

**Inserting the tubular slide sheet under the supine patient without rolling them**

Issue Date	Review Date	Version
January 2021	March 2025	1

**Purpose**

To promote safe practice in inserting the tubular slide sheet without rolling the patient, thus reducing the risk of musculoskeletal injury to staff, enabling patients to be repositioned safely. It is to be used in conjunction with the Moving and Handling People and Objects Policy, and Manufacturer's Instructions.

**Who should read this document?**

Senior clinicians and senior managers because they need to know their responsibilities and accountability in respect of promoting safe handling behaviours in their work place.

All staff involved in moving and handling because they need to follow the Trust's Standard Operating Procedures in Moving and Handling People or Objects safely to protect the safety of patients and staff.

**Key Messages**

Avoid hazardous moving and handling as far as reasonably practical. Assess all risks in relation to moving and handling people or objects where avoidance is not an option. Reduce the risk of moving and handling as far as is reasonably practical by following the Standard Operating Procedures, these include ensuring staff are adequately trained in carrying out moving and handling activities safely, reducing the risk of injury to staff and patients. Insertion of a slide sheet under the patient without rolling them is to be used in conjunction with the Safe Moving and Handling Principles and Moving and Handling Risk Assessment.

**Core accountabilities**

<b>Owner</b>	Sarah Fishwick
<b>Review</b>	Health and Safety Committee
<b>Ratification</b>	Deputy chief nurse – Bev Allingham
<b>Dissemination (Raising Awareness)</b>	Moving and Handling Lead
<b>Compliance</b>	Moving and Handling Lead

**Links to other policies and procedures**

Moving and Handling People and Objects Policy. Plus Size Moving and Handling Policy. Health & Safety Policy. Risk Management Policy. Prevention and management of falls policy.

**Version History**

1	2009	Guidance created
2		Guidance updated
2.1		Guidance updated
1	January 2021	Transferred to SOP and Updated

*The Trust is committed to creating a fully inclusive and accessible service. Making equality and diversity an integral part of the business will enable us to enhance the services we deliver and better*

*meet the needs of patients and staff. We will treat people with dignity and respect, promote equality and diversity and eliminate all forms of discrimination, regardless of (but not limited to) age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity.*

**An electronic version of this document is available on Trust Documents. Larger text, Braille and Audio versions can be made available upon request.**

Standard Operating Procedures are designed to promote consistency in delivery, to the required quality standards, across the Trust. They should be regarded as a key element of the training provision for staff to help them to deliver their roles and responsibilities.

<b>Section</b>	<b>Description</b>	<b>Page</b>
1	Introduction	3
2	Definitions	3
3	Regulatory Background	3
4	Key Duties	3
5	Procedure to Follow	4-5
6	Document Ratification Process	5
7	Dissemination and Implementation	5
8	Monitoring and Assurance	6
9	Reference Material	6

## Standard Operating Procedure (SOP)

### Inserting the tubular slide sheet under the supine patient without rolling them

#### 1 Introduction

Methods for Safe Movement

Plymouth Hospitals University Hospitals NHS Trust

#### 2 Definitions

Manual handling - the transporting or supporting of loads, by human effort which includes any lifting, putting down, pushing, pulling, carrying or supporting a load by hand or by bodily force.

Risk – the chance that an event will occur that will impact adversely on the Trust’s objectives.

Hazard – a condition that gives rise to, or increases the risk of an adverse event occurring

Likelihood – a measure of the probability that the predicted event will occur

Consequence – a measure of the adverse impact of the predicted event, in terms of harm, loss or damage on people, property, or the Trust’s objectives

Incident – for the purposes of this procedure, is any unwelcome outcome arising from a manual handling action, regardless of the level of injury resulting

#### 3 Regulatory Background

Health and Safety of Work Act 1974

Management of Health and Safety at Work Regulations 1999

Manual Handling Operations Regulations 1992 (amended 2002)

Provision and Use of Work Equipment Regulations 1998

The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

15.—(

#### 4 Key Duties

All staff are expected to take practical steps to minimise risk to themselves, patients and colleagues. Wherever there is doubt or uncertainty, staff are expected to seek assistance necessary to make the procedure safer.

All staff must report all manual handling incidents, in line with the Trust’s Adverse Events policy.

