist level to avoid extended reaches and back flexion. Count down and synchronize the transfer motion between caregivers.

**References:** 13, 16, 27, 29, 30, 39, 56, 70, 76, 79, 89, 97, 113

#### Lateral Transfer

Activity: Resident Handling

**Description:** Boards or mats with vinyl coverings and rollers



When to Use: Transferring a partial- or non-weight bearing resident between 2 horizontal surfaces, such as a bed to a stretcher or gurney in supine position.

**Points to Remember:** Two caregivers are required to perform this type of transfer. Additional assistance may be needed depending on resident status, e.g., for heavier or non-cooperative residents. Move resident to new surface using gentle push and pull motion. Device may not be suitable for bariatric residents. Ensure equipment wheels are locked. Ensure transfer surfaces are at same level and at a height that allows caregivers to work at waist level to avoid extended reaches and back flexion. Count down and synchronize the transfer motion between caregivers.

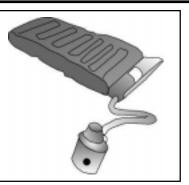
References: 13, 16, 90, 97

### Lateral Transfer; Repositioning

Activity: Resident Handling

Description:

Air-assist lateral sliding aid; flexible mattress inflated by portable air supply



When to Use: Transferring a partial- or non-weight bearing resident between two horizontal surfaces such as a bed to stretcher or gurney in supine position. Can also be used for repositioning a resident in bed. Increases resident's comfort and reduces risk of tissue damage during transfer.

**Points to Remember:** Two caregivers are required to perform this type of transfer. Additional assistance may be needed depending on resident status, e.g., for heavier or non-cooperative residents. Ensure wheels on equipment are locked. Ensure transfer surfaces are at level and at a height that allows caregivers to work at waist level to avoid extended reaches and back flexion. Count down and synchronize the transfer motion between caregivers.

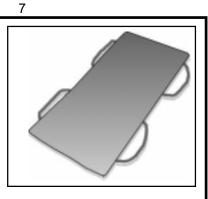
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References: 16, 39

#### Lateral Transfer

Activity: Resident Handling

**Description:** Transfer cots with handles



**When to Use**: Transferring a partial- or non-weight-bearing resident between 2 horizontal surfaces, such as a bed to a stretcher or gurney in supine position.

**Points to Remember:**Two caregivers are required to perform this type of transfer. Additional assistance may be needed depending on resident status, e.g., for heavier or non-cooperative residents. Technique may not be suitable for bariatric residents. Use in combination with friction-reducing devices such as slide boards or slippery sheets. Ensure wheels on equipment are locked. Ensure transfer surfaces are at same level and at a height that allows caregivers to work at waist level to avoid extended reaches and back flexion. Count down and synchronize the transfer motion between caregivers.

References: 13, 90

#### **Resident Lifting**

Activity Resident Handling

#### Description:

Portable lift device (sling type); can be a universal/ hammock sling or a band/leg sling



When to Use: Lifting residents who are totally dependent, are partial- or non-weight bearing, are very heavy, or have other physical limitations. Transfers from bed to chair (wheel chair, Geri or cardiac chair), chair or floor to bed, lateral transfers, or for bathing and toileting. Enhances resident safety and comfort.

**Points to Remember:** May require 2 or more caregivers. Look for a device with a variety of slings, lift-height range, battery portability, hand-held control, emergency shut-off, manual override, and boom pressure sensitive switch. Having multiple slings allows one of them to remain in place while resident is in bed or chair for only a short period, reducing the number of times the caregiver lifts and positions resident. Ensure lifting device is in good working order before use and is rated for the load weight to be lifted. Electric/ battery powered lifts are preferred to crank or pump type devices to allow a smoother movement for the resident, and less physical exertion and risk of musculoskeletal injury to the caregiver.

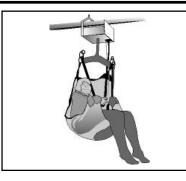
**References:** 3, 13, 14, 16, 27, 29, 33, 38, 41, 43, 46, 50, 51, 52, 57, 65, 66, 69, 72, 73, 74, 75, 76, 77, 86, 90, 93, 94, 97, 98, 108, 110, 113

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#### **Resident Lifting**

Activity Resident Handling

**Description:** Ceiling-mounted lift device



When to Use: Lifting residents who are totally dependent, are partial- or non-weight bearing, very heavy, or have other physical limitations. Transfers from bed to chair (wheel chair, Geri or cardiac chair), chair or floor to bed, or for bathing and toileting. Increases residents' safety and comfort during transfer.

