Module 7: Mobility

Lesson 1

Safely Assist With Walking and Transfers

Key Terms

- **Assistive devices:** equipment that helps a person perform a task and maintain or regain independence. Examples include but are not limited to a wheelchair, walker, cane, elevated toilet seat, and shower chair.
- **Body mechanics**: the way we move during everyday activities. Proper body mechanics techniques prevent injury to the person and others when lifting or moving objects.
- **Enablers**: devices that a client uses to maintain independence / anything that helps a client take their own medication (example; cup, spoon).

- **Mechanical lift**: a mechanical device that caregivers use to transfer clients between their beds, chairs, and other locations
- **Mobility**: ability to move from place to place or surface to surface. **Positioning**: how a client is appropriately placed when sitting or lying down.
- **Transfers**: moving a client from one place to another; for example from a bed to a wheelchair.
- **Transfer belt/gait belt**: a belt worn around the client's waist to aid in transfers and walking.
- **Transfer board**: a flat board that enables a client to slide from one level surface to another, also called a slide board

Supporting Mobility

- Many factors can contribute to limited mobility, including the following.
  - Conditions present at birth • Illness • Physical injury • Medications
  - age-related changes
  - Eyesight • Hearing • Sense of touch • Muscle mass • The nervous system
  - physical, mental and emotional effects
    - Pressure injuries • Urinary problems (incontinence or retention) • Constipation • Increased stress on the heart • Muscle weakness • Feelings of helplessness • Depression • Anxiety

Body Mechanics

- Helping a client move is physically demanding and can cause serious injury. Proper body mechanics and techniques will help you protect your back, neck, shoulders, knees, and wrists
- Before helping a client move, make sure you can perform the move safely and without strain or injury. Plan to use any assistive devices that are available. If possible, get another person to help when necessary.
- Before you support any weight, make sure that your body is steady in a strong position. Spread your feet about shoulder width apart and put one foot slightly in front of the other. This position will keep you steady and protect your spine.

Prevent Back Injury-need to show you tube how to pick objects

- Bending at the waist or twisting your body while supporting weight can cause back or spinal injury.
- Protect yourself by following these guidelines:
  - Hold the weight as close to your body as you can.
  - Keep your back as straight as possible.
  - Keep your back and neck in a straight line.
  - Keep your back, feet and trunk aligned and do not twist at the waist.
  - If you need to change direction, shift your feet and take small steps
  - https://www.youtube.com/watch?v=Zq97LFOSbVI

- Lift with Your Legs
  - The muscles in your legs and buttocks are stronger than the muscles in your lower back.
  - Bending at the waist and lifting with your back can cause fatigue and injury.
  - Bend your knees to raise and lower the weight, and lift with your legs.
- Avoid Lifting
  - Caregivers are at high risk for back and shoulder injuries.
  - Avoid lifting whenever possible.
  - Consider pulling, pushing, or sliding heavy objects instead of lifting them.

Common Care Practices with Mobility

- As with any personal care task, supporting a client's mobility requires skill, professionalism, understanding and sensitivity.
- When you help a client move, follow these guidelines:
  - Make sure they are as comfortable as possible.
  - Do everything you can to maintain their dignity and privacy.
  - Listen attentively and incorporate their preferences.
  - Speak clearly and respectfully, and explain what you are doing.
  - Encourage the client to do what they can and support them at the level of assistance they need.
  - Take your time; avoid rushing yourself and the client.
  - Use assistive devices correctly and safely.
  - Be aware of and address any safety concerns related to the task.

Skill: Assist a Client to Walk

- See Assist a Client to Walk in the Skills Checklists on page 421 for the specific steps of this skill
- https://www.youtube.com/watch?v=g4JBT1wo7Is
- https://www.youtube.com/watch?v=rucERO7O_wM&t=25s

Tips for Assisting a Client to Walk

- 1. Prepare for the walk before you start.
- Communicate with the client and look around the environment to make sure you are both ready. Clarify with the client where they want to go and determine the level of assistance they need.
- Think about what the client is wearing. Long loose clothing like skirts and robes that fall below the ankles can cause tripping. Encourage clients to use their glasses and/ or hearing aids if they have them. Nonslip, good-fitting shoes will also help minimize trips and falls.
- Check the path before starting the walk. Make sure it is clear and free of clutter.

- 2. Keep the client’s body as straight as possible while assisting the client to stand. If a client has a weak leg, brace your knee against it as the client stands.
- 3. Once the client is standing, suggest they stand a few moments and stabilize their balance before walking. Encourage the client to stand straight, look forward, and keep a measured, smooth rhythm.

