

Turning the Plus Size patient using the Repo Sheet in conjunction with the overhead gantry hoist system

Issue Date	Review Date	Version
March 2021	March 2024	1

Purpose

To promote safe practice in the, turning the Plus Size patient using the Repo sheet in conjunction with the overhead gantry hoist system thus reducing the risk of musculoskeletal injury to staff, enabling patients to be moved safely. It is to be used in conjunction with the Manual 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 areas.
All staff involved with 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 manual 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 manual 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 Turning of Patient onto side using a Slide Sheet 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	Updated
1	March 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.

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Standard Operating Procedure (SOP) Turning the Plus Size patient using the Repo Sheet in conjunction with the Overhead Gantry Hoist System

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

5 Procedure to Follow

Turning the Plus Size patient using the Repo sheet in conjunction with the overhead gantry hoist system

Aim: To reposition the Plus Size patient onto their side.

Equipment: Repositioning sheet

Perform end user safety checks prior to use including SWL of repositioning sheets.

Important Repo Sheet must not be used for lifting and transferring from a supine to a sitting position.

Patient Criteria:

Unable to facilitate movement into side lying position.

Handlers Criteria:

Initially following a risk assessment, 6 staff may be required to insert repositioning sheet under the bariatric patient. In can then be left in situ until soiled.

Procedure:



- Hold the repo sheet beside the bed, begin to roll it 'away from you', ensuring the looped straps are inside the bulk of the rolled material.



- With 3 staff positioned each side of the patient, roll the patient.
- The 3 receiving staff place hands on key points of the patient, whilst the other 3 staff assist by pushing the patient to help facilitate the roll. The repo sheet is lying on the bed ready for insertion.



- When the patient has been rolled, staff swiftly position as much of the sheet as possible by pushing it into the mattress next to the patient. The patient can then be rolled onto their back again

- Roll the patient in the other direction. Staff carefully

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unroll the repo sheet.

- The repo sheet will be covering the bed either side of the patient with the looped straps hanging loosely over the edge of the bed.



- Ensure hoist checks are carried out as per user guide, e.g. weight capacity, good working order, clean. Check for hoist inspection test.



- Beginning at the head, attach the loop straps to the sling bar on the respective sides. The lift straps are different colours to enable correct matching of lift straps both sides. Use the lift straps that lift the head and all of the lift straps that lift the body, as far down as the knees (normally 4-5 pairs of straps).



- Raise the bed rail of the side you are moving the patient toward.

- Use the hoist controller to raise the patient until their body has cleared the mattress and can be moved across the bed to the desired position. A slide sheet should be placed under the patient heels to protect them and assist with the moving the patient to the side of the bed. During repositioning, the caregivers should hold on to the sling bar whilst changing the lift straps.





- Disconnect the straps ensuring staff stay next to the patient as they will now be on the side of the bed.
- Turn sling bar so it is positioned to head and foot in direction.



- Reconnect the loops at the head, and shoulder position of the patient to the hook of the sling bar.
- Connect the loops at the hip, and knee of the patient to the other hook of the sling bar.



- Position the patient to make turning easier: arms across chest, one leg slightly bent. Move the pillow to the centre of the bed.
- Begin to raise the hoist to take the tension and check that patient is comfortable.



- 2 staff to stand on receiving side of the patient to steady and support them.
- Continue to raise the hoist and the patient will be turned by the repo sheet.
- Stop when the patient reaches the desired position.



- Help the patient to achieve a comfortable posture, e.g., placing pillows for support where necessary (behind the back, between the knees, under the head).



- Lower the sling bar, and disconnect the loop straps.



- The patient is now positioned centrally in the bed.
- Tuck the loops under the repo sheet to reduce risk of staff tripping over.

When moving the patient from side to back, perform the steps in the reverse order:

- Support the patient by attaching the loops to the sling bar and giving tension by raising the hoist enabling staff to remove the supporting pillows.
- Raise the bedrails. Lower the patient onto their back. Reconnect the loops across the patient chest to move across to the other side of the bed, etc.

N.B. When the repo sheet is removed/soiled, it should be placed in a brown bariatric skip bag, and placed into the laundry cycle.

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

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