Manual handling 3 – sliding a patient

The procedure for sliding a patient from bed to trolley using a transfer board

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Sliding a patient from the bed to a trolley (or vice versa) is potentially an extremely hazardous manual handling manoeuvre, with risks for both nurses performing the procedure and for the patient. It is essential that this is done safely, following best practice guidelines (NMC, 2008) to minimise the risk of injury to nurses or the patient during the procedure.

PROCEDURE

In this procedure, the use of a tubular slide sheet and transfer board is described.

- Perform a risk assessment. This assessment should include checking the patient’s mobility care plan, consulting colleagues and determining how many staff (for adult-sized patients a minimum of four) will be required to undertake the task.

- Ascertain what equipment will be needed.
  - Explain the procedure to the patient.
  - Advise that they may be asked, if able, to follow simple instructions such as to hold their arms crossed against the chest or turn their head in the direction they are turning when staff assist them to roll.
  - It is usual practice to follow a simple prompting regime – ‘ready, steady, roll’ – to ensure coordination.
  - Ensure the patient’s privacy. Screen the bed and ensure that the patient will not be exposed during the procedure.
  - Ensure the environment is safe. Remove any obstructions that could hinder the manoeuvre. Check that there is nothing slippery on the floor. It is important to ensure that equipment such as intravenous infusion lines and catheters are appropriately positioned so that they do not hinder the procedure and are not at risk of being tugged and dislodged.
  - Ensure the brakes of the bed are on.
  The bed should be at a safe working height, which is the optimal working height between the staff carrying out the manoeuvre. This is the median height in respect of the handlers’ waist and pelvis (BackCare, 2005).
  - Wash and dry hands; don a plastic apron.
  - Check the slide sheet, ensuring it is the correct size and is clean. Ensure that the manufacturer’s recommendations for its use are going to be followed.
  - Nurse A (described here as being on the patient’s right): prepare the slide sheet – roll it in half so that it can be inserted under the bottom sheet beneath the patient.
  - Nurse B: assist the patient to ease onto their left side facing towards you, and ask them to place their left arm away from their body.

- Check brakes are on for trolley and bed

- Ensure the transfer board is halfway under the patient

- Advise staff to take up positions.

This procedure should be undertaken only after approved training, supervised practice and competency assessment, and carried out in accordance with local policies and protocols.

Fig 1. Insert the slide sheet under the patient

Fig 2. Ensure the transfer board is halfway under the patient

Fig 3. Advise staff to take up positions. Check brakes are on for trolley and bed
side (or to raise it slightly above them on the pillow) and their right arm on their chest. Ask the patient to look towards you. Take care to ensure the patient is not exposed.

- Nurse A: insert the slide sheet under the patient (Fig 1), ensuring that their head and main trunk and legs are on the slide sheet. If the patient’s feet are not on the slide sheet then place a smaller one under them to prevent shearing to the heels.

- Roll the patient back onto their back. It will probably be necessary to ease them slightly over on the opposite side towards nurse A to check that the slide sheet is positioned correctly under the sheet. If using a circular slide sheet, its openings should be at the top, with the folded side facing towards the side of the bed. This means the slide sheet moves in the same direction as the patient.

- When using a transfer board, ensure the board is halfway under the patient so that the rest of the board bridges the gap between the two surfaces the patient is being transferred between (Fig 2).

- Once the transfer board is in place bring the trolley alongside and next to the bed, ensuring the cot sides on the trolley have been lowered. The trolley must be adjusted so that it is the same height as the bed, and the brakes on both the trolley and the bed must be on.

- Advise all staff to take up position. Two handlers should be on the far side of the receiving surface (trolley) and two should be by the bed (Fig 3). The handlers positioned nearest the patient’s head will take a lead role in the transfer.

- The handler by the bed and at the patient’s head end places a hand on the patient’s shoulder and the other on the bed. The other handler on this side places a hand on the patient’s hip and the other hand on the bed.

- The staff on the receiving side reach and grasp the slide sheet (Fig 4).

- All staff adopt a safe position with one foot forward and knees relaxed.

- Using the words of coordination – the command ‘ready, steady, slide’ – the handlers positioned by the receiving surface pull the slide sheet, transferring their weight onto their back foot. The handlers nearest the patient help to initiate the transfer by slightly pushing the patient across (Fig 5). During the risk assessment staff may have identified that another handler is required to maintain the safety of the patient’s head, or that additional staff may be needed to control the patient’s feet and head movements as they are moved across.

- It may be necessary to undertake the procedure in two stages – for example if transferring a patient across a wider surface such as from one bed to another, or if there are significant lines and tubing to be kept stable or to be moved in a controlled way.

- Once the patient is on the trolley, raise the trolley cot side (Fig 6).

- Ensure that the slide sheet is laundered and the transfer board is cleaned, both following local procedures.

- Wash and dry hands according to local policy (BackCare, 2005).