**Points to Remember:** May require 2 or more caregivers. Some residents can use the device without assistance. May be quicker to use than portable device. Motors can be fixed or portable (lightweight). Device can be operated by hand-held control attached to unit or by infrared remote control. Ensure lifting device is in good working order before use and is rated for the load weight to be lifted.

References: 13, 16, 39, 40, 47, 51, 74, 75, 78, 85, 88, 90, 94

#### Lateral Transfer; Repositioning

Activity: Resident Handling

**Description:** Convertible wheelchair or Geri chair to stretcher



When to Use: For lateral transfer of residents who are partial- or non-weight bearing. Eliminates the need to perform lift transfer in and out of wheelchairs.

**Points to Remember:** Two caregivers are required to perform lateral transfer. Additional assistance for lateral transfer may be needed depending on residents status, e.g., for heavier or noncooperative residents. Wheelchairs that convert to stretchers may also have a mechanical transfer aid built in for bed-to-stretcher or stretcher-to-bed type transfers. Motorized height-adjustable devices are preferred to those adjusted by crank mechanism to minimize physical exertion and risk of musculoskeletal injury to the caregiver. Always ensure device is in good working order before use and is rated for the load weight to be transferred. Ensure wheels on equipment are locked. Ensure transfer surfaces are at same level and at a height that allows caregivers to work at waist level to avoid extended reaches and back flexion.

References: 16, 26, 42

# **Resident Lifting**

Activity: Resident Handling

**Description:** Portable compact lifts



When to Use: Lifting residents who are totally dependent, partialor non-weight bearing, or have other physical limitations. Transfers from bed to chair (wheelchair, Geri or cardiac chair), chair or floor to bed, chair to car, lateral transfers, or for bathing and toileting. Increases resident safety and comfort during transfer. Can be used where space or storage is limited.

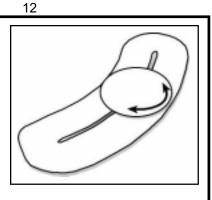
**Points to Remember:** May require 2 or more caregivers. Look for a device with a variety of slings, lift height range, battery portability, hand-held control, emergency shut-off, manual override, and boom pressure-sensitive switch. Having multiple slings allows one of them to remain in place while resident is in bed or chair for only a short period reducing the number of times a caregiver lifts and positions the resident. Always ensure lifting device is in good working order before use and rated for the load weight to be lifted. Electric/battery powered lifts are preferred to crank or pump type devices to allow a smoother movement for the resident and less physical exertion and risk of musculoskeletal injury to the caregiver.

**References:** 13, 16, 51, 69, 76

# Lateral Transfer in Sitting Position

Activity: Resident Handling

**Description:** Transfer boards – wood or plastic (some with movable seat)



When to Use: Transferring (sliding) residents who have good sitting balance and are cooperative from one level surface to another, e.g., bed to wheelchair, wheelchair to car seat or toilet. Can also be used by residents who require limited assistance but need additional safety and support. Movable seats increase resident comfort and reduce incidence of tissue damage during transfer.

**Points to Remember:** Ensure clothing is present between the resident's skin and the transfer device. The seat may be cushioned with a small towel for comfort. May be uncomfortable for larger residents. Usually used in conjunction with gait belts for safety depending on resident status. Ensure boards have tapered ends, rounded edges, and appropriate weight capacity. Ensure wheels on equipment are locked and transfer surfaces are at same level. Remove lower bedrails from bed and remove arms and foot rests from chairs as appropriate.

References: 13, 16, 57, 86, 90, 94, 97, 113

#### Lateral Transfer in Sitting Position

Activity: Resident Handling

**Description:** Transfer slings

When to Use: Transferring residents who are partially dependent, cooperative, have some weight-bearing capacity, can sit up unaided and are able to bend hips, knees, and ankles. Transfers from bed to chair, or chair to chair, chair or toilet.

**Points to Remember:** Can be used by 1 or 2 caregivers with pivot or transfer disc to assist transfer as necessary. Place sling under resident's hips. Caregiver(s) *support* resident during the transfer. Use for short distance transfers only. Sling should not be used to lift residents. Position sling so as not to dig into or slip off of resident. Ensure sling is in good condition before use and resident is wearing non-slip clothing. Adjust bed so resident's feet are flat on floor. Use smooth motion by moving feet while pivoting.

