

**PROPER POSITIONING AND TRANSFERRING OF A LOVED ONE, PATIENT OR RESIDENT REQUIRES HANDS-ON TRAINING BY A SKILLED HEALTH CARE PROFESSIONAL. THIS INFORMATION IS TO BE USED AS A GUIDELINE ONLY. PLEASE CONTACT A PHYSICAL THERAPIST OR OCCUPATIONAL THERAPIST FOR PROPER TRAINING ON POSITIONING AND TRANSFERING TO ENSURE THE SAFETY AND HEALTH OF BOTH THE PATIENT AND THE CAREGIVER.**

### **BED MOBILITY**

#### **GETTING INTO BED**

- Greet the resident. Explain what you are going to do to ensure they are comfortable and in agreement.
- Explain how the resident can assist in the movement.
- Sit the resident as far back on the bed as possible. If the resident uses an electric hospital or hi-low bed, ensure that the head of the bed is level for proper positioning.
- Place the arm nearest the pillow across their stomach. Cross the other arm in front of their body and reach for the bed.
- Slowly lower yourself down onto your side.
- Bring legs up onto the bed, so the resident is lying on their side.
- Gently roll and turn knees up so the resident is lying on their back.

#### **GETTING OUT OF BED**

- Greet the resident. Explain what you are going to do to ensure they are comfortable and in agreement.
- Explain how the resident can assist in the movement.
- Bring knees up and place feet flat on the bed.
- Turn onto side with knees bent.
- Reach arm across body. Move feet off the edge of the bed
- Use your arms to push into a sitting position.
- Assist the resident as needed by balancing and lifting with one hand under their shoulder. The other hand should guide the lower legs. Do not pull the resident by their hands
- If the resident uses an electric hospital or hi-low bed, consider elevating the head of the bed to assist bringing them into the sitting position. (ensure that the foot of the bed is level before beginning)
- Once the resident is in a sitting position, allow them to remain in this position for a few moments before attempting any further movements.

### **PULLING A RESIDENT UP IN BED**

- Greet the resident. Explain what you are going to do to ensure they are comfortable and in agreement.
- Explain how the resident can assist in the movement.
- Remove the resident's pillow from under their head and place it against the head of the bed to provide a cushion between the resident's head and the headboard.
- If adjustable, place the bed at a comfortable height for you and your co-worker. (ensure that the head of the bed is level before beginning)
- Utilize a lift sheet underneath the resident to support their head, neck, torso and buttocks.
- Ask the resident to bend their knees so they can assist by pushing with their feet.
- Count out loud to three. On three, lift the lift sheet and slide the resident up the bed

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## **TRANSFERS**

### **TRANSFER BELTS**

- A transfer belt is an assistive device used to securely hold onto the resident without pulling at the resident's joints or pinching their skin. Secure the transfer belt around the resident's waist and clasp in front. The belt should fit snugly and comfortably at the level of the resident's hips, leaving enough space between the belt and the resident's body for two fingers. There are 2 types of transfer belts (1) narrow belt without handles/gait belt (2) wide belt with handles/walking belt.

### **STAND-PIVOT TRANSFERS**

- May include, but not limited to:

To/From	Wheelchair/Bed
	Commode/Bed
	Wheelchair/Toilet
	Wheelchair/Tub Bench
	Wheelchair/Dining Chair
	Wheelchair/Couch

### **ONE PERSON STAND-PIVOT TRANSFER**

- Greet the resident. Explain what you are going to do to ensure they are comfortable and in agreement.
- Explain how the resident can assist in the movement.
- Make certain all surfaces are stabilized and the wheelchair is locked.
- The wheelchair should be at a 45 degree angle to the other surface.
- Secure the transfer belt around the resident's waist and clasp in front.
- Either ask the resident to scoot to the edge of the surface or help them there with mini lifts or assisted scooting. Assist the resident so that he or she is able to shift his or her hips forward by placing your hands under the resident's buttocks and sliding him or her to the edge of the seat
- Place one foot in front of the other and lower your self to the resident's level. While giving the resident a hug, grasp the belt from the back, or by the handles with both your hands.
- Rock forward and back with the resident while counting out loud to three.
- On three, gently pull the resident over his or her feet, using your legs not back to support the movement.
- Keep the resident's body close to yours.
- With small steps, turn your feet with resident in the direction you wish to move. Avoid twisting at the waist.
- Resident can sit when they feel the wheelchair against the back of the legs, encourage resident to reach for the surface for a controlled sit.
- Lower self with resident as he or she sits down.
- Remove transfer belt.

