Aged care job dictionary

**Care Worker – Residential**

**How to use this job dictionary**

This **generic resource** contains an analysis of **regular tasks** for a **priority role** in the **aged care sector.** It is designed to be useful for a range of purposes such as:

* informing about the tasks, duration, demands of the role
* highlighting the risk and location of a musculoskeletal injury
* demonstrate good practice to prevent injury
* a preventative tool for use with pre-employment assessments

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To the best of our knowledge, the procedures described in this document reflect currently accepted practice, but cannot be considered absolute and universal recommendations. All recommendations must be considered in the light of the specific example and new information that has become available since the time of writing. The authors disclaim responsibility and assume no liability for any adverse effects resulting directly or indirectly from the suggested procedures, from any undetected errors, or from the reader’s misunderstanding of the text.

**Task pages**

1. Assisting resident with eating  drinking - meals
2. Bed sponge
3. Dressing a resident in a chair
4. Dressing and undressing a resident in bed
5. Personal grooming, cleaning teeth, brushing hair
6. Shower assist standing resident
7. Shower resident in a shower chair
8. Shower resident in bed bath
9. Toileting resident
10. Manoeuvring a resident in a wheelchair/princess (or similar) chair/shower chair
11. Assisting an ambulant resident in/out of chair - two person assist
12. Transferring a resident from bed to chair with a lifter
13. Transferring an ambulant resident from bed to chair
14. Transferring a resident using sling lifter
15. Transferring a resident from bed to chair or chair to chair using a ceiling hoist
16. Transferring a resident using stand aid lifter
17. Using a turning sheet with a lifting machine to turn a heavier resident in bed
18. Slide sheet repositioning in bed
    * Appendix: Slide sheet forces table
19. Assisting a resident who has fallen to chair/bed by verbal instruction
20. Assisting a resident who has fallen using a lifter
21. Assisted walking
22. Bed making
23. Push pull trolleys, linen skip, bed

**Additional information**

* Risk of musculoskeletal injury
* Lift / push/ pull physical demands categories
* Frequency of task – table
* Reducing the risk of injury and re-injury – hierarchy of controls and suggestions
* Glossary of terms and abbreviations
* Relevant legislation

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| SWP_logo | | **Role** | | **Care worker Resident Care Facility** | |
| **Task** | | **Assisting resident with meals / drinks** | |
| * Residents may need assistance with eating and drinking. * This may range from verbal prompting to physical assistance with eating and drinking. * Carers postures range from leaning forward to forward reach to 60 to 90 degrees. * Ideally Carers sit facing the resident, unless the resident is in bed and then they stand to the side of the bed to assist with eating and drinking. | | | | | |
|  | P1040643 | | P1040625 | | Buy Tri Stool online Winbex Saddle Seat |
| Assisting a resident who is in bed | Bending to assist a resident in a chair  Can be avoided by sitting close to the resident, facing the resident and perching on the chair. This position minimises over reach, and spinal bend and twist. | | Twisting to assist a resident in a chair at a table  This position minimises over reach, and spinal bend and twist | | Ergonomic stools such as tri-stool, or saddle seat with swivel steat base and friction castorscan minimise spinal bend and twist, and over reach.  Saddle seat |
| P1040649 |  | | P1040633 | | http://www.bambach.com.au/media/763/domes.jpg |

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| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical range of motion** | Neck flexion, reach forward and sideways to 60 – 90 degrees, forward bend and lunge. | | **Lift capacity** | To 1 kg (crockery) | | **Push / Pull force** | N/A | | **Shift duration / Roster** | Care staff can work from 7am in the morning through to overnight shifts.  Personal Care shifts can be from 6-8 hrs. | | **Environmental factors** | Indoor, chairs in resident home, fixed height low bed | | **Task rotation** | Nil, frequently changing task | | **Breaks** | 15 minute tea break, 30 minute meal break | | **PPE** | Closed shoes | |
| **Sitting** | |  | ✓ |  |  | Sit in residents chairs facing resident to assist with eating and drinking |
| **Standing** | |  | ✓ |  |  | Verbal instruction to resident |
| **Walking** | |  | ✓ |  |  | Short distance inside the room and the home |
| **Climbing** | | ✓ |  |  |  |  |
| **Stooping** | |  | ✓ |  |  | Assistance to resident who is in bed |
| **Bending** | |  | ✓ |  |  | Stand to assist resident who is seated |
| **Kneeling** | | ✓ |  |  |  |  |
| **Squatting** | |  | ✓ |  |  | Next to bed if low bed |
| **Crawling** | | ✓ |  |  |  |  |
| **Gripping** | |  |  | ✓ |  | Crockery, cutlery |
| **Forward Reach** | |  |  | ✓ |  | To 60 – 90 degrees |
| **Overhead Reach** | |  | ✓ |  |  | Light items from cupboards | **Risk of developing a MSI** |
| **Lift** | |  | ✓ |  |  | Crockery and cutlery | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | |  | ✓ |  |  | Crockery and cutlery |
| **Push / Pull** | | ✓ |  |  |  |  |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Neck:**  **Shoulders**:  **Wrist and forearms:**  **Thoracic:**  **Lumbar:**  **Repetition:** | Neck flexion, looking down when preparing meal, extension when reaching forwards to resident with spoon.  Dominant arm sustained and repetitive forward reach to 60- 90 degrees and abduction to 45 degrees.  Dominant arm Repetitive wrist extension and grip.  Sustained forward bending.  Bending forward.  Sustained and repetitive forward reach to 60 – 90 degrees and dominant arm and abduction to 45 degrees and fine grip. | | | | | |
| **Lift/Push/Pull demands-Very light** | | | | | | |

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| SWP_logo | | **Role** | | **Care Worker (CW) Residential care facility** | |
| **Task** | | **Bed sponge** | |
| * On a morning shift, residents require assistance with washing, showering and dressing, transport and ambulation. * Residents, who are very dependent, may require a wash in bed, rather than a shower. Two CWs always assist. * Postures adopted by CW range from above shoulder and extended forward reach to spinal bend, semi squat and lunge to access all areas for washing. * CWs assist the resident to turn from side to side, and they may need to lift heavy/rigid limbs to wash and dress the resident. | | | | | |
| The procedure is explained to the resident and the area is prepared;  Bed is raised to a safe working height for both CWs  Bed is moved to allow CWs access on each side. | Description: C:\Documents and Settings\All Users\Documents\My Pictures\LUMIXSimpleViewer\13012011\P1010996.JPG | | Description: C:\Documents and Settings\All Users\Documents\My Pictures\LUMIXSimpleViewer\13012011\P1020007.JPG | | Description: C:\Documents and Settings\All Users\Documents\My Pictures\LUMIXSimpleViewer\13012011\P1020002.JPG |
|  | CWs work together while the resident is on their side. Initially the face area is washed. | | Spinal bend and forward reach to 90 degrees. | | The resident is turned onto their side to access the back low lower areas |
| The process continues and the resident is then dressed in bed. | Movement patterns adopted by CWs - semi-squat, lunge forwards and sideways. | | Forward and sideways reach to up to 90 degrees | | Neck and spinal flexion. |

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| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical range of motion** | Reach forward and sideways to 90 degrees, occasional above shoulder reach, forward bend to reposition and stabilize resident, semi squat to turn resident. | | **Lift capacity** | To 10kg (resistive limb) | | **Push / Pull force** | To 15kg if resident resistive | | **Shift duration / Roster** | Care staff can work from 7am in the morning through to overnight shifts. Personal Care shifts can be from 6-8 hours. | | **Environmental factors** | Indoor | | **Task rotation** | Nil, frequently changing task | | **Breaks** | 15 minute tea break, 30 minute meal break | | **PPE** | Closed shoes, gloves | |
| **Sitting** | | ✓ |  |  |  |  |
| **Standing** | |  |  | ✓ |  | On either side of the bed |
| **Walking** | |  |  | ✓ |  | Short distance inside the room and the home |
| **Climbing** | | ✓ |  |  |  |  |
| **Stooping** | |  |  | ✓ |  | Washing all areas, increased if resident in fixed height low bed |
| **Bending** | |  |  | ✓ |  | Washing all areas, increased if resident in fixed height low bed |
| **Kneeling** | | ✓ |  |  |  |  |
| **Squatting** | |  | ✓ |  |  | Washing below thighs, feet and between toes |
| **Crawling** | | ✓ |  |  |  |  |
| **Gripping** | |  |  |  | ✓ | Wash cloth, clothing, sheet if required to turn |
| **Forward Reach** | |  |  |  | ✓ | Wash and dry all areas |
| **Overhead Reach** | |  | ✓ |  |  | Wash and dry all areas | **Risk of developing a MSI** |
| **Lift** | |  | ✓ |  |  | Sponge, shampoo, soap, arm / leg to wash all areas, can be heavy if limb dependant or rigid | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | |  | ✓ |  |  | Sponge, shampoo, soap, weight negligible |
| **Push / Pull** | |  |  | ✓ |  | Turn resident, reposition limbs |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Neck:**  **Shoulders:**  **Thoracic:**  **Lumbar:**  **Repetition:** | Neck flexion, looking down when washing resident below waist height and extension, looking up when reaching forwards.  Repetitive forward and sideways reach to 90 degrees.  Sustained forward bending.  Bending forward and sideways frequently to access all areas.  Semi-squat and leaning forward.  Frequent arm action and bend / lunge / squat to access all areas to wash. | | | | | |
| **Lift/Push/Pull demands-Medium** | | | | | | |

