

Concordia Safe Patient Handling and Movement Program

Car (vehicle) Transfers: Transfer of a Responsive Patient out of the Front Seat to a Chair

Department (if applicable): Emergency	Written by: In collaboration with WFPS, Manitoba WS & H, Concordia Emergency Program	Approved by:	Date created: June 1, 2011	Date of last revision: Draft Nov 25 2011
Hazards <ul style="list-style-type: none"> *Potential for musculoskeletal injuries Signs and Symptoms include: Pain, tingling, numbness, tightness, swelling, and discomfort with increased risk of back and upper extremity injury.		Equipment <ul style="list-style-type: none"> Transfer Belt Transfer Chair or Wheel Chair Chair Transfer Board or Spinal Immobilization Board 2 Full Length Sheet Sliders or Mini Slider 	Training <ul style="list-style-type: none"> Initial orientation Training every 3 years or as required 	
Guideline <ul style="list-style-type: none"> Emergency staff may assist in removing a responsive patient from a vehicle based on their clinical judgment and the presenting situation (the patient presents to Emergency in a private vehicle instead of an ambulance). Emergency staff that have been trained may assist a patient getting out of a vehicle. Whenever possible, consider pulling the private vehicle into the ambulance bay for removal of the patient. This allows for comfort of staff during bad weather and closer proximity to necessary transfer equipment. A minimum of 2 staff members are required to perform this task, preferably 3, depending on the patient's physical capabilities. The nurse shall complete a brief neurological and musculoskeletal assessment prior to moving the patient. A patient that is responsive and unable to provide significant participation and effort should be transferred to a stretcher instead of a chair using 2 full length sliders and a spinal immobilization board. See Safe Work Procedure for transferring an unresponsive patient out of a vehicle. Emergency Staff members shall provide verbal cuing or minimal physical assistance to assist the patient in getting out of a vehicle if they are able to transfer independently. Sheet sliders are designed to slide patients. Do not use them for lifting. Never leave sliders under a patient. Remove when repositioning is complete. Manufacturer's instructions shall be followed for equipment use. Equipment is cleaned with hospital approved disinfectant after each use. Sliders, mechanical lift slings, and transfer belts can be taken to Concordia Place laundry if visibly soiled. Contraindications <ul style="list-style-type: none"> Emergency staff must assess the scene. If deemed unsafe for staff to remove the patient (i.e. chemical exposure, bariatric patient) call '911' and activate the Emergency Response System. During any patient transferring or movement task, if any caregiver is required to move more than 35 lbs of patient weight, then the patient should be considered to be fully dependent and assistive devices must be used for the transfer or movement. There is no 'safe maximum' a person can lift or move – the effort required is determined by weight, shape, position, and available grip and duration of the task. Know your personal and your helper's physical limitations. 				
Procedure <ul style="list-style-type: none"> Consider the weight and position of the patient you must move. Include the weight of any equipment you must also carry. Obtain the appropriate transfer equipment necessary to perform the transfer. Plan the safest route to move the patient and remove as many obstructions as possible. Explain to the patient what you are doing to reduce the risk of them suddenly changing position if they become startled. 				Completed