### **TWO PERSON STAND-PIVOT TRANSFER**

- A two-person transfer should be thought of as a one-person assisted transfer. It is the same as one-person transfer but now there is a "leader" and an "assistant". Before the transfer begins, you must decide who will be in control of the transfer. The leader performs same steps as a one-person transfer.
- Greet the resident. Explain what you are going to do to ensure they are comfortable and in agreement.
- Explain how the resident can assist in the movement.
- Make certain all the surfaces are stabilized and the wheelchair is locked.
- If transferring to/from a wheelchair, the wheelchair should be at a 45 degree angle to the other surface.
- Secure the transfer belt around the resident's waist and clasp in front.

- Either ask the resident to scoot to the edge of the surface or help them there with mini lifts or assisted scooting. Assist the resident so that he or she is able to shift his or her hips forward by placing your hands under the resident's buttocks and sliding him or her to the edge of the seat.
- The leader places one foot in front of the other and lower yourself to the resident's level. While giving the resident a hug, grasp the belt from the back, or by the handles with both your hands.
- The assistant places one hand on the front of the belt and one hand in back.
- Together the leader and the assistant rock forward with the resident and count to three out loud.
- On three, the leader and the assistant gently pull the resident to a standing position using your legs not back to support the movement.
- Once the resident is steady, the assistant is free to help with positioning, dressing, toileting, etc.
- If transferring to another surface, the leader and assistant help the resident take small steps turning in the direction of the move.
- The resident can sit when he or she feels the chair or bed at the back of his or her legs. Encourage resident to reach for the surface for a controlled sit.
- The leader and assistant will lower themselves with the resident as he or she sits down.
- The transfer belt is removed.

### **TRANSFERRING IN AND OUT OF A CAR: SPECIAL CONSIDERATIONS FOR A STAND-PIVOT TRANSFER**

- Greet the resident. Explain what you are going to do to ensure they are comfortable and in agreement.
- Explain how the resident can assist in the movement.
- Assess the width/opening of the car door, the height of the car seat and the head clearance for any special modifications that may have to be made.
- Put the front seat of the car as far back as possible.
- From wheelchair to car: Perform a stand-pivot transfer as described above, placing their buttocks onto the seat first. Be sure their buttocks are as far back towards the driver's side as possible. Then lift their legs into the car.
- From car to wheelchair: First, lift their legs out of the car and onto the ground. Then perform a stand-pivot transfer as described above.

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### **POSITIONING A RESIDENT IN A CHAIR**

- Greet the resident. Explain what you are going to do to ensure they are comfortable and in agreement.
- Explain how the resident can assist in the movement.
- If in a wheelchair, lock both brakes.
- Option 1: Have the resident fold their arms across their chest. Stand behind the resident, bend your knees, and wrap your arms around them hugging their torso securely. Straighten your legs, lifting the resident's torso up and back in the chair.
- Option 2: Place the resident's feet flat on the floor. Place their hands on the armrests of the chair. Ask them to push themselves up/slide back into the chair.
- When properly positioned in the chair, ensure that the resident has good posture, is sitting upright and their legs are aligned properly. Utilize pillows for support if needed.

### **SIT TO STAND TRANSFER**

- Greet the resident. Explain what you are going to do to ensure they are comfortable and in agreement.
- Explain how the resident can assist in the movement.
- If the resident is unable to assist, sit to stand transfer is the same as the first part of a stand pivot transfer. See above for instructions.
- If the resident is able to assist provide verbal cuing and assistance as needed.
- Position the resident so they are seated at the edge of the bed or chair. With both hands on armrests, scoot to the edge of the chair.
- Place feet under hips as far as possible. Be sure the resident's feet (with shoes on) are securely on the floor
- Lean forward, lining up the nose over toes. Push on armrests while leaning forward.
- On three, have the resident push themselves up to a standing position.
- Do not let them reach or grab for a walker until they are standing.

## **GUARDING AMBULATION**

- Greet the resident. Explain what you are going to do to ensure they are comfortable and in agreement.
- Stand to the side and slightly behind the resident.
- If the resident walks with a cane, stand on the opposite side of the cane.
- Keep one hand near the center of their back near the waistline on the transfer/gait belt and the other near the resident's upper arm.
- Watch the resident's foot placement to help anticipate loss of balance.
- Stay close to the resident.

## **SPECIAL CONSIDERATIONS FOR TRANSFERRING A RESIDENT WITH MEMORY IMPAIRMENT**

- Approach from the front, smile, maintain good eye contact.
- Speak in a low, soft voice.
- Provide a gentle touch.
- Be calm and reassuring.
- Utilize one step commands.
- Seek help if needed.
- Greet the resident. Explain what you are going to do to ensure they are comfortable and in agreement.
- Explain how the resident can assist in the movement.