References: 13, 90, 97

### Transfer from Sitting to Standing Position

Activity: Resident Handling

**Description:** Powered sit-to-stand or standing-assist devices.



When to Use: Lifting residents who are partially dependent, have some weight-bearing capacity, are cooperative, can sit up on the edge of the bed with or without assistance, and are able to bend hips, knees, and ankles. Transfers from bed to chair (wheel chair, Geri or cardiac chair), or chair to bed, or for bathing and toileting. Can be used for repositioning where space or storage is limited.

**Points to Remember:** Usually requires 1 caregiver. Look for a device that has a variety of sling sizes, lift-height range, battery portability, hand-held control, emergency shut-off, and manual override. Ensure lifting device is in good working order before use and is rated for the load weight to be lifted. Electric/battery powered lifts are preferred to crank or pump type devices to allow a smoother movement for the resident, and less physical exertion and risk of musculoskeletal injury to the caregiver.

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References: 13, 16, 33, 38, 43, 46, 48, 86, 90, 94, 113

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#### Transfer from Sitting to Standing Position

Activity: Resident Handling

Description: Lift cushions and lift chairs

When to Use: Transferring residents who are weight-bearing and cooperative but need assistance when standing and ambulating. Can be used for independent residents who need an extra boost to stand. Can aid resident independence.

**Points to Remember:** Lift cushions use a lever that activates a spring action to assist residents to rise up. Lift cushions may not be appropriate for heavier residents. Lift chairs are operated via a hand-held control that tilts forward slowly, raising the resident. Residents need to have physical and cognitive capacity to be able to operate lever or controls. Always ensure device is in good working order before use and is rated for the load weight to be lifted.

References: 13



Activity: Resident Handling

**Description:** Stand-assist devices; can be fixed to bed or chair or be free-standing

When to Use: Transferring residents who are weight-bearing and cooperative and can pull themselves up from sitting to standing position. Can be used for independent residents who need extra boost to stand. Can aid resident independence.

**Points to Remember:** Check that device is stable before use and is rated for resident weight to be supported. Ensure frame is firmly attached to bed, or if relies on mattress support that mattress is heavy enough to hold the frame.

References: 13, 16, 90, 113



#### Transfer from Sitting to Standing Position; Ambulation

Activity: Resident Handling

**Description:** Gait belts/transfer belts with handles

When to Use: Transferring residents who are partially dependent, have some weight-bearing capacity, and are cooperative. Transfers such as bed to chair, chair to chair, or chair to car; when repositioning residents in chairs; supporting residents during ambulation; and in some cases when guiding and controlling falls.

**Points to Remember:** May require 1 or 2 caregivers. Belts with padded handles are easier to grip and increase security and control. Always transfer to resident's strongest side. Use rocking and pulling motion rather than lifting when using a belt. Belts may not be suitable for ambulation of heavy or non-weight bearing residents or residents with recent abdominal or back surgery, abdominal aneurysm, etc. Should not be used for lifting residents. Ensure belt is securely fastened and cannot be easily undone by the resident during transfer (i.e., Velcro fasteners). Ensure a layer of clothing is between residents' skin and the belt to avoid abrasion. Keep resident as close as possible to caregiver during transfer. Lower bedrails, remove arms and foot rests from chairs, and other items that may obstruct the transfer.

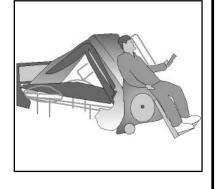
**References:** 3, 13, 16, 27, 29, 38, 41, 52, 57, 76, 87, 90, 91, 97, 113

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### Repositioning

Activity: Resident Handling

**Description:** Beds that convert to chairs



When to Use: Repositioning residents who are totally dependent, non-weight bearing, very heavy, or have other physical limitations. Can also be used to assist residents who are partially weight bearing from a sit-to-stand position.

**Points to Remember:** Additional friction-reducing devices may be required to reposition resident. Heavy duty beds are available for bariatric residents. Device should have easy-to-use controls located within easy reach of the caregiver, sufficient foot clearance, and wide range of adjustment. Electric motor operation is preferred to reduce physical exertion and risk of musculoskeletal injury to caregiver and to facilitate positioning of resident.

