## Resident Transfers and Lifts / No Unsafe Lift

**STANDARD**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is committed to providing a safe and healthy environment for all staff and Residents. In respect of this a no manual resident lift policy is established. Residents are not to be lifted manually unless medically contraindicated or in an emergency.

All Residents are safely transferred by staff members who have received training in the proper lifting, transferring and repositioning procedures and the principles of good body mechanics.

If a transfer is deemed unsafe or lifting is involved staff must use a mechanical lifting device. Staff are not to lift a resident without the use of the equipment. Research indicates that care givers that perform manual resident lifts are at the greatest risk of musculoskeletal injuries.

**PROCEDURE**

1. A Resident transfer assessment is to be completed by a Nurse and/or Therapist on admission or readmission after a stay in acute care.

The most appropriate transfer or lift should:

* Be safe for both the resident and caregiver;
* Encourage the resident to assist with the move as much as possible; and
* Provide the least possible work for the care giver by making use of good body mechanics and/or equipment.

1. Assistive devices such as transfer belts, slider sheets or mechanical lifts should be used where appropriate to aid in the transfer or repositioning.
2. The Resident is assessed whenever there is a significant change in condition. Never decrease the amount of assistance given in a transfer until a reassessment has been done. If transfer increases in difficulty, the transfer can be completed and the supervisor must be informed and will arrange for reassessment.
3. The transfer/lifting technique and sling, if required, must be documented on the Resident care plan. It is the responsibility of all staff to comply with the transfer method specified.
4. \_\_\_\_\_\_\_\_\_\_\_\_\_ will provide and maintain equipment required for resident lifts and transfers. Staff must receive training and demonstrate competency in using the equipment prior to using for a resident transfer.
5. Staff are to receive annual training and demonstrate competency in performing resident lifts and transfers and the principles of good body mechanics.
6. Prior to doing a lift or transfer the staff does an assessment of the resident to ensure their condition has not deteriorated.
7. Prior to using a lift staff must do an inspection of both the sling and the lift.
8. Prior to doing a transfer or lift staff will ensure the transfer area is clear and free of obstruction and required equipment is in place.
9. Prior to doing a transfer or lift staff conduct a self-assessment to assess their ability to safely complete the task, assistance required, physical readiness to perform the task and establish communication with the resident and co-worker.
10. The mechanical lift will be used when possible to lift a resident who has fallen, following assessment by the RN / LPN. If a lift is not available and the Resident is unable to get up staff must call the emergency response department (911).
11. Transfer belts are readily available to all staff and must be used for all one person and two person transfers.
12. Workers found in non-compliance with this policy will receive corrective intervention from the supervisor. Non-compliance with this policy may result in disciplinary action.

**OUTCOME**

Residents will be transferred in accordance with a pre-transfer assessment and staff will not perform a manual lift.

**References**

No Unsafe Lift Workbook – Work Safe Alberta

It Doesn’t Have to Hurt - Occupational Health & Safety Agency for Healthcare in BC 2004

Musculoskeletal Injury Prevention Program - Continuing Care Safety Association