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| SWP_logo | | **Role** | | **Care Worker Resident Care Facility** | |
| **Task** | | **Dressing a resident seated in a chair** | |
| * Care staff may be required to assist dependant residents to dress and undress; these residents may be seated in a shower chair for showering, or in a wheelchair or standard chair after showering. * Assistance required varies from verbal direction and light physical assistance, to more physical assistance in which two care staff are required to assist. * Resident is encouraged to help dress themselves and appropriate clothing is encouraged if there is a level of resistance / tight limbs. * Postures assumed by care staff range from bend and semi squat to 45 degrees, to half kneel or lunge squat to access feet and lower legs. | | | | | |
|  | **P1110129** | | Dcp_2320 | | **Dcp_2321** |
|  | P1110130 | | Postures adopted by Carers   * Bend forwards * Lunge forward / sideways * Half kneel to dress lower areas * Reach 60 degrees | | P1090946 |

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| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical range of motion** | Spinal bend to 20 degrees, hip and knee flexion to 90 degrees, wrist extension to 30 degrees with full supination | | **Lift capacity** | To 12kg (resident limb, can be greater if limb resistive) | | **Push / Pull force** | To 10kg | | **Shift duration / Roster** | Care staff can work from 7am in the morning through to overnight shifts.  Personal Care shifts can be from 6-8 hrs. | | **Environmental factors** | Outdoor, ground slippery (if raining) or can be uneven ground | | **Task rotation** | Nil, frequently changing task. | | **Breaks** | 15 minute tea break, 30 minute meal break | | **PPE** | Closed shoes | |
| **Sitting** | | ✓ |  |  |  |  |
| **Standing** | |  |  | ✓ |  | At side of resident |
| **Walking** | |  | ✓ |  |  | Around resident |
| **Climbing** | | ✓ |  | ✓ |  |  |
| **Stooping** | |  |  | ✓ |  | May stoop to position clothing |
| **Bending** | |  |  | ✓ |  | To position clothing, dress legs and feet |
| **Kneeling** | |  | ✓ |  |  | Dress / undress legs and feet |
| **Squatting** | |  |  | ✓ |  | To initiate the lift |
| **Crawling** | | ✓ |  |  |  |  |
| **Gripping** | |  |  | ✓ |  | Clothing |
| **Forward Reach** | |  |  | ✓ |  | To 60 degrees |
| **Overhead Reach** | |  | ✓ |  |  | Lift clothing over resident head | **Risk of developing a MSI** |
| **Lift** | |  | ✓ |  |  | Limbs, can be contracted or resistive, increasing physical demands | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | |  | ✓ |  |  | Clothing (weight to 2kg) |
| **Push / Pull** | |  | ✓ |  |  | Assist resident forward to dress |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Neck:**  **Shoulders and elbows:**  **Wrists:**  **Hips and Knees:**  **Thoracic:**  **Lumbar:** | Neck flexion, (looking down) when assisting resident forward in chair, and extension (looking up) when reaching forwards to dress.  Forward and sideways reach to 60 degrees, elbow flexion to 90 degrees and pronation and supination.  Repetitive wrist extension to 30 degrees with grip to dress.  Repetitive bend, to 45- 90 degrees and forward and backward lunge, to full kneel.  Sustained forward bending**,** can be minimised by keeping elbows aimed into the body when dressing / undressing resident.  Bending forward to 20 degrees. | | | | | |
| **Lift/Push/Pull demands-** **Medium** | | | | | | |

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| SWP_logo | | **Role** | | **Resident Care Facility** | |
| **Task** | | **Dressing and undressing a resident in bed** | |
| * On a morning shift, residents require assistance with showering and dressing, transport and ambulation. * Residents, who are very dependent, may require a wash and dress in bed. Two Care staff assists with this procedure. * Care staff assists the resident to turn from side to side, and they may need to lift heavy / rigid limbs to wash and dress the resident. The bed should be moved to allow Care staff access the resident on each side of the bed, this may mean moving the bed. * Postures adopted by the Care staff range from above shoulder and extended forward reach to neck and spinal bend, semi squat and lunge to access all areas for dressing. | | | | | |
|  |  | |  | | P1060419 |
| The procedure is explained to the resident and the area is prepared, the bed is raised. | The upper limbs are dressed and the resident is then rolled from side to side to adjust clothing.  Carers adopt semi –squat and lunge forwards and sideways repetitively. | | A high volume of push / pull and bilateral hand and upper limb fine and gross grip, along with repetitive and sustained neck flexion. | | The resident is turned onto their side to access the back and lower areas |

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| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical range of motion** | Reach forward and sideways to 90 degrees, occasional above shoulder reach, forward bend to reposition and stabilize resident, semi squat to turn resident. | | **Lift capacity** | To 10kg (resistive limb) | | **Push / Pull force** | To 15kg if resident resistive | | **Shift duration / Roster** | Care staff can work from 7am in the morning through to overnight shifts.  Personal Care shifts can be from 6-8 hrs. | | **Environmental factors** | Indoor | | **Task rotation** | Nil, frequently changing task | | **Breaks** | 15 minute tea break, 30 minute meal break | | **PPE** | Closed shoes, gloves | |
| **Sitting** | | ✓ |  |  |  |  |
| **Standing** | |  |  | ✓ |  | On either side of the bed |
| **Walking** | |  |  | ✓ |  | Short distance inside the room and the home |
| **Climbing** | | ✓ |  |  |  |  |
| **Stooping** | |  |  | ✓ |  | Dressing all areas, increased if resident in fixed height low bed |
| **Bending** | |  |  | ✓ |  | Dressing all areas, increased if resident in fixed height low bed |
| **Kneeling** | | ✓ |  |  |  |  |
| **Squatting** | |  | ✓ |  |  | Dressing lower limbs |
| **Crawling** | | ✓ |  |  |  |  |
| **Gripping** | |  |  |  | ✓ | Clothing |
| **Forward Reach** | |  |  |  | ✓ | Dressing all areas |
| **Overhead Reach** | |  | ✓ |  |  | Dress all areas | **Risk of developing a MSI** |
| **Lift** | |  | ✓ |  |  | Clothing, resident limb if assistance is required, can be heavy if limb dependant or rigid | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | | ✓ |  |  |  |  |
| **Push / Pull** | |  |  | ✓ |  | Turn resident, reposition limbs |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Neck:**  **Shoulders:**  **Thoracic:**  **Lumbar:**  **Repetition:** | Neck flexion, looking down when dressing resident and extension, looking up when reaching forwards.  Repetitive forward and sideways reach to 90 degrees  Sustained forward bending  Bending forward and sideways frequently to access all areas  Semi-squat and leaning forward  Frequent arm action and bend / lunge / squat to access all areas to dress. | | | | | |
| **Lift/Push/Pull demands-Medium** | | | | | | |

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| SWP_logo | | **Role** | | | **Care worker Resident Care Facility** |
| **Task** | | | **Personal grooming, cleaning teeth, brushing hair** |
| * Care staff assist those residents who require it, with personal grooming. * Assistance ranges from verbal instructions only to full assistance with cleaning teeth, washing hair and shaves (men). * Repetitive and sustained reach and upper limb elevation with bilateral gross and fine grip occurs with these tasks. * Increased load is placed onto care staff if jaw support is required, when cleaning teeth. | | | | | |
| **Dcp_3081** | DCP_0917 | | **P1010840** | **P1010843** | |
| Assistance may be provided whilst the resident is in bed, in which case the head of the bed is raised and the resident is positioned close to the Carer | Positioning a resident in a wheelchair to minimise over reach and twist by Carer | | If in a shower chair or wheelchair, Carer reaches forwards and sideways frequently to 45 to 60 degrees | Spinal bending may occur to access all areas | |
| Carer bends through upper back if jaw support is required to brush resident teeth. |  | | http://www.nidcr.nih.gov/NR/rdonlyres/6773D99A-1A9B-439E-9E89-09E353FB0CE7/0/standbehindFemale.gif | P2050026 | |

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| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical range of motion** | Reach forward and sideways to 90 degrees, forward bend. | | **Lift capacity** | Negligible | | **Push / Pull force** | Negligible, can be increased if brushing teeth with face and jaw spasm present | | **Shift duration / Roster** | Care staff can work from 7am in the morning through to overnight shifts.  Personal Care shifts can be from 6-8 hrs. | | **Environmental factors** | Indoor | | **Task rotation** | Nil, frequently changing task | | **Breaks** | 15 minute tea break, 30 minute meal break | | **PPE** | Closed shoes, gloves | |
| **Sitting** | | ✓ |  |  |  |  |
| **Standing** | |  |  | ✓ |  | For all tasks |
| **Walking** | |  | ✓ |  |  | Short distance inside the room and the home |
| **Climbing** | | ✓ |  |  |  |  |
| **Stooping** | |  |  | ✓ |  | If jaw support is required, and to access all areas of face to shave |
| **Bending** | |  |  | ✓ |  | If jaw support is required, and to access all areas of face to shave |
| **Kneeling** | | ✓ |  |  |  |  |
| **Squatting** | | ✓ |  |  |  |  |
| **Crawling** | | ✓ |  |  |  |  |
| **Gripping** | |  |  |  | ✓ | Toothbrush, shower hose, razor, hairbrush / comb, mainly dominant hand |
| **Forward Reach** | |  |  |  | ✓ | To 60 to 90 degrees, occasionally to 120 degrees |
| **Overhead Reach** | |  | ✓ |  |  | Occasionally to wash hair | **Risk of developing a MSI** |
| **Lift** | | ✓ |  |  |  |  | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | | ✓ |  |  |  |  |
| **Push / Pull** | |  |  | ✓ |  | Dominant hand to brush teeth |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Neck:**  **Shoulders:**  **Elbows / wrists and fingers:**  **Thoracic:**  **Lumbar:**  **Repetition:** | Neck flexion, to view when cleaning teeth, or shaving resident, or brushing hair.  Repetitive forward and sideways reach to 60 - 90 degrees.  Repetitive extension and pronation and supination with dominant hand wrist extension and strong grip.  Sustained forward bending.  Bending forward frequently.  Frequent arm action and dominant hand strong grip. | | | | | |
| **Lift/Push/Pull demands-Very light** | | | | | | |