<p>Procedure (cont'd):</p> <ul style="list-style-type: none"> • Safe patient movement includes: <ol style="list-style-type: none"> 1. Using a wide stance to move the patient, moving either side to side or front to back (lunge position). 2. Ensure you have a good grip before moving. 3. Bend your knees and hips. 4. Try to keep a slight lordotic curve in your back (pelvic tilt); holding your shoulders back and elbows tucked in when moving a patient. 5. When moving a patient, push through your legs; if using a lunge position, push more through your front leg. 6. Do not hold your breath. 7. Turn by taking small steps with your feet. Do not twist your back when moving, lifting, or lowering a patient. • When 2 or more staff are coordinating a move, one person should lead the count. Note other team member's body mechanics during transfer and modify the procedure accordingly. 	
<p>Preparing for Task of Getting out of Vehicle</p> <ul style="list-style-type: none"> - Open the vehicle door and briefly assess the patient's physical status and responsiveness prior to moving the patient. - Obtain 1 or 2 additional staff members and the appropriate equipment. - If it is a small vehicle or car, a Chair Transfer Board and mini slider may be used to slide the patient out of the vehicle. If a mini slider is not available, 2 full length sliders may be used instead. - If it is a large vehicle or truck, a Spinal Immobilization Board with 2 full length sliders is necessary to safely transfer the patient from the front seat of the vehicle onto a chair or stretcher. - Perform inspection of equipment, looking for signs of wear. - Place sliders with smooth surfaces together, handles to the outside. - Place an appropriate sized transfer belt on the patient's waist. - Ensure the patient's seat in the vehicle is in the upright position. - Preferably using a transfer chair, position the foot of the chair at a 45 degree angle inside the doorway of the vehicle, allowing the third staff member to stand between the chair and the vehicle. Flip up the foot pedals and the arm of the transfer chair closest to the vehicle. If a wheelchair is used, the arm of the wheelchair closest to the vehicle must be removed. The brakes of the chair must be on. - Slide the transfer board under the patient's buttock closest to the doorway and angle it down on to the chair. - Slide the ends of the 2 full length sliders/ mini slider under the patient's buttock on top of the transfer board, ensuring the handles of the slider are on the top. See Safe Work Procedure for positioning sliders. - Provide clear direction to the patient and assisting staff members throughout the transfer. <p>Position Staff Members</p> <ul style="list-style-type: none"> - Staff member 1 is positioned beside the patient outside the door of the vehicle, in front of the transfer board and at the foot of the chair. - Staff member 2 is positioned inside the vehicle, on the opposite side of the patient (driver's side). - Staff member 3 (if present) is outside the vehicle, on the side of the wheelchair to assist with movement of the patient into the chair. - Staff members may need to adjust their positions based on the size of the vehicle and the space available for removal of the patient. 	
<p>Moving the Patient Out of the Vehicle</p> <p>Note: To prevent staff members from bending or twisting their backs, transfer of the patient using the chair transfer board onto the chair should be done in stages.</p> <p>Stage 1:</p> <ul style="list-style-type: none"> - Staff member 1 grasps horizontal loop of transfer belt with inside hand facing down and vertical loops with outside hand. - Staff member 2, who is inside the vehicle on the other side of the patient, holds transfer belt same as staff member 1 on the other side. 	



<p>Stage 1 (cont'd):</p> <ul style="list-style-type: none"> - Staff member 3 stands on the other side of the transfer chair, assisting with positioning of the transfer board and the patient during transfer. - The patient slumps forward to allow for their head to clear through the doorway of the vehicle during transfer. - On the count of three, staff member 1 who is pulling, shifts his/her weight backward from front to back leg, while staff member 2 who is pushing, shifts his/her weight forward inside the vehicle. The patient is slid onto the slider and transfer board in an upright sitting position until the patient's body is located outside of the vehicle and onto the transfer chair. Do not lift the patient. 	
<p>Stage 2:</p> <ul style="list-style-type: none"> - Staff member 3 positions his/herself behind the chair during the transfer, grabbing the back of the transfer belt to slide/ guide the patient back into the chair. - Staff member 1 then assists the patient to move their legs from the vehicle onto the foot pedals of the chair. The arm of the transfer chair is then positioned back in place or the arm of the wheel chair if reappplied. - Throughout the move, maintain elbows tucked into body, shoulders back with upper body upright and abdominal muscles slightly contracted. Do not extend arms/elbows beyond midline of the body. 	
<p>Comfort and positioning Ensure patient is comfortable and properly positioned.</p>	
<p>Guidance Documents/Standards/Applicable Legislation:</p> <ul style="list-style-type: none"> • Manitoba Workplace Safety and Health Regulations M.R. 217/2006 parts 2.1, 8, 10, 11, 39.5, 39.10 • Concordia Hospital Safe Work Procedures • Winnipeg Fire Paramedic Service General Safe Work Procedure, Lifting and Carrying 	<p>Task Monitoring:</p> <p>This task will be monitored periodically to ensure compliance and safety</p>

I have successfully understood the procedures for this transfer technique. I understand that these techniques are to be used to comply with the Concordia Safe Patient Handling and Movement Program. Failure to comply may result in disciplinary action.

***Failure to follow this safe work procedure will increase use of manual lifting, awkward postures and forceful exertions. This increases the risk of pain, stiffness and injury to the back, neck and arms of staff members.**

Employee Name: _____ Employee Signature: _____

Reviewed: _____ Date: _____