Assisting a Client to Climb Stairs

how to buckle a gait belt video

- Climbing stairs can be challenging for a person with limited mobility.
- Before helping a client up or down stairs, make sure you know the client's diagnosis and the level of support they need.
  - Use a gait belt for safety.
  - Hold the gait belt in one hand and place your other hand near (but not touching) the shoulder on the client's weaker side.
  - https://www.youtube.com/watch?v=fKcADt8fEpg

When the client is going down stairs down=bad

- stand to their weaker side (if they have one).
- They should hold the handrail on their stronger side and step down with their weaker leg first.
- If the client is using a cane, have them place the cane down first, before stepping down with the weaker leg.
- The caregiver should keep each foot on a different stair and only take a step when the client is not moving.

- https://www.youtube.com/shorts/yFKTtQTy2ho with gait belt

When going up stairs up=good

- stand slightly behind and to the side of the client's weaker side (if they have one).
- The client should hold the handrail nearest their strongest side and step up with their strongest leg first
- Encourage the client not to bend too far forward or backward. If the client begins to lose their balance, provide support with your hand on their shoulder, and move toward the client to help brace them.
- Do not pull the client toward you. If necessary, move with the client to sit them down on the stairs. Tell the client you will assist them sitting on the stairs
- https://www.youtube.com/shorts/O2ogno3xufA

Assistive Devices for Walking: Walkers

- Clients who can bear weight on their legs but are unsteady and/or need help with balance use walkers.
- It is important to ensure that the walker's height is adjusted to the client.
- Encourage clients who use walkers to:
- • use the walker properly - some have wheels to slide, others should be picked up and placed forward;
- avoid leaning into the walker;
- • place their weight on the stronger leg and hands;
- • avoid pulling on the walker when standing up; and https://www.youtube.com/watch?v=Cmb07-wlxBk

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Assistive Devices for Walking: Canes

- Straight canes are for balance and are not designed to bear weight.
- The client must be able to bear weight on both legs and hold the cane.
- For clients who use a cane, follow these guidelines:
  - The client should use the cane on their stronger side.
  - • The cane goes forward first, followed by the weaker leg and then the stronger leg.
  - • If the client needs assistance walking, you should stand on a client's weaker side (if they have one).
  - https://www.youtube.com/watch?v=gCep_iNHXLc

Assistive Devices for Walking: Crutches

- Crutches provide support and stability when a client can only bear weight on one foot.
- Crutches that are in poor condition or that are not adjusted correctly can lead to injury.
- Crutches must be correctly adjusted to the client's height.
- They should have heavy, rubber suction tips to prevent slips and falls.
- https://www.youtube.com/watch?v=k2-w3LZlCVk

Assistive Devices for Walking: Braces

- Braces provide specific support for weakened muscles or joints or immobilize an injured area.
- The brace should be custom-made for the individual.
- The client may need protective padding, and there may be a prescribed schedule for use and rest.
- It is important to watch for skin breakdown or sores and report those to your supervisor and the prescriber.

Skill: Transfer a Client from Bed to Chair or Wheelchair

- See Transfer a Client from Bed to Chair or Wheelchair in the Skills Checklists on page 421 for the specific transfer procedures

Transfers

- changing a client's position and/or moving them from one surface to another. Transfers are very personal.
- A client knows what works and doesn't for them and will have a definite opinion about how they wish to transfer.
- In order to prevent injury to the client as well as to yourself, it is important to follow best practices with every transfer.
- If a client asks you to transfer them in a way that is unsafe, do not complete the transfer and report this to your supervisor.

Assisting a Client to Sit on the Side of a Bed

- A person lying in bed will need to sit up and put their feet on the floor before they can stand or transfer to a wheelchair or other type of chair. To assist a client to sit up on the side of a bed:
  - make sure the client is not too close to the edge of the bed;
  - • have the client bend their knees with their feet flat on the bed and to roll onto their side towards you;
  - • watch closely and provide assistance if needed;
  - have the client bring their legs off the bed and push up with their arms to a sitting position;
  - • encourage the client to use hip walking if able (scooting forward one hip at a time) when scooting towards the edge of a bed;
  - • if the client cannot move from a lying to sitting position without hands-on assistance, assist the client by placing one arm under their shoulder and your other arm over their thighs; and
  - • finally, swing the client's legs off the edge of the bed and plant their feet onto the floor.

Assistive Devices for Transfers: Transfer Boards

- A transfer board is a strong flat board that helps a person slide from one surface to another.
- Transfer boards can help a client to transfer with less assistance.
- Transfer boards work well for clients who can use their arms to scoot from one side to the other.

Transfer Belt / Gait Belt

- A transfer belt, also called a gait belt, is made of sturdy webbing or twill with a buckle or clasp on it.
- The transfer belt is placed around a client's waist and gives the caregiver a sturdy hold.
- Use of a transfer belt is recommended for clients who need help to transfer or walk.
- The following are tips to use a transfer belt safely.
  - Fasten the belt around the client's waist.
  - Place the belt around the client's clothing, not their bare skin.
  - The belt should be snug but not too tight. You should be able to put the flat of your hand under the belt.
  - Make sure a client's breasts are not caught under the belt.
  - Grasp the belt firmly when assisting with transfers or walking.