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| SWP_logo | | **Role** | | **Resident Care Facility** | |
| **Task** | | **Showering a resident in standing** | |
| * On a morning shift, residents are assisted with showering and dressing, transport and ambulation. Residents may be relatively independent requiring verbal and light assistance with showering and dressing. * The volume of showers per Staff is up to up to 4-6 per shift * The resident who is able to stand may hold onto a grab rail, or stand unaided, and wash their top half with instruction. The Carer washes their hair, back, lower regions and feet. * Postures adopted by the Carer range from above shoulder reach to full squat and bend for assisting to wash lower trunk, legs and feet. | | | | | |
| shower standing client 1 | shower standing client 2 | | shower standing client 3 | | shower standing client 4 |
| Above shoulder reach and repetitive shoulder circumduction | Lunge / semi –squat to wash back and low trunk areas. | | Low squat / bend | | To wash lower legs and feet. |

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| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical Range of Motion:** | Reach above shoulder height, semi-squat and bend to reach low areas | | **Lift capacity** | Negligible | | **Push / Pull force** | Negligible | | **Shift duration / Roster** | Care staff can work from 7am in the morning through to overnight shifts.  Personal Care shifts can be from 6-8 hrs. | | **Environmental factors** | Indoor, wet floor | | **Task rotation** | Nil, frequently changing task | | **Breaks** | 15 minute tea break, 30 minute meal break | | **PPE** | Closed shoes, gloves | |
| **Sitting** | | ✓ |  |  |  |  |
| **Standing** | |  |  | ✓ |  | Wet tiled flooring mostly |
| **Walking** | |  |  | ✓ |  | Short distance inside the room and the home |
| **Climbing** | | ✓ |  |  |  |  |
| **Stooping** | |  |  | ✓ |  | Washing below thighs |
| **Bending** | |  |  | ✓ |  | Washing below thighs |
| **Kneeling** | | ✓ |  |  |  |  |
| **Squatting** | |  |  | ✓ |  | Washing below thighs, feet and between toes |
| **Crawling** | | ✓ |  |  |  |  |
| **Gripping** | |  |  |  | ✓ | Shower rose and wash cloth |
| **Forward Reach** | |  |  |  | ✓ | Wash and dry all areas |
| **Overhead Reach** | |  | ✓ |  |  | Wash hair unless resident sits on shower stool | **Risk of developing a MSI** |
| **Lift** | |  | ✓ |  |  | Sponge, shampoo, soap, weigh negligible | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | |  | ✓ |  |  | Sponge, shampoo, soap, weigh negligible |
| **Push / Pull** | | ✓ |  |  |  |  |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Neck:**  **Shoulders:**  **Thoracic:**  **Lumbar:**  **Repetition:** | Neck flexion, looking down when washing resident below waist height, and extension, looking up when reaching forwards.  Repetitive forward and sideways reach  Sustained forward bending  Bending down frequently to access all areas  Semi-squat and leaning forward  Frequent arm action and bend / lunge / squat to access all areas to wash. | | | | | |
| **Lift/Push/Pull demands-Light** | | | | | | |

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| SWP_logo | | **Role** | | | **Care Worker Resident Care Facility** |
| **Task** | | | **Shower in shower chair** |
| * On an early shift, Residents require full assistance with personal care, showering and dressing, transport and ambulation. * Residents may be relatively independent requiring verbal and light assistance with showering and dressing, to require maximum support, including limb support. * Some Residents have increased tone in their limbs, making them very heavy to manoeuvre. (For example lifting an arm away from the Resident’s side to wash all areas) * The volume of showers per staff is up to 5-6 residents. | | | | | |
| P1050815 |  | |  |  | |
| Staff is required to demonstrate the capacity to:   * bend * lunge | * squat, and * frequently kneel / half kneel | | * reach forwards and sideways to 60 degrees frequently | * to 90 to 120 degrees occasionally to access all body parts to wash hair. | |
| P1050657 | P1050675 | | Tilt-in-space shower chair provides more flexibility for care staff for resident transfers and for showering and dressing. | P1050813 | |

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| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical Range of Motion:** | Thoracic and lumbar sustained and repetitive flexion >30 degrees  Sustained and repetitive hip and knee flexion > 90 degrees  Bilateral shoulder flexion from 60 to 120 degrees. | | **Lift capacity** | N/A | | **Push / Pull** **force** | Can be strong pull force required to move limbs if spasticity in limbs. | | **Shift duration / Roster** | Care staff can work from 7am in the morning through to overnight shifts.  Personal Care shifts can be from 6-8 hrs. | | **Environmental factors** | Indoor | | **Task rotation** | Nil | | **Breaks** | 15 minute tea break, 30 minute meal break | | **PPE** | Closed in shoes, rubber boots | |
| **Sitting** | | ✓ |  |  |  |  |
| **Standing** | |  |  | ✓ |  |  |
| **Walking** | |  | ✓ |  |  |  |
| **Climbing** | | ✓ |  |  |  |  |
| **Stooping** | |  |  | ✓ |  | Frequent stooping to access all resident areas to wash |
| **Bending** | |  |  | ✓ |  | Frequent bending to access all resident areas to wash |
| **Kneeling** | |  |  | ✓ |  | To access feet and perianal areas |
| **Squatting** | |  |  | ✓ |  | Frequent squatting to access all Resident / resident areas to wash |
| **Crawling** | |  | ✓ |  |  |  |
| **Gripping** | |  |  | ✓ |  |  |
| **Forward Reach** | |  |  | ✓ |  |  |
| **Overheard Reach** | |  |  | ✓ |  | Frequent reach above shoulder height with spinal bend to access all areas of resident to wash | **Risk of developing a MSI** |
| **Lift** | |  | ✓ |  |  | Limbs to wash under arms, limbs can be resistive increasing force required | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | | ✓ |  |  |  |  |
| **Push / Pull** | |  | ✓ |  |  | Can be strong pull force required to move limbs if spasticity in limbs |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Neck:**  **Shoulders**:  **Thoracic:**  **Lumbar:** | Neck flexion, looking down when showering, and extension, looking up when reaching forwards.  Repetitive extended forward and above shoulder reach and can be forceful pushing, pulling with arms outstretched to manoeuvre resistive limbs.  Sustained forward bending  Bending down frequently to access all areas of resident to wash. Twisting and reaching over the shower chair. | | | | | |
| **Lift/Push/Pull demands-Medium** | | | | | | |

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| *SWP_logo* | | **Role** | | **Care Worker Resident Care Facility** | |
| **Task** | | **Shower Residents in a Bed Bath** | |
| * Residents may be showered in a bed baths. There are various types of bed baths that often are moveable and washes mostly occur in a bathroom area. Bed baths are often height adjustable and workers can adjust the height to their own height. * Workers transfer residents into a bed bath using a ceiling lifter or mobile floor lifter usually with at least two workers. * During a shower workers will turn and roll a resident to remove clothing, wash their limbs, torso and body. * Residents will be towelled down and tasks such as shaving, washing hair, brushing hair and brushing teeth may also occur. | | | | | |
| *P1240322* |  | |  | |  |
| Various bed baths are used. Most are adjustable in height and some have adjustable sides that raise and lower. | Residents are transferred onto a bed bath using a ceiling hoist or mobile lifter. The edges of the bath may then be raised. | | Workers will roll the resident to remove the sling and clothing from the resident. | | Some baths require a drainage tube to be plugged into a floor drain. |
|  | *DSC_0377* | | *DSC_0682* | | *Macintosh HD:private:var:folders:yt:5sjj56gd7_79l7s3c8lsk2fw0000gn:T:TemporaryItems:20141029_154934.jpg* |
| Workers shower the resident using a hand held shower head. The workers may roll and turn the resident. | Workers wipe the resident with a wet cloth. This can include holding and moving limbs. Tasks such as shaving and washing hair may occur as well. | | Residents are towelled down, often in the bed bath. Before dressing. | | The resident is rolled onto their side when inserting a sling. |