Understand the Trust’s procedural documents on managing manual handling risks and ensure that they have an up to date record of completion of required training, as detailed in the Trust’s Workforce Induction and Training Policy.

Use only equipment and procedures for which they are trained and competent to use

Seek basic guidance from the manual handling key worker, or the manual handling team for specialist advice, for any situations where they are uncertain of the best approach to use.

Report discomfort or pain possibly associated with their work to their line managers and refer to the Staff to Occupational Health and Wellbeing department as appropriate in line with Trust policy

Ensure that they do not create hazards or increase risks as a result of their working practices and behaviours

**Aim: To insert the slide sheet without rolling the patient whilst they are supine**

**Equipment: Tubular Slide sheet**

**Patient Criteria:**

- If conscious, patient must be co-operative
- Patient may be unconscious
- Not to be used with unstable spinal patients

**Handlers Criteria:**

- Minimum number of 2 handlers required (dependent risk assessment e.g weight, size and shape of patient and individual capabilities of staff)

**Procedure:**



- Check that the brakes are engaged on the bed
- Adjust bed to appropriate height
- Place the slide sheet on a surface to fold down with opening ends at the head and the foot of the patient approximately 12"
- Place the slide sheet with the folds on the underside of the slide sheet on top of the bed.



- Position the sheet under the patients head/shoulder/pillow so that the slide sheet is now evenly placed with the excess over the edges of the bed
- Staff position in a walking stance facing the head end of the bed.
- Place the outside hand on the top of the slide sheet ensuring the folds are not underneath the hand that is anchoring the slide sheet to enable the underside folds to be peeled down.



- To peel the slide sheet down under the patient, the hand nearest the patient is placed under the slide sheet holding onto the fold.
- To peel the slide sheet down from underneath the patient staff need to adopt a body weight transfer as the hand nearest the patient slides the bulk of the material down under the patient. This will be approx. 12" which is the first fold of the material.



- Repeat this action alternating between the two staff members to avoid the slide sheet jamming under the patient in a smooth controlled movement, working down the bed with each 12" sections.
- Ensure the slide sheet is positioned flat under the patient and extends the length of the patient's body to reduce shear and friction.

**NB.** This activity may also be done working from the patients feet and working toward their head. Pay special attention to ensure the open ends of the slide sheet are nearest the patient and the bulk of the material is next to the bed. This reduces the amount of friction next to the patients skin as the bulk of material is being moved against the bed sheet.

## 6 Document Ratification Process

The design and process of review and revision of this procedural document will comply with The Development and Management of Formal Documents.

The review period for this document is set as default of five years from the date it was last ratified, or earlier if developments within or external to the Trust indicate the need for a significant revision to the procedures described. This document will be reviewed by the group or committee and ratified by the Deputy Chief Nurse. Non-significant amendments to this document may be made, under delegated authority from the Deputy Chief Nurse, by the nominated author. These must be ratified by the Deputy Chief Nurse and should be reported, retrospectively, to the group or committee.

Significant reviews and revisions to this document will include a consultation with named groups, or grades across the Trust. For non-significant amendments, informal consultation will be restricted to named groups, or grades who are directly affected by the proposed changes.

## 7 Dissemination and Implementation

Following approval and ratification, this procedural document will be published in the Trust's formal documents library and all staff will be notified through the Trust's normal notification process, currently the 'Vital Signs' electronic newsletter. Document control arrangements will be in accordance with The Development and Management of Formal Documents.

The document author(s) will be responsible for agreeing the training requirements associated with the newly ratified document with the Deputy Chief Nurse and for working with the Trust's training function, if required, to arrange for the required training to be delivered.

## **8 | Monitoring and Assurance**

All appropriate staff receives mandatory training as per Moving and Handling People and Objects Policy.

Moving and handling team regularly monitor incidents via Datix, in line with Moving and Handling People and Objects Policy reporting to the Health and Safety committee who have oversight.

Health and Safety Committee report directly to the Trust board. They are responsible for ensuring that the Trust maintains adequate arrangements to manage and mitigate the risks of injury arising from moving and handling.

## **9 | Reference Material**

Health and Safety of Work Act 1974

Management of Health and Safety at Work Regulations 1999

Manual Handling Operations Regulations 1992 (amended 2002)

Provision and Use of Work Equipment Regulations 1998

The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 15.—(1)