

GUIDELINE		TRANSFER BELT USE	
Team Name / Team Lead: SCHIPP Team, Regional Director Staff Development, Infection Prevention and Control	Approved By: Vice President – Human Resources	Issue Date: June 29 2016	Review Date: December 20 2017 Revised date: January 2 2018
<p>Potential Hazards:</p> <ol style="list-style-type: none"> 1) If guideline not followed, there is a risk for awkward bending, reaching and over-extension, which can lead to a musculoskeletal injury. 2) Depending on the workload, repetitive motions may be a factor. 3) Client or Caregiver may slip, trip and fall. 4) Client may grab or strike from reactive or defensive behavior. 5) Microorganism Transmission <p>Signs and symptoms of a musculoskeletal injury (MSI) can include pain, burning, swelling, stiffness, numbness/tingling, and/or loss of movement or strength in a body part. Report to supervisor.</p>		<p>Personal protective equipment / devices required / other safety considerations:</p> <ul style="list-style-type: none"> ➤ Transfer belt appropriate size for Client, designated for use, and laundered in between Clients. ➤ Appropriate Footwear for Caregiver(s) and Client ➤ Clothing that allows Caregivers movement ➤ Routine Practices; Additional Precautions as assigned <p>Training:</p> <ul style="list-style-type: none"> ➤ Initial Orientation and regular review ➤ Minimum of 3 year review or as required <p>Supporting Documents:</p> <ul style="list-style-type: none"> ➤ Follow Manufacturer’s Instructions for equipment ➤ SCHIPP.M1.001 Module 1 ➤ Video SCHIPP.RES.807 Transfer One Minimum Assist ➤ Video SCHIPP.RES.808 Transfer Two Minimum Assist 	
<p>Client Criteria and Supportive Information:</p> <ul style="list-style-type: none"> ➤ Client using a transfer belt should require minimal assistance to transfer by one or two Caregivers, no more than 16 kg./35 lb. of force to assist per Caregiver. Consult Rehab Services for use with clients of bariatric size. ➤ It is a handhold guide, not a lifting tool. ➤ It should fit around Client securely, so Client needs to be able to tolerate belt pressure ➤ Transfer Belt use, not advised for the following: <ul style="list-style-type: none"> ○ Fractured ribs, spine, upper part of pelvis, external pelvic fixation ○ Flail chest, chest tubes, open wounds in chest wall ○ Post abdominal or thoracic surgery, open abdominal wounds, internal organ damage, (lacerated liver/spleen) ○ Colostomies, Jejunostomy tubes, pegs, vacuum dressings ○ Significant Respiratory issues ○ Advanced Pregnancy ○ Severe Osteoporosis ○ Skin grafts or Muscle Flaps in Belt Area ○ Spinal Surgery ○ Peritoneal Dialysis 			



Set Up of Client with Belt:

- Apply belt from side of Client, not overhead and positioned snug around Client's waist in the narrowest part.
- Ensure that you face Client and are working at Client's waist height when applying belt.



Transfer Assist:

- Grasp loop at Client's furthest hip on outside with thumbs up, elbow tucked in.
- Caregiver(s) is close and at one side of the Client, (weaker side of applicable).
- Pressure is applied at Client's low back/upper pelvis in a forward and upward motion using wrist and forearm area.
- If a transfer belt is not advised and Client still requires minimal assist to stand, the pressure is applied in the same way/location, but using an open hand.
- Second hand can be positioned at Client's closest shoulder on standing to assist with balance.



Employers must ensure that workers are trained and follow this guideline.

This procedure may be monitored to ensure compliance and safety.

Failure to follow this safe work procedure will increase use of manual lifting, awkward postures and forceful exertions.

This increases the risk obtain, stiffness and injury to the back, neck and arms of Caregivers.

REPORT ANY HAZARDOUS SITUATION TO SUPERVISOR