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| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical range of motion** | Shoulder to 60 degree flexion. | | **Lift capacity** | Varies depending on the abilities and size of the resident. Lifting and holding limbs. | | **Push / Pull force** | Various forces required pushing bed baths, residents in lifters and turning a resident. | | **Shift duration / Roster** | Variable shift times, examples:   * Morning 6.45am to 3.15pm. * Afternoon 2.45 to 9.15pm. * Shifts vary over a 7 day roster. | | **Environmental factors** | Bathrooms, wet floors. | | **Task rotation** | A shower may take 5 to 10 minutes. | | **Breaks** | Various depending on shift duration. | | **PPE** | Closed-in shoes, gloves as needed. | |
| **Sitting** | | ✓ |  |  |  |  |
| **Standing** | |  |  |  | ✓ | Bathroom areas, tiles or vinyl often wet |
| **Walking** | |  | ✓ |  |  | Short distances inside the bathroom |
| **Climbing** | | ✓ |  |  |  |  |
| **Stooping** | | ✓ |  |  |  |  |
| **Bending** | |  | ✓ |  |  | Leaning forward over the edge washing |
| **Kneeling** | |  | ✓ |  |  | Fitting the drainage tube into a floor drain |
| **Squatting** | |  | ✓ |  |  | Fitting the drainage tube into a floor drain |
| **Crawling** | | ✓ |  |  |  |  |
| **Gripping** | |  |  |  | ✓ | Wash cloth, shower handle, wash products |
| **Forward Reach** | |  |  | ✓ |  | Washing and towelling down a resident |
| **Overhead Reach** | |  | ✓ |  |  | Ceiling hoist | **Risk of developing a MSI** |
| **Lift** | |  | ✓ |  |  | Holding resident limbs, clothing and towels | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | |  | ✓ |  |  | Towels and clothes short distances |
| **Push / Pull** | |  |  | ✓ |  | Rolling a resident, moving a lifter / bed bath |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Shoulders:**  **Lower Back:**  **Repetition:** | Repetitive movement rolling and turning a resident.  High force moving mobile lifters.  Leaning forward over the bed bath edges rolling and showering a resident.  A resident will be rolled and turned several times to undress, remove sling, wash, towel-down, dress and fit a sling.  A worker may complete multiple bed bath showers of different residents on a shift. | | | | | |
| **Lift/Push/Pull demands-Medium** | | | | | | |

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| SWP_logo | | | **Role** | | | **Care Worker Resident Care Facility** | | |
| **Task** | | | **Toileting and Freshening** | | |
| * Various equipment is available for assisting residents to use the toilet including rails, mobile commode chairs and toilet surrounds. * Residents may walk to the bathroom and require supervision or light assistance to sit on the toilet or a raiser (toilet surround or commode). * Design of bathrooms can vary with some toilets in the corner, or some are in the centre and allow access from both sides. * Workers may need to empty pans and bottles in a utilit room and operate an automwasher for cleaning equipment. * Assistance from workers is provided to residents with tasks they can not complete independently which will vary and can incldue tasks such as lowering and raising trousers, fitting sanitary pads or wiping. | | | | | | | | |
| IMG_5424 | | IMG_5440 | | | IMG_5425 | | | IMG_5322 |
| Example of a mobile shower / commode chair. A resident may sit on the chair or be wheeled over the toilet by staff. Force can vary. Can be very high for bariatric residents. | | Example of a high back shower / commode chair with leg supports and fold up arms. | | | Example of a corner toilet with hand rails. A toilet seat raise can be fitted as well in some instances. | | | Example of a toilet with a central positon with access from both sides. |
| IMG_5320 | P1100727 | | | 19 03 2010 017 | | | 19 03 2010 022 | |
| Bed pans and bottles are stored in a utility room. Some reaching is often required to access shelving or racking. | A utility room may have a sink and/or auto washer that will clean the pan / bottle. | | | Assistance may need to be provided to residents with lowering or raising trousers, wiping and transferring on / off the toilet. | | | Assistance may be required with fitting new sanitary pads. | |

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| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical range of motion** | Shoulder to 60 degree flexion. | | **Lift capacity** | <3kg walking aids, toilet surround or pans / bottles. | | **Push / Pull force** | Force up to 15kgF at times with a resident sitting on a commode chair. Assisting with standing a resident up. | | **Shift duration / Roster** | Variable shift times e.g.:   * Morning 6.45am to 3.15pm. * Afternoon 2.45 to 9.15pm. * Shifts vary over a 7 day roster. | | **Environmental factors** | Indoors, bathroom area. | | **Task rotation** | Short periods mostly. | | **Breaks** | Various depending on shift duration. | | **PPE** | Closed-in shoes and gloves. | |
| **Sitting** | | ✓ |  |  |  |  |
| **Standing** | |  |  |  | ✓ | Various surfaces tile or vinyl mostly |
| **Walking** | |  |  | ✓ |  | Short distances in the toilet / bathroom area |
| **Climbing** | | ✓ |  |  |  |  |
| **Stooping** | | ✓ |  |  |  |  |
| **Bending** | |  | ✓ |  |  | Adjusting clothing, wiping and freshening |
| **Kneeling** | | ✓ |  |  |  |  |
| **Squatting** | | ✓ |  |  |  |  |
| **Crawling** | | ✓ |  |  |  |  |
| **Gripping** | |  |  | ✓ |  | Chair handles, clothing, pads and mobility aids |
| **Forward Reach** | |  | ✓ |  |  | Assisting with clothing, pads and wiping |
| **Overhead Reach** | |  | ✓ |  |  | High shelves in utility rooms at times | **Risk of developing a MSI** |
| **Lift** | |  | ✓ |  |  | Pans and bottles <1kg, walking aids <3kg | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | | ✓ |  |  |  |  |
| **Push / Pull** | |  |  |  | ✓ | Pushing a resident on a commode up to 15kgF |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Shoulders:**  **Lower Back:**  **Repetition:** | Awkward posture reaching when assisting a resident.  High force pushing a resident up to 15kgF.  Residents may be assisted at various times throughout a shift. Often the task is completed along with other tasks such as showering, dressing or ADLs.  A worker may assist a resident more than once during a shift. | | | | | |
| **Lift/Push/Pull demands-Medium** | | | | | | |

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| SWP_logo | | **Role** | | **Care worker Resident Care Facility** | |
| **Task** | | **Push / pull wheelchair, princess chair, shower chair and resident chairs** | |
| * Pushing of residents in mobile chairs occurs frequently through a shift. * Chairs include shower chairs, wheelchairs, princess / cloud chairs and other chairs ons wheels. * Residents may be pushed short distances inside a room to a bathroom or ensuite. * Residents may be pushed longer distances to dining rooms, lounge areas and activity rooms. * Recliners chairs may require high force to move, in some cases they are only moved inside a room short distances. | | | | | |
|  |  | |  | | **F:\DCIM\100OLYMP\P8056756.JPG** |
| Residents are pushed in various types of wheelchairs inside a facility to events, activities and meals. | Residents may need to be pushed up or down ramps. Force required will vary depending on the chair and the resident. | | Footplates may need to be removed or adjusted when a resident stands up or gets into a chair. | | Recliner chairs may have wheels and be able to be pushed. These often require more force to move and may utilise two workers. |
|  | P8266944 | | C:\Users\Tracy\Pictures\work pics\P1140943.JPG | | Macintosh HD:private:var:folders:yt:5sjj56gd7_79l7s3c8lsk2fw0000gn:T:TemporaryItems:20141029_154934.jpg |
| Cloud / Princess chairs are moved with residents in them. The force will vary. The chairs can be tilted using the handles. | Some workers may push a chair using a neutral palm grip and holding onto the sides of the chair, rather than the handles. | | A lunge action is used to start or stop the movement of a chair on wheels. | | Macintosh HD:private:var:folders:yt:5sjj56gd7_79l7s3c8lsk2fw0000gn:T:TemporaryItems:20141029_154934.jpgWhen moving residents on a shower chair or mobile commode chair at times them may need to be pushed from in front. |

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| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical range of motion** | Shoulder to 60 degree flexion. | | **Lift capacity** | N/A. | | **Push / Pull force** | Force up to 10kgF for wheelchairs. Higher for sloping surfaces or bariatric residents. Princess and recliner chairs up to 20kgF. | | **Shift duration / Roster** | Variable shift times, examples:   * Morning 6.45am to 3.15pm. * Afternoon 2.45 to 9.15pm. * Shifts vary over a 7 day roster. | | **Environmental factors** | Indoors mostly. | | **Task rotation** | Short periods mostly. | | **Breaks** | Various depending on shift duration. | | **PPE** | Closed-in shoes, gloves as needed. | |
| **Sitting** | | ✓ |  |  |  |  |
| **Standing** | |  |  |  | ✓ | Various surfaces |
| **Walking** | |  |  |  | ✓ | Various distances pushing chairs |
| **Climbing** | | ✓ |  |  |  |  |
| **Stooping** | | ✓ |  |  |  |  |
| **Bending** | | ✓ |  |  |  |  |
| **Kneeling** | |  | ✓ |  |  | Adjust foot plates or residents’ feet |
| **Squatting** | | ✓ |  |  |  |  |
| **Crawling** | | ✓ |  |  |  |  |
| **Gripping** | |  |  |  | ✓ | Handles and grips |
| **Forward Reach** | |  |  | ✓ |  | Pushing and turning chairs |
| **Overhead Reach** | | ✓ |  |  |  |  | **Risk of developing a MSI** |
| **Lift** | | ✓ |  |  |  |  | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | | ✓ |  |  |  |  |
| **Push / Pull** | |  |  |  | ✓ | Variable force depending on the device |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Shoulders:**  **Lower Back:**  **Repetition:** | Sustained force pushing trolleys and items on wheels longer distances.  Sustained force pushing a mobile chair. Can be high force on carpet, with large chairs or bariatric residents.  Trolleys, linen skips and beds are moved at varying frequencies.  Most trolleys are pushed short distances.  At times trolleys and skips may be pushed from one room to the next when making beds, showering residents and distributing items. | | | | | |
| **Lift/Push/Pull demands-Medium** | | | | | | |