Draw Sheets

- A draw sheet is a small bed sheet (or a regular sheet folded in half) that caregivers can use to help move clients in bed.
- Draw sheets are used to roll a client onto their sides or lift them higher in the bed.
- The draw sheet is placed lengthwise under the client, between their knees and shoulders.
- Using a draw sheet to lift a client requires two people. Roll up each side of the draw sheet to the client lying in bed, and then lift the client up in bed. Be careful not to drag the client's heels. If the client is able, they can also assist by bending their knees and pushing up while the caregivers use the draw sheet.

Mechanical Lifts

- Some clients cannot bear their own full weight or need complete assistance to transfer.
- You will need special training and a mechanical lift (such as a patient lift, sling lift, sit-to-stand or Hoyer Lift) to assist them with transfers
- Your employer will provide training for any mechanical lifts you will use in your work

Other Enablers

- Devices such as bed/side rails, bed canes, and transfer poles can help a client self-positon and self-transfer.
- Make sure the client uses these enablers safely and correctly.
- Enablers can become restraints if they prevent clients from moving how they want to

- Transferring a Client from a Wheelchair into a Car. Page 153

Lesson 2: Falls and Prevention

- Key Terms
- **Fall**: an unplanned and abrupt move to the floor or lower level, with or without injury.
- **Fall Hazard**: a situation or object that increases the risk of a fall.

Falls

- Falls are a major health problem for older adults
- Experiencing a fall can have serious negative effects on a client's health and quality of life.
- Home Care Aides can help minimize the risk of falls by removing fall hazards and encouraging clients to make healthy and safe choices.
- Home Care Aides must know how to respond to a fall and understand the policies in their care setting.
- Falls must be well documented and reported to help prevent future falls.

Causes of Falls

- Falls can happen because of environmental or health-related causes
- Environmental Causes of Falls • Low or poor lighting • Household items such as throw rugs, cords, furniture and pets • Wet or slippery floors • Uneven floors
- Health-Related Causes of Falls • Infection • Vision and hearing problems • Impaired balance or awareness • Reduced strength • Alcohol or drug abuse • Seizures • Medications • Dehydration or malnutrition • Slowed reaction time • Lack of physical activity
- Diseases and Conditions that Increase Risk of a Fall • Stroke • Joint or heart disease • Neuropathy • Dementia • Delirium • Depression • Parkinson’s disease

Consequences of a Fall

- **Injury** More than 95% of hip fractures are caused by falling, Other injuries often include fracture to the wrist, shoulder, or spine. Falls can also cause internal bleeding and traumatic brain injury
- **Fear and Loss** Many clients fear falling (especially if they have fallen before) or lose confidence in their ability to move around safely.
  - This fear can: • limit their daily activities; • prevent them from socializing; • increase their feelings of dependence, isolation, and depression; and • lead to a loss of mobility.

Decreasing Fall Risk

- There are many things you can do to reduce the risk of falling for a client. Report concerns you have about a client falling to the appropriate person where you work.
- Footwear
  - All clients should have sturdy walking shoes that support their feet and ankles.
  - Shoes that tie or supportive sneakers with thin, non-slip soles and Velcro fasteners to adjust for swelling of the feet are best.
  - Slippers and jogging shoes with thick soles should be avoided.
  - A doctor may prescribe custom orthotics for support and stability.

What to Do if You See a Client Falling

- Follow these steps if you see and can get to a client who is falling:
- 1. Try to support the client's head and gradually ease the client onto the floor.
- 2. Keep your back straight, position your feet for a wide base of support. Flex at the knees and hips as you lower the client to the floor.
- 3. If you are behind the client, gently let them slide down your body. Do not try to lift or catch a client who is falling. Lower them as slowly as you can and try to get them to land in a way to minimize injury.

What to Do If a Client Has Fallen on the Floor

- Know and follow your facility or agency policy about responding to falls.
- Below are recommended steps to take.
- 1. Immediately ask the client what happened and how they feel.
- 2. If the client says they feel unhurt and comfortable getting up, observe carefully as they do so. If the client is injured, your role is to get the client medical help.(911). Make the client as comfortable as possible and keep them warm by covering with a blanket until the EMTs or other medical help arrives. d. Do not give the client anything to drink or move them
- 3. Document and report the fall to the appropriate person where you work

What to Do After a Fall

- After a fall, monitor the client for injuries or changes in condition and respond to them promptly.
- Look at the client's body to see if there are any injuries (bruises, cuts, abrasions, etc).
- Check for skin temperature and listen for changes in breathing. Changes in the client's condition can help identify the cause of the fall
- Report the fall to your supervisor.
- The fall will also probably be reported to the client's doctor and interested family member.
- You will need to help your supervisor investigate the cause of the fall, and help in implementing a plan to prevent another fall
- Document and report any changes you observe