







SCHIPP.M4.001

SAFE WORK PROCEDURE		LYING TO SITTING TO LYING INDEPENDENT AND SUPERVISED ASSIST	
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
Potential Hazards: none		Personal protective equipment / devices required / other safety considerations: <ul style="list-style-type: none"> ➤ Side rail, transfer pole, trapeze bar if applicable ➤ Adjustable bed, elevate head of bed ➤ Appropriate Footwear for Client and Caregiver ➤ Clothing that allows Caregivers' movement. 	
		Training: <ul style="list-style-type: none"> ➤ Initial Orientation and regular review Resources: <ul style="list-style-type: none"> ➤ Follow Manufacturer's Instructions for equipment ➤ SCHIPP.M1.001 Module 1 	
Client Criteria and Supportive Information: <ul style="list-style-type: none"> ➤ Can follow instruction. ➤ Full trunk, arm and leg strength and full balance. ➤ Requires no physical assist to move from lying to sitting to lying. May use aids to move. ➤ If supervised assist required, only cueing is required for Client to manage this procedure. ➤ Bed height should be at a height that allows Client's feet to rest firmly on floor when in sitting. 			
Steps to perform this task safely:			
Set Up:			
		Lying to Side Lying to Sitting Independent: <ul style="list-style-type: none"> ➤ Client crosses arm over chest so hand is resting on the mattress or side rail. ➤ Client pulls self over to roll onto side and puts heels over side of bed. ➤ Client pushes into mattress using elbow which is resting on the mattress. At the same time, pushes into mattress with hand of the top arm, raising trunk. ➤ While raising trunk, legs are moved over edge of bed, moving forward in sitting until feet are resting securely on floor. 	



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	<p>Lying to Side Lying to Sitting Supervised Assist:</p> <ul style="list-style-type: none"> ➤ Caregiver cues Client to bend knees slightly. ➤ Turn by crossing top arm over chest so that hand is resting on bed in front of her body or grasping a side rail and move heels over edge of bed. ➤ Head of bed may be elevated, if possible, to make it easier for Client to rise into sitting. ➤ Caregiver cues Client to push into mattress using elbow. At the same time pushes into mattress with the hand of top arm while raising trunk. While raising trunk the legs are moved over edge until feet are resting securely on floor. ➤ Cue Client to shuffles buttocks forward until finds a comfortable sitting position. ➤ Raising bed, if possible to a height where Client's hips are higher than knees, with feet still resting on floor, will enable Client to stand more easily.
	<p>Sitting to Lying Independent or Supervised Assist:</p> <ul style="list-style-type: none"> ➤ Reverse procedure to go from sitting to lying. ➤ Elevate head of bed approximately half way if this assist is required for supervised assist. Height of bed at Client's knee level to sit back far enough in bed. May cue Client to lower onto side, may hold side rail. ➤ May need to cue Client to lift legs into bed ➤ May need to cue Client to roll onto back. ➤ If head of bed elevated, lower. Cue Client to bend knees, feet flat. Cue Client to bridge and weight shift to achieve a comfortable position. May hold side rail or trapeze bar, if available to reposition self.
	<p>Comfort and Positioning:</p> <ul style="list-style-type: none"> ➤ Ensure Client is comfortable and safely positioned in bed or sitting on side of bed. ➤ If Client is lying down, consider position of bed, which may include raising foot of bed slightly, to optimize comfort and safe positioning. If only head of bed is elevated Client will have a tendency to slide down in bed, causing shearing and poor positioning.
<p>Employers must ensure that workers are trained and follow this safe work procedure. 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 of stiffness and injury to the back, neck and arms of Caregivers. REPORT ANY HAZARDOUS SITUATION TO SUPERVISOR</p>	