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| SWP_logo | | **Role** | | **Care worker Resident Care Facility** | |
| **Task** | | **Assisting an ambulant resident in and out of a chair - two person assist** | |
| * Care staff assist residents who are ambulant to stand up from a chair or bed, and then to sit down in another chair or back to bed. * Residents may use aids such as walking stick, quad stick, or walking frame. * Resident must be able to reliably weight bear and undertake at least 5 steps. * Assistance should be mainly standby verbal, with light touch and assistance. Care staff giving clear instructions to allow the resident to stand from sitting, and clear instructions to encourage a steady independent walking pattern, with light touch to guide only. * To sit back into the chair the care staff’s instruct the resident to lean forward from their hips, bend their knees and place their bottom in to the chair once they need to sit down. * Assistance is provided by each care staff positioned on each side of the resident. | | | | | |
|  | P1040059 | | P1040054 | |  |
| The resident is advised to lean forward and shuffle forward in the seat.  The frame (or other walking aid) is steadied by the care staff while the resident stands | Assistance is provided by care staff positioned on each side of the resident, with open hand support at the residents’ shoulder and low back. | | Carers asssume a semi squat position | | Sideways lunge to assist the person to stand  The resident is assisted back into the chair. Carers assume a sideways lunge to assist |
| P1010972 | P1010974 | | P1010975 | | P1010978 P1040046 |

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| **Critical physical demands** | | | | | | |
| **Physical Demand** | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical range of motion** | Shoulder flexion and abduction to 45 degrees, hip and knee flexion. | | **Lift capacity** | Nil | | **Push / Pull force** | To 3kg | | **Shift duration / Roster** | Care staff can work from 7am in the morning through to overnight shifts. Personal Care shifts can be from 6-8 hrs. | | **Environmental factors** | Inside different floor surfaces | | **Task rotation** | Nil, frequently changing task | | **Breaks** | 15 minute tea break, 30 minute meal break | | **PPE** | Closed shoes | |
| **Sitting** | ✓ | ✓ |  |  |  |
| **Standing** |  |  | ✓ |  | At side of resident |
| **Walking** |  | ✓ |  |  | At side of resident |
| **Climbing** | ✓ |  |  |  |  |
| **Stooping** |  | ✓ |  |  | To provide verbal direction to stand from sitting |
| **Bending** |  | ✓ |  |  | To provide verbal direction and light physical assistance to stand from sitting |
| **Kneeling** | ✓ |  |  |  |  |
| **Squatting** |  | ✓ |  |  | To provide verbal direction and light physical assistance to stand from sitting |
| **Crawling** | ✓ |  |  |  |  |
| **Gripping** |  |  | ✓ |  | Open hand touch to assist resident |
| **Forward Reach** |  |  | ✓ |  | To 45-60 degrees to guide resident, assisting around resident shoulder and low back. |
| **Overhead Reach** | ✓ |  |  |  |  | **Risk of developing a MSI** |
| **Lift** | ✓ |  |  |  |  | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | ✓ |  |  |  |  |
| **Push / Pull** |  | ✓ |  |  | Assist resident to lean forward and stand |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | |
| **Repetitive action / sustained posture** | | | | | |
| **Neck:**  **Shoulders:**  **Hips and Knees:**  **Thoracic / Lumbar:** | Neck flexion, looking down when assisting resident to stand and position frame.  Forward and sideways reach to 45 degrees  Repetitive bend to 45 degrees, and forward and sideways lunge  Bending forward to guide resident from sit to stand. Can be minimised with adoption of semi-squat / lunge. | | | | |
| **Lift/Push/Pull demands-Medium** | | | | | |

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| SWP_logo | | **Role** | | **Care Worker Resident Care Facility** | |
| **Task** | | **Transferring resident from bed to chair with a lifter** | |
| * Residents require assistance with transport and ambulation. * Two Care staff assist, and if the resident cannot reliably weight bear then a lifter (hoist) is used. The resident may be transferred into a shower chair or wheelchair after personal care. If the resident is very heavy then up to 3-4 staff may assist. * Postures adopted by the Care staff range from forward reach to spinal bend, semi squat and lunge to apply lifter sling and then manoeuvre the lifter within the resident room. Ideally the bed should be away from the wall to allow Care staff access on each side. Initially the resident is assisted to roll onto their side / the lifter sling is applied / the resident is positioned onto their back to bring the straps through / the lifter is positioned in place. | | | | | |
| Description: P1000938 | Description: P1000943 | | Description: P1000951 | | Description: P1010074 |
|  |  | |  | |  |
| Resident is rolled from side to side to apply the sling, and leg straps are crossed over to secure the resident safely in the sling | Two care staff work together to manoeuvre the lifter while taking care of the resident. The chair is positioned at an angle to minimize manoeuvring the lifter. | | The resident is assisted into the chair either from the side or front (depending on how close the resident can be positioned without too much push / pull of the sling) | | The resident is assisted to lean forward from the shoulders to remove the sling, or the lifter can be used to remove the sling at the completion of the transfer. |

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| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical range of motion** | Reach forward and sideways to 45 - 60 degrees, occasional above shoulder reach, forward bend to reposition and stabilize resident, semi squat / lunge to manoeuvre lifter and chair. | | **Lift capacity** | To 10kg (resistive limb) | | **Push / Pull force** | To 12kg if resident heavy | | **Shift duration / Roster** | Care staff can work from 7am in the morning through to overnight shifts.  Personal Care shifts can be from 6-8 hrs. | | **Environmental factors** | Indoor, floor surfaces vary from carpet to vinyl/ tiles | | **Task rotation** | Nil, frequently changing task | | **Breaks** | 15 minute tea break, 30 minute meal break | | **PPE** | Closed shoes, gloves | |
| **Sitting** | | ✓ |  |  |  |  |
| **Standing** | |  |  | ✓ |  | On either side of the bed |
| **Walking** | |  |  | ✓ |  | Short distance inside the room and the home |
| **Climbing** | | ✓ |  |  |  |  |
| **Stooping** | |  |  | ✓ |  | Apply lifter sling and roll resident onto side |
| **Bending** | |  |  | ✓ |  | Apply lifter sling and roll resident onto side, lower resident into chair / onto and off bed in sling. |
| **Kneeling** | |  | ✓ |  |  | Remove lifter straps from under thighs when resident is transferred into chair. |
| **Squatting** | |  | ✓ |  |  | Semi squat / lunge to manoeuvre lifter and transfer resident. |
| **Crawling** | | ✓ |  |  |  |  |
| **Gripping** | |  |  |  | ✓ | Lifter handles, boom, sling |
| **Forward Reach** | |  |  |  | ✓ | Position resident for sling, lifter transfer |
| **Overhead Reach** | |  | ✓ |  |  | Assist to turn lifter from boom | **Risk of developing a MSI** |
| **Lift** | |  | ✓ |  |  | Clothing, resident limb if assistance is required, can be heavy if limb dependant or rigid | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | | ✓ |  |  |  |  |
| **Push / Pull** | |  |  | ✓ |  | Turn resident, reposition limbs, manoeuvre lifter and chair. |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Neck:**  **Shoulders:**  **Thoracic:**  **Lumbar:**  **Repetition:** | Neck flexion, looking down when rolling resident and extension, looking up when reaching forwards to apply sling.  Repetitive forward and sideways reach to 45 to 60 degrees  Sustained forward bending to 15 degrees  Bending forward and sideways frequently to access all areas, can be minimised by maintaining spinal curves and bending more from hips and knees / Semi-squat and leaning forward  Frequent arm action and bend / lunge / squat | | | | | |
| **Lift/Push/Pull demands-Medium** | | | | | | |

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| SWP_logo | | **Role** | | **Care Worker Resident Care Facility** | |
| **Task** | | **Transferring ambulant resident from bed to chair** | |
| * Residents are assisted with washing, showering and dressing, transport and ambulation. If the resident is ambulant they generally require some physical assistance plus a walking aid. * A risk assessment determines whether the resident needs one or two person assistance to get out of bed. Resident can cooperate and follow instructions, and reliably weight bear and walk. Two staff attends unless the resident is independent with mobility and * Postures adopted by the Care staff range from forward reach to spinal bend, semi squat and lunge to assist the resident from lying to sitting. | | | | | |
| P1060419 | P1060405 | | P1060404 | | The resident is then assisted to stand and walk to transfer into a shower chair or wheel chair |
| **Two Care staff** - a Carer on each side of the bed. The resident is assisted to roll on to their side, and instructed to push down with top arm to sit up. | The head end of the bed can be raised as the resident sits, one Carer supports from behind, the other in front. | | Care staff lunge to the side to assist the resident to sit up.  Light support is provided while residence gains balance to sit. | | P2050004 |
| **One Care staff** - resident needs mainly verbal direction.  Instructed to roll to the side and sit up from side lying.  The head end of the bed can be raised to assist them to sit. | P1060420 | | Resident encouraged to lean forward, put hands onto bed adopt wide base with feet and stand up.  Carer may assist with light touch at shoulder and hip. | | P1040043P1040047 |

