

Version No.

Safe Work Procedure

Task: Assisting a falling or fallen patient

Form Number	Procedure Number	Version	Issue Date	Review Date	Approved by
WHS-F201	WHS-P201	8.0	02/06/2017	02/06/2019	Chief Executive Officer

This form should be completed in accordance with the 'How to develop a Safe Work Procedure' operating procedure WHS-P201

SWP Review Date:

STOP & THINK

SWP Issue Date:



What are the hazards of the task?

Muscuoskeletal injury

24/04/2018

Falls injury to patient

What are the safety rules of the task?

- Encourage patient to participate in the task (if able)
- Minimum of two staff must operate Hovermatt/ HoverJack or Arjo Mover Hoist

24/04/2020

- Safe working load of the Arjo Maxi Mover 227kgs
- Safe working load of HoverJack 544kgs
- Safe working load of Hovermatt 544kg

What PPE do I need?



What equipment do I need?

- Arjo Maxi Mover Hoist and Sling or
- Hovermatt, HoverJack and air supply pump

Steps of the Task

Assisting a falling patient

- A patient may be assisted when falling to the floor as long as it does not cause further harm to the patient and/or the staff member involved in the manual handling technique (only assist if they are falling toward you)
- 2. Keep your back straight, place one foot in front of the other
- 3. Bend from the hips and knees which will maintain a broad base, this will ensure that you are supported whilst assisting the fallen patient
- 4. Ease the patient to the floor or allow them to slide down your body to the floor
- 5. Once the patient is on the floor, please follow "Assisting a fallen patient who is uninjured" or "Assisting a fallen patient who is injured or unable to assist themselves(see attached photos)

Assisting a fallen patient who is uninjured and who can assist

- 1. Explain procedure, and gain patient consent
- 2. Ensure that local area is free of clutter and hazard
- 3. Don personal protective equipment as necessary
- 4. Provide reassurance and support for the fallen patient



- 5. Assess the patient, their clinical and neurological observations musculoskeletal processes prior to moving the patient
- 6. If abnormalities are found escalate these to the Team Leader and notify the CMO for further assessment. Do not move the patient at this stage until the patient has been deemed stable to be move
- 7. Once the patient has been deemed as stable to be moved staff can proceed with assisting the patient to stand if the patient is normally able to stand without assistance
- 8. Firstly the patient needs be able to roll on their side as demonstrated in figure 1
- 9. The patient then needs to bend their elbow (the arm which is in contact with the ground) and to push up with the elbow whilst using the other hand to balance and to support the weight of the patient. (See figure 2)
- 10. The patient should now be able to put themselves onto their hands and knees. (See figure 3)
- 11. The patient can now move on hands and knees towards a chair and assisted to stand from this position with a member of staff. (See figure 4)
- 12. If the patient is unable to complete these steps then you will need to follow "Assisting a patient who is injured or is unable to assist themselves
- 13. Remove PPE, and perform appropriate hand hygiene
- 14. Complete Riskman documentation and follow Falls Prevention Management Policy and Post Fall Management.

Assisting a patient who is injured or is unable to assist themselves using the Maxi Move Hoist

- 1. Collect necessary equipmet
- 2. Introduce self to patient, explain procedure, and gain patient consent
- 3. Ensure that local area is free of clutter and hazard
- 4. Don personal protective equipment as necessary
- 5. Provide reassurance and support for the fallen patient
- 6. Assess the patients' observations, neurological and musculoskeletal processes prior to moving the patient
- 7. If abnormalities are found escalate these to the Team Leader and notify the CMO for further assessment. Do not move the patient at this stage until the patient has been deemed stable to be moved
- 8. Once the patient has been deemed as stable to be moved staff can proceed with a mechanical lift using an Arjo Maxi Move Hoist
- 9. Place a pillow under the patients head for comfort
- 10. Select an appropriate hoist sling as per sizing and manufacturers recommendations.
- 11. Place the sling in the correct position under the patient by rolling the patient from one side to the other
- 12. Bring the hoist towards the patient's legs opening the base of the hoist as required. The hoist should never be brought in from the angle of the patients head (Figure 5)
- 13. Lower the boom of the hoist to enable the attachment of the hoist sling to the clips on the hoist's boom
- 14. Ensure that the clips are secure and that the patient crosses their arms over their chest.
- 15. Raise the hoist to an appropriate level and mobilise the hoist to required position to return the patient back to a chair or bed. One person must be operating the hoist, and the second person must be providing support to the patients head and shoulders whilst being hoisted (Figure 6)
- 16. Once in position, lower the patient into the bed or chair to be able to release the sling from the hoist (Figure 7)
- 17. Release sling from hoist and remove from underneath the patient by rolling the patient from side to side (Figure 8)
- 18. Ensure the patient is comfortable and reposition as appropriate
- 19. Remove PPE, and perform appropriate hand hygiene
- 20. Return equipment to the appropriate storage area



21. Complete Riskman documentation and follow Falls Prevention Management Policy and Post Fall Management.

Assisting a patient who is injured or is unable to assist themselves using the HoverJack and HoverMatt

- 1. Retrieve HoverJack trolley(from level four near the lifts)
- 2. Assess the patient is conscious and has not sustained any obvious or suspected fractures / injuries before using this transfer
- 3. In the event that they have sustained suspected fractures, you may need use the HoverJack with a spinal board or Jordan frame with hoist (if available). If unsure, call for immediate assistance
- 4. If conscious inform patient of procedure
- 5. Roll the patient and position the slide sheet or HoverMatt, ensuring the patient is centred on matt (Fig. 9)
- 6. Transfer the patient onto the HoverJack using the inflated HoverMatt or slide sheet (Fig 10)
- 7. Close all red toggles on the HoverJack prior to inflation (Fig 11)
- 8. Inflate from the bottom chamber, working upwards, ensuring the chamber is fully inflated before moving to the next chamber (Fig 12 & 13)
- 9. When the HoverJack is fully inflated, position bed or stretcher parallel to the HoverJack and ensure all brakes are on (Fig 14)
- 10. Position slide board under HoverMatt if needed to bridge the gap (inflate matt first) or slide sheet (tip patient slightly)
- 11. Slightly lower bed or stretcher to transfer at a lower level than the HoverJack
- 12. If using the HoverMatt, inflate it and slide the patient onto the bed or stretcher feet first.
- 13. If using the slide sheet, position an additional slide sheet on the bed and slide patient over using the slide board and lateral transfer patient
- 14. Inflate HoverMatt and one staff member will push the patient towards the bed (Fig 15)
- 15. The other staff member will pull the HoverMatt over
- 16. Once on the bed, PAL roll the patient (if safe to do so), deflate the HoverMatt and remove (if not needed)
- 17. If using slide sheets, reposition as necessary and remove





You can do this safely by placing your arms underneath the patient's axillae and then placing one leg forward and allowing her to use it for support as you ease her to the floor. To help prevent injury to your lower back, bend at the knees as you help the patient to the floor.

Figure 1





Figure 5



Figure 2



Figure 4



Figure 6





