GENERAL CONSIDERATIONS

Factors Impacting Patient Handling Tasks

There are many factors beyond those found in an assessment that impact the safety of patient handling tasks. The following table outlines patient and HCW factors, environmental and work organizational factors that should be considered in conjunction with each transfer assessment. These factors may have an impact on the recommended transfer method.

PATIENT FACTORS

Communication	Cognition	Medical Status
Speech	Memory	Diagnosis
Vision	Judgment	Pain
Hearing	Concentration	Medication
Comprehension	Decision making	Fatigue
Language		Devices
Physical Status		Emotional Status/Behavior
Weight	Endurance	Cooperative
Height	Muscle Tone	Unpredictable
Range of Motion	Flexibility	Aggressive
Strength	Sensation	Depressed
Balance	Skin Condition	Confused
Coordination	Depth Perception	Agitated
Weight Bearing Status	Body Awareness	Unreliable

OTHER FACTORS

Environment	Staff	Work Organization
Room layout and obstacles	Experience & Training	Time pressures
Flooring	Capabilities	Equipment Availability
Medical equipment	Fatigue level	Shift work
Space	Size differences between co-workers	Workers available

RED FLAGS CHECKLIST FOR TRANSFERS

This tool is intended for use by any HCW involved in transferring a patient. If any of the following indicators were not exhibited previously by the patient and the HCW can answer 'Yes' to any of these questions, the HCW should not proceed with the transfer until the patient has been reassessed by nursing or Physiotherapy/Occupational Therapy. If the transfer is necessary, the HCW should proceed using a more conservative transfer method (i.e., mechanical lift). HCWs can decide to perform a transfer using more assistance than indicated if they feel it is needed, but should never decide to use less assistance without consulting the nurse and/or physiotherapist/occupational therapist.

Activity	If Yes	Then, Next Step
Unable to lift shoulders from HOB @ 45°	\checkmark	Mechanical Lift and/or
Patient states or demonstrates ability to rise	\checkmark	Physiotherapy/Occupational
from lying to sitting as Very Difficult or Hard		Therapy Consult
Unable to boost – independently or min.	\checkmark	
assist		
Has not been out of bed >72 hours	\checkmark	
(extended period of time)		
Significant fear, anxiety, reluctance by		
patient		
Significant change in medical stability		
Patient reports weakness or dizziness		
Patient reports pain level 7/10 or greater	\checkmark	
and is not diminished by pain medication		
Unable to lift arms against gravity	$\sqrt{}$	
Unable to lift legs against gravity	$\sqrt{}$	