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| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical range of motion** | Shoulder flexion and abduction to 60 degrees, lumbar and thoracic flexion to 20 degrees, hip and knee flexion to 45 degrees. | | **Lift capacity** | To 10kg (resistive limb) | | **Push / Pull force** | To 10kg if resident resistive | | **Shift duration / Roster** | Care staff can work from 7am in the morning through to overnight shifts.  Personal Care shifts can be from 6-8 hrs. | | **Environmental factors** | Indoor | | **Task rotation** | Nil, frequently changing task | | **Breaks** | 15 minute tea break,  30 minute meal break | | **PPE** | Closed shoes, gloves | |
| **Sitting** | | ✓ |  |  |  |  |
| **Standing** | |  |  | ✓ |  | On either side of the resident |
| **Walking** | |  |  | ✓ |  | Short distance inside the room and the home |
| **Climbing** | |  | ✓ |  |  | May place a knee onto bed to stabilise resident in sitting |
| **Stooping** | |  |  | ✓ |  | Place footwear on prior to resident standing |
| **Bending** | |  |  | ✓ |  | Assisting to position resident |
| **Kneeling** | |  | ✓ |  |  | May place a knee onto bed to stabilise resident in sitting |
| **Squatting** | |  | ✓ |  |  | Assisting to position resident |
| **Crawling** | | ✓ |  |  |  |  |
| **Gripping** | |  |  |  | ✓ | Open hand grip to assist resident at shoulders and hips |
| **Forward Reach** | |  |  |  | ✓ | Position resident |
| **Overhead Reach** | | ✓ |  |  |  |  | **Risk of developing a MSI** |
| **Lift** | |  | ✓ |  |  | Resident limb if assistance is required | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | | ✓ |  |  |  |  |
| **Push / Pull** | |  |  | ✓ |  | Turn resident, reposition limbs |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Neck:**  **Shoulders**:  **Knees:**  **Lumbar:**  **Repetition:** | Neck flexion, looking down when dressing resident and extension, looking up when reaching forwards.  Repetitive forward and sideways reach to 60 degrees, occasional above shoulder reach.  Repetitive knee flexion to 45 to 60 degrees and lateral lunge.  Bending forward and sideways frequently to access all areas  Semi-squat and leaning forward  Frequent arm action and bend / lunge / squat to assist resident from lying to sitting. | | | | | |
| **Lift/Push/Pull demands-** **Medium** | | | | | | |

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| SWP_logo | | **Role** | | **Carer worker Resident Care Facility** | |
| **Task** | | **Transferring resident using sling lifter** | |
| * Dependant residents who cannot reliably weight bear require assistance with personal care and transfers with the aid of a lifter. * If the resident has poor head and trunk control and is unable to sit over the side of the bed a sling lifter is required. * Two Care staff assist (may be more Care staff if risk assessment indicates). * Postures adopted by the Care staff range from forward reach to spinal bend, semi squat and lunge and half kneel to assist in all aspects of the transfer. | | | | | |
| Description: P1000938 |  | |  | |  |
| Initially the resident is assisted to roll onto their side to apply the sling  Resident is lowered into the chair. | Once sling is secured the resident is raised in the lifter.  Staff work together to position resident in the chair. | | The lifter is moved away from the bed.  Push pull forces can be very high with a resident who has spasm / or is very heavy. | | Chair is positioned within the lifter base.  CW postures range from squat/ lunge/ half kneel. |
|  |  | | The sling is removed by leaning the resident forward, or by using the lifter boom. To move the leg straps a half kneel is adopted by Care staff. | | Description: P1010091 |

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| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical range of motion** | Thoracic and lumbar flexion to 20 degrees, hip knee flexion 45 – 90 degrees. | | **Lift capacity** | To 10kg (resistive limb) | | **Push / Pull force** | To 12kg if resident resistive | | **Shift duration / Roster** | Care staff can work from 7am in the morning through to overnight shifts.  Personal Care shifts can be from 6-8 hrs. | | **Environmental factors** | Indoor | | **Task rotation** | Nil, frequently changing task | | **Breaks** | 15 minute tea break, 30 minute meal break | | **PPE** | Closed shoes, gloves | |
| **Sitting** | | ✓ |  |  |  |  |
| **Standing** | |  |  | ✓ |  | On either side of the bed |
| **Walking** | |  |  | ✓ |  | Short distance inside the room and the home |
| **Climbing** | | ✓ |  |  |  |  |
| **Stooping** | |  |  | ✓ |  | Dressing all areas, increased if resident in fixed height low bed |
| **Bending** | |  |  | ✓ |  | Dressing all areas, increased if resident in fixed height low bed |
| **Kneeling** | | ✓ |  |  |  |  |
| **Squatting** | |  | ✓ |  |  | Dressing lower limbs |
| **Crawling** | | ✓ |  |  |  |  |
| **Gripping** | |  |  |  | ✓ | Clothing |
| **Forward Reach** | |  |  |  | ✓ | Dressing all areas |
| **Overhead Reach** | |  | ✓ |  |  | Dress all areas | **Risk of developing a MSI** |
| **Lift** | |  | ✓ |  |  | Clothing, resident limb if assistance is required, can be heavy if limb dependant or rigid | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | | ✓ |  |  |  |  |
| **Push / Pull** | |  |  | ✓ |  | Turn resident, reposition limbs |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Neck:**  **Shoulders:**  **Elbows:**  **Thoracic:**  **Knees:**  **Lumbar:**  **Repetition:** | Neck flexion, looking down when dressing resident and extension, looking up when reaching forwards.  Repetitive forward and sideways reach to 60 degrees  Flexion to 90 degrees and full supination to half range pronation and wrist extension.  Sustained forward bending.  Bend to 90 degrees, sideways lunge  Bending forward and sideways frequently to access all areas.  Semi-squat and leaning forward.  Frequent arm action, grip and bend / lunge / squat to access all areas to assist in transfer. | | | | | |
| **Lift/Push/Pull demands-Medium** | | | | | | |

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| SWP_logo | | **Role** | | **Care Worker Resident Care Facility** | |
| **Task** | | **Transferring resident from bed to chair or chair to chair using a ceiling hoist** | |
| * Hoist systems are used for transferring residents unable to safely weight bear for bed to chair transfer. The motors will have a designated safe working load. (Usually 200kg+). * Some facilities have ceiling tracking systems installed above a resident’s bed in some rooms. A portable gantry can also be used. A fixed motor is permanently mounted on the ceiling/gantry track or a portable motor is attached by the Care worker. * Using a ceiling hoist allows workers to avoid awkward and heavy pushing normally experienced with using floor hoists. * The resident may be transferred into a shower chair or wheelchair after personal care. One to two workers normally undertakes this task depending on how much the resident can assist. * Workers need access to both sides of the bed. * The resident is assisted to roll onto their side / the lifter sling is applied / the resident is positioned onto their back to bring the straps through / the lifter is positioned in place. | | | | | |
| Description: P1000938 | Description: P1000943 | | Description: P1000951 | | Description: P1010074 |
|  | ceiling-lift-4 | |  | |  |
| Resident is rolled from side to side to apply the sling | A portable motor is attached to the ceiling gantry. A chair is positioned as the end point of the transfer | | The resident is moved over the chair and lowered using the lifter controls | | The sling is removed post transfer |

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| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical range of motion** | Reach forward and sideways to 45 - 60 degrees, occasional above shoulder reach, forward bend to reposition and stabilize resident, semi squat / lunge to manoeuvre lifter and chair. | | **Lift capacity** | To 10kg (resistive limb) | | **Push / Pull force** | To 10kg if rolling heavy dependant resident  3-5kg to move resident when hoisted | | **Shift duration / Roster** | Care staff can work from 7am in the morning through to overnight shifts. Personal Care shifts can be from 6-8 hrs. | | **Environmental factors** |  | | **Task rotation** | Nil, frequently changing task | | **Breaks** | 15 minute tea break, 30 minute meal break | | **PPE** | Closed shoes, gloves | |
| **Sitting** | | ✓ |  |  |  |  |
| **Standing** | |  |  | ✓ |  | On either side of the bed |
| **Walking** | |  |  | ✓ |  | Short distance inside the room and the home |
| **Climbing** | | ✓ |  |  |  |  |
| **Stooping** | |  |  | ✓ |  | Apply lifter sling and roll resident onto side |
| **Bending** | |  |  | ✓ |  | Apply lifter sling and roll resident onto side, lower resident into chair / onto and off bed in sling |
| **Kneeling** | |  | ✓ |  |  | Remove lifter straps from under thighs when resident is transferred into chair. |
| **Squatting** | |  | ✓ |  |  | Semi squat / lunge to manoeuvre lifter and transfer resident |
| **Crawling** | | ✓ |  |  |  |  |
| **Gripping** | |  |  |  | ✓ | Lifter handles, boom, sling |
| **Forward Reach** | |  |  |  | ✓ | Position resident for sling, lifter transfer |
| **Overhead Reach** | |  | ✓ |  |  | Attaching portable motor | **Risk of developing a MSI** |
| **Lift** | |  | ✓ |  |  | Clothing, resident limb if assistance is required, can be heavy if limb dependant or rigid | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | | ✓ |  |  |  |  |
| **Push / Pull** | |  |  | ✓ |  | Turn resident, reposition limbs, manoeuvre resident in sling and move chair |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Neck:**  **Shoulders:**  **Thoracic:**  **Lumbar:**  **Repetition:** | Neck flexion, looking down when rolling resident and extension, looking up when reaching forwards to apply sling.  Repetitive forward and sideways reach to 45 to 60 degrees  Sustained forward bending to 15 degrees  Bending forward and sideways frequently to access all areas, can be minimised by maintaining spinal curves and bending more from hips and knees / semi-squat and leaning forward  Frequent arm action and bend / lunge / squat | | | | | |
| **Lift/Push/Pull demands-medium** | | | | | | |