References: 16, 39, 54

# Transfer from Sitting to Standing Position

Activity: Resident Handling

#### Description:

Pivot discs or boards; some discs have a stand-assist device attached for independent residents

When to Use: Transferring residents who are partially dependent, have some weight-bearing capacity, and are cooperative. Transfers such as bed to chair, chair to chair, or chair to car. Helps caregivers perform transfers without twisting.

**Points to Remember:** May require 1 or 2 caregivers. The disc is placed on the floor and used to rotate the resident 90 degrees to a bed or chair. Lower bed so that resident's feet are supported on the floor before standing. Resident's feet should be in the center of the disc, not touching the outer rim. A transfer or gait belt can be used in addition to the disc. May not be appropriate for heavier residents. Ensure disc has non-slip material on either side. Ensure wheels on equipment are locked and transfer surfaces are at same level. Lower bedrails, remove arms and foot rests from chairs and other items that may obstruct the transfer.

References: 13, 29, 41, 90, 97

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### Repositioning

Activity: Resident Handling

**Description:** Electric powered height adjustable bed



When To Use: For all activities involving resident care, transfer, repositioning in bed, etc., to reduce caregiver trunk flexion when interacting with resident.

**Points to Remember:** Device should have easy-to-use controls located within easy reach of the caregiver, sufficient foot clearance, and wide range of adjustment. Heavy duty beds are available for bariatric residents. Beds raised and lowered with an electric motor are preferred over crank-adjust beds which require trunk flexion, force, and repetitive motion to use.

References: 29, 57, 67, 68, 70, 73, 79, 80, 94, 107

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#### Repositioning

Activity: Resident Handling

**Description:** Trapeze bar



When to Use: Reposition residents that have the ability to assist the caregiver during the activity, i.e., residents with upper body strength and use of extremities, who are cooperative and can follow instructions.

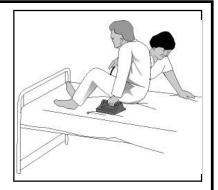
**Points to Remember:** Residents use device by grasping bar suspended from an overhead frame to raise themselves up and reposition themselves in a bed. Heavy duty trapeze frames are available for bariatric residents. Ensure that bed wheels are locked, bedrails are lowered and bed is adjusted to caregiver's waist height to reduce back flexion.

References: 13, 75, 90, 113

#### Repositioning

Activity: Resident Handling

**Description:** Hand blocks and push up bars.



When to Use: Repositioning residents that have the ability to assist the caregiver during the activity, i.e., residents with upper body strength and use of extremities, who are cooperative and can follow instructions.

**Points to Remember:** Blocks also enable residents to raise themselves up and reposition themselves in bed. Bars attached to the bed frame serve the same purpose. May not be suitable for heavier residents. Ensure that bed wheels are locked, bedrails are lowered, and bed is adjusted to caregiver's waist height to reduce back flexion.

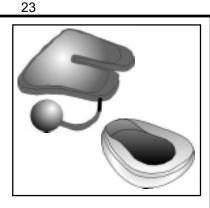
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References: 13, 57

#### Repositioning

Activity: Resident Handling

**Description:** Pelvic lift devices (hip lifters)



When to Use: To assist residents who are cooperative and can sit up with or without assistance, to position on a special bed pan. May reduce need for extra toileting.

**Points to Remember:** Device is positioned under hips and inflates like a pillow to lift hips. Use correct body mechanics, lower bedrails and adjust bed to waist height to reduce back flexion.

References: 13, 27

Ambulation

Activity: Resident Handling

**Description:** Ambulation assist device



When to Use: For residents who are weight bearing and cooperative and who need extra security and assistance when ambulating. Increases resident safety during ambulation and reduces risk of falls.

**Points to Remember:** Usually requires one caregiver. The device supports residents as they walk and push it along during ambulation. Ensure height adjustment is correct for resident before ambulation. Ensure device is in good working order before use and rated for the load weight to be lifted. Apply brakes before positioning resident in or releasing resident from device.

References: 13, 16, 28

#### Bathtub, Shower, and Toileting Activities

Activity: **Resident Handling** 

**Description:** Height-adjustable bathtub and easy-entry bath tubs

When to Use: Bathing residents who sit directly in the bathtub, or to assist ambulatory residents climb more easily into a low tub, or easy-access tub. Bathing residents in portable-powered or ceilingmounted lift device using appropriate bathing sling. Reduces risk of back and shoulder injuries to caregiver and to those who clean the tub after use. Increases resident safety and comfort.

