

GUIDELINE		TRANSFER AND MOBILITY ASSESSMENT (T.M.A.)	
Team Name / Team Lead: SCHIPP Team, Regional Director Staff Development, Infection Prevention and Control	Approved By: Vice President – Planning, Innovation, Quality, Patient Safety and Risk	Issue Date: June 29 2016	Review Date: December 20 2017 Revised date: January 2 2018
<p><b>Potential Hazards:</b></p> <ol style="list-style-type: none"> <li>1) If guideline not followed, there is a risk for awkward bending, reaching and over-extension, which can lead to a musculoskeletal injury.</li> <li>2) Client or Caregiver may slip, trip and fall.</li> <li>3) Client may grab or strike from reactive or defensive behaviour.</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>		<p><b>Personal protective equipment / devices required / other safety considerations:</b></p> <ul style="list-style-type: none"> <li>➤ Appropriate Footwear for Caregivers</li> <li>➤ Clothing that allows Caregivers movement.</li> </ul> <p><b>Training:</b></p> <ul style="list-style-type: none"> <li>➤ Initial Orientation and regular review</li> <li>➤ Minimum of 3 year review or as required</li> </ul> <p><b>Supporting Documents:</b></p> <ul style="list-style-type: none"> <li>➤ <a href="#">SCHIPP.M1.001 Module 1</a></li> <li>➤ <a href="#">SCHIPP.RES.080 Transfer and Mobility Assessment</a></li> <li>➤ <a href="#">SCHIPP.RES.081 S.A.F.E. Status</a></li> <li>➤ <a href="#">SCHIPP.RES.082 Transfers And Lifts Algorithm</a>, <a href="#">SCHIPP.RES.083 Bed Mobility Algorithm</a>, <a href="#">SCHIPP.RES.084 Chair Repositioning Algorithm</a>, <a href="#">SCHIPP.RES.085 Bariatric Transfers And Lifts Algorithm</a>, <a href="#">SCHIPP.RES.086 Bariatric Bed Mobility Algorithm</a>, <a href="#">SCHIPP.RES.087 Bariatric Chair Repositioning Algorithm</a></li> <li>➤ Video <a href="#">SCHIPP.RES.887 Transfer and Mobility Assessment</a></li> </ul>	
<p><b>Supportive Information:</b></p> <ul style="list-style-type: none"> <li>➤ Observation of a Client’s functional movement may be required to assist in determining strength, balance and movement.</li> <li>➤ This assessment does not need to be completed at one time, however all of the assessment steps should be completed before a decision is made on transfer, bed mobility and mobility status and logo(s) in place.</li> <li>➤ Nurse and HCA (assist as able) should complete. Consult with HCA’s for feedback/observations on current transfer and mobility client has demonstrated prior to assessment.</li> <li>➤ Nurse completes the Transfer and Mobility Assessment form and inserts in chart and makes a note in Care Plan and IPN that assessment completed. Nurse tells rest of care team of appropriate transfer and mobility status and ensures/designates that equipment and logos are correct in room/home. A referral to Rehab Services may supersede T.M.A. results when more detailed assessment is completed.</li> <li>➤ <b>Complete Transfer and Mobility Assessment on Admission:</b> <ul style="list-style-type: none"> <li>○ <b>Facility:</b> assessed prior to mobilization and once medically stable. In Acute, within 24-48 hours of admission.</li> <li>○ <b>PCH:</b> <b>within</b> about 72 hours; additional assessment may be required if the Client’s status is different depending on time of day.</li> <li>○ <b>Community:</b> if issue identified and Client requires assist, then the Direct Service Nurse will complete assessment and Case Coordinator will forward a referral to Rehab Services.</li> </ul> </li> </ul>			

- **On Reassessment:** With reported decline in S.A.F.E. Ability to Transfer, (Sit unsupported, Arm and leg strength, Follows instruction, Energy). Review date at bottom. Review in PCH for Quarterly and Annual reviews.
- **Not required:** if no change in S.A.F.E. status. Physiotherapy may be first to assess weight bearing if standing order.

1. **Follow Instruction on Reverse of Transfer and Mobility Assessment to complete the Assessment.**
2. **Documentation needs to be completed following Assessment, including logos, Transfer and Mobility Assessment form placed in chart and referenced in Care plan that complete.**
3. **Equipment needs to be put in place as per Client needs.**

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

Employees may be monitored to ensure compliance and safety.

REPORT ANY HAZARDOUS SITUATION TO SUPERVISOR