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| SWP_logo | | **Role** | | **Care worker (CW) Resident Care Facility** | |
| **Task** | | **Transferring resident using stand up lifter** | |
| |  | | --- | | * Dependant residents who cannot reliably weight bear require assistance with personal care and transfers with the aid of a lifter. * Risk assessment: Resident must have head and trunk control, and is able to balance and sit over the side of the bed and can stand, and hold onto the lifter with both arms a stand up lifter is required. * As the resident is dependant two CW assist. * Postures adopted by the Care staff range from forward reach to spinal bend, semi squat and lunge and half kneel to assist in all aspects of the transfer. The bed should be moved to allow Care staff access on each side. * The resident is assisted to sit by two Care staff. The sling is then applied. The resident is transferred into a shower chair, or wheelchair. | | | | | | |
| The resident is assisted to sit up over the side of the bed.  Staff apply lifter straps.  The resident must be able to hold onto the sides of the lifter arm |  | |  | | Once the supportive straps are applied the resident is raised in the lifter.  Two staff is in attendance |
| Both staff assist to guide the chair into position,  The resident is lowered into the chair using the lifter.  CW either lunge forwards or sideways to assist |  | | The straps are then removed by assisting the resident to lean forward in the chair.  CW lunge sideways with arms into body and support on resident shoulders | |  |

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| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical range of motion** | Shoulder flexion and abduction to 90 degrees, Lumbar flexion to 20 degrees. | | **Lift capacity** | To 10kg (resistive limb) | | **Push / Pull force** | To 12kg | | **Shift duration / Roster** | Care staff can work from 7am in the morning through to overnight shifts. Personal Care shifts can be from 6-8 hrs. | | **Environmental factors** | Indoor, carpet increases rolling resistance of lifter | | **Task rotation** | Nil, frequently changing task | | **Breaks** | 15 minute tea break, 30 minute meal break | | **PPE** | Closed shoes | |
| **Sitting** | | ✓ |  |  |  |  |
| **Standing** | |  |  | ✓ |  | On either side of the bed and chair |
| **Walking** | |  |  | ✓ |  | Short distance inside the room |
| **Climbing** | | ✓ |  |  |  |  |
| **Stooping** | |  |  | ✓ |  | Applying sling, removing sling |
| **Bending** | |  |  | ✓ |  | Applying sling, removing sling |
| **Kneeling** | |  | ✓ |  |  | Removing leg straps |
| **Squatting** | |  | ✓ |  |  | Applying and removing leg straps |
| **Crawling** | | ✓ |  |  |  |  |
| **Gripping** | |  |  |  | ✓ | Sling, chair, lifter handle |
| **Forward Reach** | |  |  |  | ✓ | All aspects of transfer |
| **Overhead Reach** | |  | ✓ |  |  |  | **Risk of developing a MSI** |
| **Lift** | |  | ✓ |  |  | Resident limb if assistance is required, can be heavy if limb dependant or rigid | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | | ✓ |  |  |  |  |
| **Push / Pull** | |  |  | ✓ |  | Manoeuvre lifter, chair, rolling resistance ranges from < 5kg to > 12kg |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Shoulders:**  **Knees:**  **Lumbar:**  **Repetition:** | Repetitive forward and sideways reach to 60 degrees  Bend to 90 degrees, sideways lunge  Bending forward and sideways frequently to access all areas  Semi-squat and leaning forward  Frequent arm action, grip and bend / lunge / squat to access all areas to assist in transfer. | | | | | |
| **Lift/Push/Pull demands-Medium** | | | | | | |

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| SWP_logo | | **Role** | | **Care Worker Resident Care Facility** | |
| **Task** | | **Using a turning sheet with a lifting machine to turn a heavier resident in bed** | |
| * Hoist systems (Ceiling or floor hoist lifter) can be used with a ‘turning sheet’ to assist workers to turn heavier dependent residents in bed * The turning sheet can be left under the bottom bed sheet overnight to allow 2 workers to turn a dependant resident who normally would require 3+ Carers to safely reposition * Workers need access to both sides of the bed and additional room is required on one side if a floor lifter is used * The resident is assisted to roll onto their side to initially insert the turning sheet (2-3 workers). A fitted or flat slide sheet needs to be placed directly under the ‘turning sheet’ | | | | | |
|  |  | |  | |  |
| Resident is rolled from side to side to insert slide sheet and turning sheet | Can be used in direct contact or under the bed sheet. Floor lifter attached to turning sheet and lifter **brakes engaged.** One worker operates lifter | | Resident’s leg is crossed and second worker assists the turn.  Once positioned on their side, pillows are inserted, the lifter detached and the turning sheet and sheets are smoothed out and tucked in. | | Ceiling lifters can also be used with turning sheets |

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| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical range of motion** | Reach forward and sideways to 45 - 60 degrees, occasional above shoulder reach, forward bend to reposition and stabilise resident | | **Lift capacity** | To 10kg (position leg for turn) | | **Push / Pull force** | Moving empty lifter into position- less than 4kgF | | **Shift duration / Roster** | Care staff can work from 7am in the morning through to overnight shifts.  Personal Care shifts can be from 6-8 hrs. | | **Environmental factors** | Additional room required if using a floor lifter. May need to move furniture to accommodate floor lifter on side of bed | | **Task rotation** | Nil, frequently changing task | | **Breaks** | 15 minute tea break, 30 minute meal break | | **PPE** | Closed shoes, gloves | |
| **Sitting** | | ✓ |  |  |  |  |
| **Standing** | |  |  | ✓ |  | On either side of the bed |
| **Walking** | |  |  | ✓ |  | Short distance inside the room and the home |
| **Climbing** | | ✓ |  |  |  |  |
| **Stooping** | |  |  | ✓ |  | Inserting slide sheet and turning sheet under resident |
| **Bending** | |  |  | ✓ |  | Inserting slide sheet and turning sheet under resident |
| **Kneeling** | | ✓ |  |  |  |  |
| **Squatting** | | ✓ |  |  |  | . |
| **Crawling** | | ✓ |  |  |  |  |
| **Gripping** | |  |  |  | ✓ | Handling equipment |
| **Forward Reach** | |  |  |  | ✓ | Guiding resident during turn |
| **Overhead Reach** | |  | ✓ |  |  | Attaching portable motor to ceiling track or lowering ceiling lifter spreader bar (if used) | **Risk of developing a MSI** |
| **Lift** | |  | ✓ |  |  | Crossing resident’s leg | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | | ✓ |  |  |  |  |
| **Push / Pull** | |  |  | ✓ |  | Turn resident to initially insert turning sheet and slide sheet |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Neck:**  **Shoulders:**  **Thoracic:**  **Lumbar:**  **Repetition:** | Neck flexion, looking down when rolling resident and extension, looking up when reaching forwards to insert and attach turning sheet  Repetitive forward and sideways reach to 45 to 60 degrees  Sustained forward bending to 15 degrees  Bending forward and sideways frequently to access all areas, can be minimised by maintaining spinal curves and bending more from hips and knees / semi-squat and leaning forward  Minimal if turning sheet is left under patient | | | | | |
| **Lift/Push/Pull demands-medium** | | | | | | |

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| SWP_logo | | **Role** | | **Care Worker (CW) Residential** | |
| **Task** | | **Slide sheet repositioning in bed (resident weight up to 92 kg)** | |
| * For skin integrity, personal care, pressure care and activities of daily living dependant residents who are unable to physically move around within the bed are repositioned using a slide sheet (SS). *Please see attached appendix; table with push pull forces with slide sheet use.* * SS is folded (or two SS are used, one on top of the other) and placed under the resident by two CWs. * Resident may be moved up the bed, to the side of the bed, or turned onto their side, or repositioned within the bed. If the resident is large and very dependent or bariatric up to 4 - 6 CW staff may be required. * CWs access both sides of the bed, and so it may need to be moved. Bed is raised to an appropriate safe working height so CWs can adopt safe working postures and avoid spinal bend and over-reaching. * Postures adopted by CWs range from semi squat, to lunge (forward, backwards or sideways depending on the transfer). Forward and sideways reach to a maximum of 45 degrees and a palm-up grip is adopted, with elbows aimed into the body. | | | | | |
| **P1060394** | **P1060394** | |  | | P1060364 |
| A palm up grip to hold onto the top layer only of the slide sheet, at the level of the resident buttock and shoulders. | Where possible both resident knees are bent when transferring up the bed | | A sideways lunge and shift in body weight by both carers facilitates the move up the bed | |  |
| A backward lunge and shift in body weight by one carer (pull through side) and forward lunge and shift in body weight by the other carer (push side) to roll. | A shift in body weight backwards by the carer on the pull through side facilitates a lateral transfer within the bed | |  | |  |