Points to Remember: The tub can be raised to eliminate bending and reaching for the caregiver. Use correct body mechanics, and adjust the tub to waist height to reduce back flexion, when performing hygiene activities.

References: 13, 33, 94

#### Bathtub, Shower, and Toileting Activities

Activity: Resident Handling

**Description:** Height-adjustable shower gurney or lift bath cart with waterproof top

When to Use: For bathing non-weight bearing residents who are unable to sit up. Transfer resident to cart with lateral transfer boards or other friction-reducing devices.

Points to Remember: The cart can be raised to eliminate bending and reaching to the caregiver. Feet and head supports are available for resident comfort. May not be suitable for bariatric residents. Look for carts that are power-driven to reduce force required to move and position device.

References: 13, 29, 98

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#### Bathtub, Shower, and Toileting Activities

Activity: **Resident Handling** 

**Description:** Built-in or fixed bath lifts

When to Use: Bathing residents who are partially weight bearing, have good sitting balance, can use upper extremities (have upper body strength), are cooperative, and can follow instructions. Useful in small bathrooms where space is limited.

Points to Remember: Ensure that seat raises so resident's feet clear tub, easily rotates, and lowers resident into water. May not be suitable for heavy residents. Always ensure lifting device is in good working order before use and rated for the load weight to be lifted. Choose device with lift mechanism that minimizes physical effort by caregiver when raising and lowering device.

References: 28, 90, 108, 113

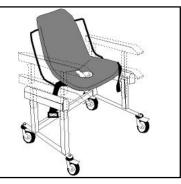


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#### Bathtub, Shower, and Toileting Activities

Activity: **Resident Handling** 

Description: Shower and toileting chairs



When to Use: Showering and toileting residents who are partially dependent, have some weight bearing capacity, can sit up unaided, and are able to bend hips, knees, and ankles.

Points to Remember: Ensure that wheels move easily and smoothly; chair is high enough to fit over toilet; chair has removable arms, adjustable footrests, safety belts, and is heavy enough to be stable, and that the seat is comfortable, accommodates larger residents, and has a removable commode bucket for toileting. Ensure that brakes lock and hold effectively on at least two wheels and that weight capacity is sufficient for resident handling.

References: 13, 29, 43, 90, 108



#### Bathtub, Shower, and Toileting Activities

Activity: **Resident Handling** 

**Description:** Bath boards and transfer benches

When to Use: Bathing residents who are partially weight bearing, have good sitting balance, can use upper extremities (have upper body strength), are cooperative, and can follow instructions. Independent residents can also use these devices.

Points to Remember: To reduce friction and possible skin tears, use clothing or material between the resident's skin and the board. Can be used with a gait or transfer belt and/or grab bars to aid transfer. Back support and vinyl padded seats add to bathing comfort. Look for devices that allow for water drainage and have height-adjustable legs. May not be suitable for heavy residents. Ensure wheels on equipment are locked, transfer surfaces at same level, and device is securely in place and rated for load to be transferred. Remove arms and foot rests from chairs as appropriate and ensure that floor is dry.

References: 13, 29, 90, 108

#### Bathtub, Shower, and Toileting Activities

Activity: **Resident Handling** 

Description Grab bars and stand assists; can be fixed or mobile

When to Use: When toileting, bathing, and/or showering residents who need extra support and security. Residents must be partially weight bearing, able to use upper extremities (have upper body strength), and be cooperative. Independent residents can also use these devices.

Points to Remember: Movable grab bars on toilets minimize workplace congestion. Ensure bars are securely fastened to wall before use.

References: 108, 113



Activity: **Resident Handling** 

Description: Long-handled extension tools on hand-held shower heads, wash or scrub brushes

When to Use: When bathing or showering residents.

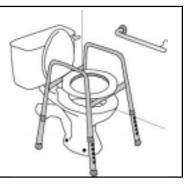
Points to Remember: These devices reduce the amount of bending, reaching, and twisting required when washing feet, legs, and trunk of residents. Residents who are independent can also use these devices to facilitate personal hygiene activities.

