

PURPOSE: To reposition the client to the back of

the chair

Number of caregivers: Two

Weight considerations: No weight restriction

Level of difficulty: Transitional













NECESSARY PROCEDURES TO ENSURE SAFE CLIENT

BEFORE BEGINNING A LIFT OR TRANSFER

- 1. Check the pictogram.
- 2. Assess and prepare the client and the environment:
 - · Has their status changed
 - Do they need preparatory help, such as clearing a pathway, placing equipment (canes, walkers, etc.) within reach, or ensuring personal articles are in place.
 - · Does the client with emotional needs or cognitive or visual deficits (confusion, blindness, mental instability, aggression, etc.) need spoken instructions?
- 3. Assess your physical limitations (How are you feeling? Do you need a second person? Do you need to use a mechanical lift?)
- 4. Request assistance, if required.
- 5. Explain the procedure to the client and show them how to help, if possible, keeping instructions short and simple.
- 6. Follow the essential tips for safe and efficient body mechanics in the Employee Training Booklet.
- 7. After completing the technique, assess the client's comfort.



REPOSITIONING TRANSFER: HAMMOCK (1) CHAIR **TRANSITIONAL**

CONSIDER

Direction of Movement

Front-to-back, back-to-front, side-to-side, side-to-side (on the diagonal), or side-to-side (with pivot) = 90°, upright and forward to down and back, down and back to upright and forward.

CLIENT

Front-to-back

CAREGIVER

Side-to-side (on the diagonal) (2) Positioned at the back of the chair Upright and forward to back and down (4, 5, 6) Counterbalance movement

CONSIDER

Line of Movement

As close to the horizontal as possible.

CLIENT

Horizontal •

CAREGIVER

45° Counterbalance (4, 5, 6)

CONSIDER

Range of Movement

The span of movement that covers the distance between the start and end of the move. Distance of caregiver's move equals client's span of move.

CLIENT

How far do they need to be moved back in the chair?

CAREGIVER

Position both feet (with thighs touching the chair) in a side-toside stance at the back of the chair. End foot should be positioned where client's buttocks will rest upon completion of the move (1). Next, rotate start foot out to a 45° angle from the back of the chair so that the pelvis, knees and feet are aligned and facing the opposite corner of the chair (2). To achieve optimal alignment, allow the toe of the end foot to rotate inward. Now, with body positioned in this 45° angle, move feet sideways to straddle the chair's wheel (4).

CONSIDER

Point of Force Application

The point where the force is applied to the client's body.

CLIENT

Buttocks.

CAREGIVER

At the buttocks level, in a wide grasp, roll repositioning draw sheet to produce tension and slightly raise client's buttocks off chair. Grip should see the wrists neutral and palms either down or rotated slightly upward with elbows flexed (4).

CONSIDER

Command and Count

Verbal command given by caregiver.

CLIENT

CAREGIVER

CHEST UP, BACK STRAIGHT, ARMS BRACED... BRACE OFF (5)... 1, 2, 3, PUSH (6)

CONSIDER

Force Production

The force needed to effect movement, which is relayed from your feet, knees and/or hands through the braced body and arms to the point of force application. For example, friction and weight will dictate the amount of force required.

CLIENT

Reduce friction and weight by:

- Bracing off (raises client slightly off chair).
- Using a slippery repositioning draw sheet.
- When possible, have client assist by pushing with arms.

CAREGIVER

Brace off. Set body weight as a unit in a backward direction to raise the client off the chair (5). Next, PUSH equally through both feet as a unit back and down (counterbalance movement) (6). The simultaneous 45° angle counterbalance movements will cause the client to move to the back of the chair.

CONSIDER

Tips

CLIENT

- Chair brakes must lock.
- Exercise control if chair is light.

CAREGIVER

- In the start position, ensure eyes, head, shoulders, hips, knees and feet are aligned at a 45° angle to the chair and body is upright and forward over the client (3, 4).
- PUSH equally through both feet setting body weight back and down.
- Do not sit down, pull with arms or shift body to the back of the chair by pushing through only the start foot.
- Your arms will move to the back of the chair with the client, however, your body should move at a 45° angle away from the chair.

CONSIDER

Contraindications

CLIENT

• Lack of trunk control. The trunk may be positioned over an over-bed table to provide support.

CAREGIVER

CONSIDER

Options

CLIENT

CAREGIVER

• A third caregiver may place themselves in front of the chair in a proposal push position. This caregiver can provide trunk support, block the knees to counteract any forward movement or actively participate in the transfer.



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