




SAFE WORK PROCEDURE		LYING TO SITTING TO LYING ONE MINIMUM 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
<b>Potential Hazards:</b> <ol style="list-style-type: none"> <li>1) If procedure not followed, there is a risk for awkward bending, reaching and over-extension, which can lead to a musculoskeletal injury.</li> <li>2) Depending on the workload, repetitive motions may be a factor.</li> <li>3) Client or Caregiver may slip, trip and fall.</li> <li>4) Client may grab or strike from reactive or defensive behavior.</li> <li>5) Microorganism Transmission</li> </ol> <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>		<b>Personal protective equipment / devices required / other safety considerations</b> <ul style="list-style-type: none"> <li>➤ Side rail, transfer pole, trapeze bar if applicable</li> <li>➤ Adjustable bed if possible</li> <li>➤ Appropriate Footwear for Client and Caregiver</li> <li>➤ Clothing that allows Caregiver movement.</li> <li>➤ Routine Practices; Additional Precautions as assigned</li> </ul>	
<b>Client Criteria and Supportive Information:</b> <ul style="list-style-type: none"> <li>➤ Follows instruction</li> <li>➤ Has moderate to full strength in at least one arm and leg.</li> <li>➤ Has moderate to full trunk strength with moderate balance.</li> <li>➤ Requires physical or set up assistance to move from a lying to sitting position, with or without assistive equipment.</li> <li>➤ Do not use this procedure if Client resists forward movement or cannot maintain upright sitting with minimal assist.</li> </ul>		<b>Training:</b> <ul style="list-style-type: none"> <li>➤ Initial Orientation and regular review</li> </ul> <b>Resources:</b> <ul style="list-style-type: none"> <li>➤ Follow Manufacturer's Instructions for equipment</li> <li>➤ <a href="#">SCHIPP.M1.001 Module 1</a></li> <li>➤ Video <a href="#">SCHIPP.RES.821 Lying to Sitting to Lying One Minimum Assist</a></li> </ul>	
<b>Steps to perform this task safely:</b>			
<b>Set Up:</b> See <a href="#">SCHIPP.M2.002 Guideline Preparation For Client Handling Tasks</a> <ul style="list-style-type: none"> <li>➤ Bed at a height which allows Client's feet to rest on floor when in sitting.</li> <li>➤ Instruct Client to assist as much as they are able.</li> </ul>			
		<b>Lying to Side lying Assist:</b> <ul style="list-style-type: none"> <li>➤ Caregiver positions side rail if possible, to allow Client to assist as able.</li> <li>➤ If Client requires assist to roll onto their side, Caregiver places one knee on the bed to guide Client to bend furthest knee and places a hand on Client's furthest hip and shoulder to cue Client to roll while weight shifting back. Alternatively, raise bed to waist height, in a lunge position, assist at furthest hip and shoulder to roll to side. Lower bed once Client is in seated position.</li> <li>➤ Client moves heels over edge of bed. If minimum assist is required, Caregiver moves down to level of feet and weight shifts back to lower feet, ending in a crouched position.</li> </ul>	



	<p><b>Side lying to Sitting Assist:</b></p> <ul style="list-style-type: none"> <li>➤ Raise head of bed if able.</li> <li>➤ In a power position, one hand is physically cueing with downward pressure at Client's pelvis, the other cupping front of top shoulder to cue to sit up. Cue can come from the shoulder closest to edge of bed but this should not be to lift the Client's trunk into sitting.</li> <li>➤ On specified count, Caregiver assists and instructs Client to push up from bed into a seated position by weight shifting in direction of movement.</li> </ul>
	<p><b>Sitting Position Assist:</b></p> <ul style="list-style-type: none"> <li>➤ Client may require assist to face forward and shift forward to edge of bed. Caregiver is crouched in front to guide Client forward at hip and opposite thigh to weight shift forward on bed, knees over toes.</li> <li>➤ Ensure feet touch floor with hips higher than knees.</li> </ul>
	<p><b>Sitting to Lying Assist:</b></p> <ul style="list-style-type: none"> <li>➤ Reverse procedure to go from sitting to lying.</li> <li>➤ Elevate head of bed approximately half way. Height of bed at Client's knee level to sit back far enough in bed. Cue Client to lower onto side, may hold side rail. If assist is required, place hands at Client's shoulder to rest into side lying.</li> <li>➤ If assist required for legs, have bed at height so Caregiver can squat to bring legs onto bed. A slider can be placed over the edge of the bed, pushes leg and feet across slider into bed. Remove slider.</li> <li>➤ Client may require assist at shoulders and hips to roll onto back.</li> <li>➤ If head of bed elevated, lower. Have Client's knees bent, feet flat. Hold ankles to allow Client to bridge and weight shift to achieve a comfortable position.</li> <li>➤ If Client has difficulty shifting buttocks into or out of lying, a slider may be inserted prior to the movement under hips to assist with the swivel maneuver.</li> </ul>
	<p><b>Comfort and Positioning:</b></p> <ul style="list-style-type: none"> <li>➤ If Client is lying down, consider position of bed, including raising foot of bed slightly, to optimize comfort and safe positioning.</li> <li>➤ If only head of bed is elevated Client will have a tendency to slide down in bed, causing shearing and poor positioning.</li> </ul>
<p><b>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</b></p>	