

Rota Stand Assisted Transfer from one Position to Another

| Issue Date | Review Date | Version |
|------------|-------------|---------|
| March 2021 | March 2024 | 1 |

Purpose

To promote safe practice in the Rota Stand Assisted Transfer from one Position to Another, thus reducing the risk of musculoskeletal injury to staff, enabling patients to be moved safely.

It is to be used in conjunction with the Moving and Handling 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 area.

All staff involved in moving and handling because they need to follow the Trust's Standard Operating procedures in Moving and handling People and 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 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.

The Rota Stand Assisted Transfer from one position to another is to be used in conjunction with the Moving and handling Principles and moving and handling risk Assessment.

| Core accountabilities | | |
|---|------------------------------------|--------------------------------|
| Owner | Sarah Fishwick | |
| Review | Health and Safety Committee | |
| Ratification | Deputy Chief Nurse – Bev Allingham | |
| Dissemination (Raising Awareness) | Health and Safety Committee | |
| Compliance | 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 | 2011 | Guidance Created |
| 2 | 2018 | Update |
| 1 | March 2021 | Transferred to SOP and Updated |
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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.

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Standard Operating Procedure (SOP)

Rota Stand Assisted Transfer from one Position to Another

1 Introduction

Methods for Safe Movement

University Hospitals Plymouth 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.—(1)

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

Rota Stand assisted transfer from one seated position to another

Aim: Standing transfer from one surface to another

Equipment: Rota stand.

- Height adjustable frame to suit all
- Foot pedal break to secure turn-table during mounting.
- Central wheels for easy positioning
- Angled shin pad for correct standing position
- 160kg SWL (always check weight capacity of equipment and weight of patient prior to use.)

Handlers Criteria: Two Person Task

Patient Criteria:

- Standing balance
- Ability to take own weight though his/her legs
- Upper body control
- Able to follow instructions

Controls: The patient must be able to maintain standing position prior to the task. If the patient is unable to weight bear adequately **DO NOT** use this form of transfer.

Procedure



- Ensure patient moves forward in the chair before approaching with the aid.
- Use the wheels to position the rota stand in front of the patient
- Ask the patient to place their feet on the foot plate.



- Ensure the handle height is suitable and adjust if necessary.
- Place your foot on the Foot Pedal Brake to secure during mounting.
- Ask the patient to hold onto the handle of the Rota stand.



- The second staff member can assist the patient to stand as necessary.



- Anchor the rota stand on the foot brake
- When the patient is ready, ask them to stand in their own time. A second staff member will assist them as required.
- When patient is standing upright, ask them to lean onto the handle slightly.



- Remove foot from 'foot pedal brake'
- By side stepping you can turn the patient whilst standing on the Rota stand, enabling them to be positioned adjacent to the receiving surface (e.g. the chair or the bed.)



- Place foot on the pedal brake
- The second staff member will help position the chair/bed close behind patient's knees. NB. Ensure brakes are secure.
- Secure brakes on the bed.



- Keeping foot on the Pedal Brake to secure, the patient can lower onto the receiving surface. Assisted by the second staff member as necessary.



- The rota stand can then be removed when the patient is safely on the bed/chair.

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)