References: 13, 29, 44, 105

#### Bathtub, Shower, and Toileting Activities Activity:

**Resident Handling** 

**Description:** Toilet seat risers

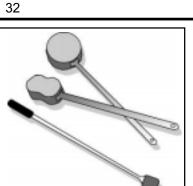


When to Use: For toileting partially weight-bearing residents who can sit up unaided, use upper extremities (have upper body strength), are able to bend hips, knees, and ankles, and are cooperative. Independent residents can also use these devices.

Points to Remember: Risers decrease the distance and amount of effort required to lower and raise residents. Grab bars and height-adjustable legs add safety and versatility to the device. Ensure device is stable and can accommodate resident's weight and size.

References: 13, 80, 113







#### Weighing

Activity: Resident Handling

Description: Scales with ramp to accommodate wheelchairs; portable-powered lift devices with built-in scales; beds with built-in scales.

When to Use: To reduce the need for additional transfer of partialor non-weight-bearing or totally dependent residents to weighing device.

**Points to Remember:** Some wheelchair scales can accommodate larger wheelchairs. Built-in bed scales may increase weight of the bed and prevent it from lowering to appropriate work heights.

References: 13, 43, 57, 71, 94

# Guiding and Slowing Falls

Activity: Resident Handling

**Description:** Method for guiding and slowing falls

When To Use: When resident is falling.

**Points to Remember:** The use of transfer or gait belts may assist the caregiver in guiding the fall. Hold onto the belt/handles and slowly lower the resident to the floor using correct body mechanics. Reviewing resident assessments and watching for signs of weakness are effective ways of preventing falls. Keep back straight, tighten abdominal muscles, bend legs, and stay close to resident if safe to do so. Do not attempt to stop the fall abruptly as this may contribute to caregiver injury.

References: 13, 56, 76, 113

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#### Lifting from the Floor

Activity: Resident Handling

**Description:** Methods to lift residents from floor

When To Use: After a resident fall.

**Points to Remember:** Assess resident for injury prior to lifting. If resident cannot stand with minimal assistance, use a powered portable or ceiling-mounted lift device to move resident. If resident can regain standing position with minimal assistance, use gait or transfer belt with handles to aid resident. If manual assistance is required insure adequate number of caregivers are available to provide needed assistance. Use 2 or more caregivers when assisting larger residents. Keep back straight, bend legs, and stay as close to resident as possible.

References: 13, 16, 27, 29



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### Repositioning in Chair

Activity: Resident Handling

**Description:** Variable position Geri chairs



When to Use: Repositioning partial- or non-weight-bearing residents who are cooperative.

**Points to Remember:** One caregiver can assist if resident has upper extremity strength in both arms. If resident cannot assist to reposition self in chair, use at least 2 caregivers and frictionreducing device. Wheels on chair add versatility. Ensure that chair is easy to adjust, move, and steer. Lock wheels on chair before repositioning. Remove trays, foot rests, and seat belts where appropriate. Ensure device is rated for the resident weight.

References: 16, 31, 94



#### Various Activities of Daily Living and Bedside Assistance

Activity Description: Various Activities of Daily Living

**Description:** Work practices for feeding, dressing, and grooming

**When to Use:** During feeding, dressing, personal hygiene tasks, vital sign assessment, and other bedside assistance.

*Bedside Assistance:* Lower bed rails, position resident as close to edge as safely possible. Sit or stand as close as possible to resident's side and face resident. Adjust tables and electric beds to a height to allow caregivers to work at waist level and place supplies close by to avoid back flexion and twisting. Gather supplies in advance and place them on a table that is positioned perpendicular to the resident. Avoid reaching across resident; rather, walk to other side. Carry objects close to the body. Provide adaptive equipment for resident use when appropriate to increase independence and reduce assistance from caregiver.

Feeding: Cut food before placing in front of resident.

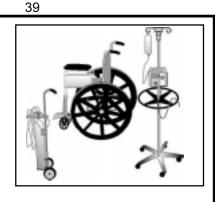
*Dressing and grooming:* Ensure that resident's feet are flat on the floor or a stool for balance when sitting. Place weaker limb in pant or sleeve first. Use appropriate adaptive equipment for dressing, grooming and oral hygiene.

References: 56, 99, 100, 101, 102, 103, 104

#### Activities of Daily Living

Activity: Transporting Equipment

**Description:** Work methods and tools to transport equipment



When to Use: When transporting assistive devices and other equipment

*Oxygen tanks:* Use small cylinders with handles to reduce weight and allow for easier gripping. Secure oxygen tanks to transport device.

Medication pumps: Use stands on wheels.

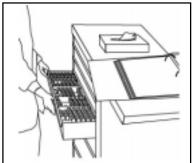
*Transporting equipment*: Push equipment, rather than pull, when possible. Keep arms close to the body and push with whole body and not just arms. Remove unnecessary objects to minimize weight. Avoid obstacles that could cause abrupt stops. Place equipment on a rolling device if possible. Take defective equipment out of service. Perform routine maintenance on all equipment.

References: 16, 29, 43, 82

# Activities of Daily Living

Activity: Dispensing medications

**Description:** Low profile medication cart and cartridge pill dispenser



When to Use: Dispensing medications. The cart increases accuracy and reduces time required to perform task.

*Medications cart:* Sort medications by day and time. Low profile carts with easy-open side drawers are recommended to accommodate hand height of shorter nurses.

*Cartridge dispenser*: Use cartridges with a "flip top" to store medications until dispensed rather than foil wrapped doses or small bottles. Individually wrapped medications in foil and paper may require high finger forces and a sharp object to break the seal.

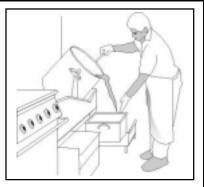
References: 43, 56, 92, 106

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# Pouring Liquids

Activity: Dietary and Housekeeping

**Description:** Pouring containers that tilt



When to Use: In dietary and housekeeping areas when pouring soups or other liquid foods that are heavy, and in housekeeping areas when emptying buckets with floor drain arrangements. Reduces risk of spills and burns, speeds process, and reduces waste.

**Points To Remember:** Tilt handle or mechanism should allow the worker to reach it without bending and be positioned to assist in controlling the weight of the container and liquid. If the worker stands for more than 2 hours per day, shock-absorbing floors or insoles will minimize back and leg strain. With hot liquids, ensure a splash guard is included.

References: 43

#### Hand Tools

#### Activity:

Dietary, Laundry, Housekeeping and Maintenance

Description: Select and use properly designed tools

When to Use: When selecting tools for the kitchen, housekeeping. laundry and maintenance areas. Enhances tool safety, speeds process, and reduces waste.

Points To Remember: Handles should fit the grip size of the user. If tool must be used with a bent wrist, purchase bent-handled tools. Minimize tool weight. Select tools that have minimal vibration or vibration damping devices. Implement a regular maintenance program for tools to keep blades sharp and edges and handles intact. Always wear the appropriate personal protective equipment.

References: 34

# Linen Carts

Activity: Laundrv

Description: Spring loaded carts that automatically bring linen within easy reach



When to Use: Moving or storing linen. Speeds process for handling linen, and reduces wear on linen due to excessive pulling.

**Points to Remember:** Select a spring tension that is appropriate for the weight of the load. Carts should have wheel locks and height-appropriate handles that can swing out of the way. Heavy carts should have brakes.

References: 14, 35, 43, 56, 59, 64, 79, 92, 94

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#### Storage and **Transfer of Food** and Supplies

Activity: Dietary, Laundry, Housekeeping and Maintenance

Description: Use of carts

When to Use: When moving food trays, cleaning supplies, equipment, and maintenance tools. Speeds process for accessing and storing items.

Points to Remember: Placement of items on the cart should keep the most frequently used and heavy items within easy reach between hip and shoulder height. Carts should have full-bearing wheels of a material designed for the floor surface in your facility. Cart handles that are vertical, with some horizontal adjustability will allow all employees to push at elbow height and shoulder width. Carts should have wheel locks. Handles that can swing out of the way may be useful. Heavy carts should have brakes. Balance loads and keep loads under cart weight restrictions. Ensure stack height does not block vision.

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### Handling Bags

Activity: Laundry, Housekeeping, and Maintenance

**Description:** Equipment and practices for handling bags



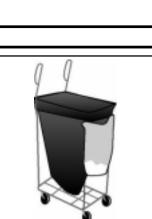
When to Use: When handling laundry, trash and other bags. Reduces risk of items being dropped, and speeds process for removing and disposing of items.

Points to Remember: Receptacles that hold bags of laundry or trash should have side openings that keep the bags within easy reach and allow employees to slide the bag off the cart without lifting. Minimize the size and weight of bags and provide handles to decrease the strain of handling. Chutes and dumpsters should be at or below grade level. Provide automatic opening or hardware to keep doors open to eliminate twisting and awkward handling.

References: 11, 26, 35, 53, 56, 62, 63

References: 15, 35, 60, 84







### Reaching into Sink

Activity: Dietary, Housekeeping, and Maintenance

**Description:** Tools used to modify a deep sink for cleaning small objects

When to Use: Cleaning small objects in a deep sink.

**Points to Remember:** Place an object such as a plastic basin in the bottom of the sink to raise the work surface and reduce back flexion sink bottom. An alternative is to use a smaller porous container to hold small objects for soaking, transfer to an adjacent countertop for aggressive cleaning, and then transfer back to the sink for final rinsing. Store inserts and containers in a convenient location to encourage consistent use.

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References: 15, 36, 56, 109

# Loading or Unloading Laundry

Activity: Laundry

**Description:** Front-loaded washers and dryers



When to Use: When loading or unloading laundry from washers, dryers and other laundry equipment. Speeds process for retrieving and placing items, and minimizes wear-and-tear on linen.

**Points to Remember:** Washers with tumbling cycles separate clothes, making removal easier. For deep tubs, a rake with long or extendable handle can be used to pull linen closer to the door opening. Raise machines so that opening is between hip and elbow height of employees.

References: 15, 43, 45, 81

#### Cleaning Rooms (Dry Method)

Activity: Housekeeping

**Description:** Work methods or tools to clean resident rooms without water and chemical products

When to Use: When cleaning rooms, beds, counters, walls, and furniture; sweeping and dusting floors.

For hand tool use: Alternate leading hand; avoid tight and static grip; and use padded non-slip handles.

*For cleaning*: Raise beds to waist level; use knee pads when kneeling; use tools with long handles, step stools, or ladders to avoid overhead reaching; alternate tasks frequently; and use carts to transport cleaning supplies.

*Sweeping and dusting:* Use flat head duster or "doodle bugs" and push with leading edge; avoid lifting leading edge of duster; sweep all areas into one pile for pick up; and vacuum if possible.

References: 11, 26, 37, 50, 56, 60, 61, 63, 83



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#### Cleaning Rooms (Wet Method)

Activity: Housekeeping

#### **Description:**

Work methods and tools to clean resident rooms with water and chemical products



When to Use: When cleaning with water and chemical products; mopping; and using spray bottles.

For hand tool use: Alternate leading hand; avoid tight; static grip and use padded non-slip handles.

*For all cleaning*: Use chemical cleaners and abrasive sponges to minimize scrubbing force. Use kneepads when kneeling. Avoid bending and twisting. Use extension handles, step stools, or ladders for overhead needs. Use carts to transport supplies. Carry only small quantities and weights of supplies. Maintain all equipment regularly. Ventilation of rooms may be necessary when chemicals are used.

*Mopping:* Alternate mopping styles frequently (e.g. push/pull, figure 8 and rocking side to side). Use rubber-soled shoes in wet areas to prevent slipping. Wheeled buckets should have functional brakes. Use dry mop vs. wet mop to minimize back strain. *Cleaning wheelchairs*: Push wheelchair up a ramped platform to perform work at waist height.

*Spray bottles:* Use trigger handles long enough for the index and middle fingers. Avoid using the ring and little fingers. **References:** 11, 26, 37, 60, 61, 63, 83, 111, 112

# Cleaning Rooms (Electrical)

Activity: Housekeeping

**Description:** Work methods and tools to vacuum and buff floors



When to Use: Vacuuming and buffing floors.

*Buffing:* Buffers should have lightweight construction, triggers long enough to accommodate at least the index and middle fingers, adjustable handle height, and easy to reach controls.

*Vacuuming:* Vacuums should have lightweight construction, adjustable handle height, and controls that are easily accessed. Avoid short strokes by walking with the machine. Alternate leading hand and avoid tight grip. Use telescoping or extension handles for areas that are high, low, or far away. Remove vacuum bag when 1/2 to 3/4 full. Vacuums and powered devices are preferred over manual devices for moderate-to-long duration use. Heavy rolling canisters should have brakes.

*Emptying trash:* limit size of container to limit weight of load; dump carts of trash into receptacle at lower level for gravity assistance; use frame vs. solid can to prevent plastic bag from sticking to inside of container; avoid tying bag to frame; and place receptacles in unobstructed and easy to reach places.

References: 11, 26, 56, 62, 63, 109