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| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical range of motion** | Reach forward and sideways to 45 degrees, forward bend from hips and knees to 45 degrees to reposition and semi squat / lunge to assist resident either up bed or to roll. | | **Lift capacity** | To 15kg (resistive / heavy limb) | | **Push / Pull force** | To > 20kg if resident large, bariatric and very dependent resistive | | **Shift duration / Roster** | Care staff can work from 7am in the morning through to overnight shifts. Personal Care shifts can be from 6-8 hrs. | | **Environmental factors** | Carers need access to both sides of the bed so bed may need to be moved | | **Task rotation** | Nil, frequently changing task | | **Breaks** | 15 minute tea break, 30 minute meal break | | **PPE** | Closed shoes | |
| **Sitting** | | ✓ |  |  |  |  |
| **Standing** | |  |  | ✓ |  | On either side of the resident |
| **Walking** | |  | ✓ |  |  | To the room and within work areas |
| **Climbing** | | ✓ |  |  |  |  |
| **Stooping** | |  | ✓ |  |  | Can be avoided with adherence to recommended working postures |
| **Bending** | |  |  |  | ✓ | Assisting to position resident. Avoid spinal bend by bending at hips and knees |
| **Kneeling** | | ✓ |  |  |  |  |
| **Squatting** | |  | ✓ |  |  | Assisting to position resident, semi squat, weight transference, lunge |
| **Crawling** | | ✓ |  |  |  |  |
| **Gripping** | |  |  |  | ✓ | Palm up grip onto top layer of slide sheet |
| **Forward Reach** | |  |  |  | ✓ | Maximum 45 degrees |
| **Overhead Reach** | | ✓ |  |  |  |  | **Risk of developing a MSI** |
| **Lift** | |  | ✓ |  |  | Assist to position resident limb if assistance is required | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | | ✓ |  |  |  |  |
| **Push / Pull** | |  |  | ✓ |  | Turn resident, reposition limbs, bring resident up the bed, force varies from 9kg to > 20kg depending on resident weight and level of dependency. |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Neck:**  **Lumbar:**  **Shoulders:**  **Hips and Knees:**  **Repetition:** | Neck flexion, looking down when placing slide sheet in position and neutral position when moving resident on slide sheet.  Bending forward and sideways to position slide sheet, can be avoided by maintaining natural spinal curves and bending from hips and knees and avoiding over reach.  Forward and sideways reach to 45 degrees, occasional forward reach > 60 degrees.  Repetitive flexion to 45 to 60 degrees and lateral lunge.  Frequent grip, arm action and bend / lunge / squat to assist in transfers. | | | | | |
| **Lift/Push/Pull demands-** **Medium** | | | | | | |



Appendix to: **Carer Residential slide sheet repositioning in bed**

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| --- | --- | --- | --- | --- |
| **ACTIVITY- Assisting a resident manually** | **RESIDENT WEIGHT (forces measured in kg)** | | | |
|  | **60 KG** | **80 KG** | **100 KG** | **120 KG** |
| **SIT PATIENT FORWARD** |  |  |  |  |
| Min. head control | 17.8 kg | 28.9 | 35.3 |  |
|  | | | | |
| **SIT ON EDGE OF BED)** |  |  |  |  |
| Heavy - 100% Of Sit Forward | 17.8 | 28.9 | 35.3 |  |
| Light – 60% Of Sit Forward | 10.7 | 17.3 | 21.2 |  |
|  | | | | |
| **ROLL ONTO SIDE (no slide sheet)** |  |  |  |  |
| 1- Roll | 8.7 | 16.5 | 27.9 |  |
| 2- Pull Bottom Through | 28.5 | 42.4 | 53.5 |  |
| **LIFT LEGS** | 8.5 | 15.2 | 16.3 |  |
| **SLIDE SHEETS (forces measured in kg)** | | | | |
| **SLIDE UP BED** |  |  |  |  |
| 1 slide sheet (doubled)  Patient’s knees bent | 9.9 kg | 14.8 | 20.1 | N/A |
| 1 slide sheet (doubled)  Patient’s legs straight | 18.9 | 24 | 32.2 | N/A |
| 2 slide sheets  Patient’s legs straight | 14 | 20.4 | 24.9 | 28 |
| **ROLLING** |  |  |  |  |
| 1 slide sheet doubled.  Knee bent, arm reach, head turned | 16.9 | 14.5 | 16.4 | 20.4 |

NOTE: Ceiling hoist use: Force to move a person using a ceiling hoist system is 3-5kgF

Also note that less space is required to do the manoeuvre (1100mm quoted) <https://www.worksafe.vic.gov.au/__data/assets/pdf_file/0019/9208/VWA531.pdf> pg. 27

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| SWP_logo | | **Role** | | **Care Worker (CW) Resident Care Facility** | |
| **Task** | | **Assisting a resident who has fallen to chair / bed by verbal instruction** | |
| * If a resident has fallen onto the floor the RN / EN assess the resident and ensure they are safe and check if there are any injuries. If suspicion of fracture or injury the resident is made comfortable on the floor and treated for shock and the ambulance is called. * If there is no sign of any injury and the resident is physically able, RN / EN direct care staff to verbally assist the resident on to all fours and get two chairs to assist to sit in a chair. Consent is gained from the resident before attempting this transfer. For this transfer ideally: * At least two people to assist (call an ambulance if CW alone overnight) * Two stable objects (one of these must be a chair, wheelchair or 4ww with locking brakes). * Clear environment with no danger (e.g. fire, spilt water). * Resident has physical and cognitive ability to ASSIST with all stages of the transfer | | | | | |
| With one CW standing close by to resident, the other CW will physically cue (light physical assist) resident to roll onto side  CWs in full kneel or half kneel position |  | | CWs encourage resident to prop up on their elbow and knee using the side facing upward to do so  CW may lightly assist at hip and shoulder to assist the resident to complete a full roll, as they prop up on to their elbow and knee on other side | |  |
| CWs encourage resident to prop up onto the chair or stable surface located in front of them, one arm at a time onto their elbows or hands  CW may lightly guide their hands for directional cues |  | | CWsencourage resident to bring one knee forward into a half kneel  CW may provide light physical assist at hips to steady balance  CWs stand or half kneel | | P3050300 |
|  | The second assistant is standing adjacent the chair that is now located behind the resident’s back foot  Encourage resident to push through the chair/stable surface in front of them to stand.  CW may provide light physical assistance at hips to steady balance | |  | | As resident stands up, the second assistant can guide the resident at the front of the hip and front of the shoulder straight into the chair located behind them.  CWs in low lunge position |

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| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical range of motion** | Neck flexion**,** Reach forward and sideways to 60 degrees, hips and knees full flexion and forwards and sideways lunge. | | **Lift capacity** | Nil. | | **Push / Pull force** | N/A | | **Shift duration / Roster** | Care staff can work from 7am in the morning through to overnight shifts.  Personal Care shifts can be from 6-8 hrs. | | **Environmental factors** | Small space, resident may have fallen in bathroom or behind bed. | | **Task rotation** | N/A | | **Breaks** | 15 minute tea break, 30 minute meal break | | **PPE** | Closed shoes | |
| **Sitting** | | ✓ |  |  |  |  |
| **Standing** | |  | ✓ |  |  | At side of resident |
| **Walking** | |  | ✓ |  |  | To retrieve chairs |
| **Climbing** | | ✓ |  |  |  |  |
| **Stooping** | |  | ✓ |  |  | May stoop when talking to resident |
| **Bending** | |  | ✓ |  |  | To provide verbal direction at all stages |
| **Kneeling** | |  | ✓ |  |  | To provide verbal direction at floor stage |
| **Squatting** | | ✓ |  |  |  |  |
| **Crawling** | |  | ✓ |  |  | To provide verbal direction at floor stage |
| **Gripping** | |  | ✓ |  |  | Light touch with open hand to guide/ roll resident onto side |
| **Forward Reach** | |  | ✓ |  |  | To 45 - 60 degrees to guide resident |
| **Overhead Reach** | | ✓ |  |  |  |  | **Risk of developing a MSI** |
| **Lift** | | ✓ |  |  |  |  | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | | ✓ |  |  |  |  |
| **Push / Pull** | |  | ✓ |  |  | Assist resident to roll onto side |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Neck:**  **Knees:**  **Thoracic:**  **Lumbar:** | Neck flexion, looking down when assisting resident on floor.  Full kneel to half kneel to stand and lunge.  Sustained forward bend to 15 degrees.  Bending forward to guide resident from lying to sitting. Can be minimised with adoption of half kneel / lunge | | | | | |
| **Lift/Push/Pull demands-Light** | | | | | | |

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| SWP_logo | | **Role** | | **Residential** | |
| **Task** | | **Assisting a resident who has fallen using a lifter** | |
| * RN or EN is the first person to call for an incident where a resident has had a fall or an emergency medical episode. * If there is no sign of any injury and the resident is dependant a lifter is used along with at least two care staff. * Multiple risks include: working in an awkward small environment (e.g. resident has fallen behind a bed or in bathroom), the resident may exhibit aggressive behaviours. * Carers need to be able to get down onto the floor to assist with the transfer. | | | | | |
| If necessary a slide sheet is placed under the resident and 2 carers move resident to an open area. |  | | **P1010958** | | P1010953 |
|  | Positions for the Carer to assist a resident who has fallen to the floor is either a half kneel, or full kneel. | | Resident is rolled from side to side to place sling in position | | The lifter is manoeuvred into position, on an angle with one leg passing under the resident’s legs, and the other to the side of the residents head. This ensures the resident remains within the centre of the boom. |
| Sling is placed into position on the floor necessitating half kneel, full squat by staff. |  | | P1010956 | | The sling is applied, straps are secured, and resident is raised in the lifter and transferred either into a wheelchair or onto bed. |

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| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical Range of Motion:** | Neck, spinal flexion, full hip and knee flexion. Shoulder to 90 degree flexion. | | **Lift capacity** | 10kg (reposition limb) | | **Push / Pull force** | To 12kg | | **Shift duration / Roster** | Care staff can work from 7am in the morning through to overnight shifts.  Personal Care shifts can be from 6-8 hrs. | | **Environmental factors** | Small space | | **Task rotation** | N/A | | **Breaks** | 15 minute tea break, 30 minute meal break | | **PPE** | Closed-in shoes | |
| **Sitting** | | ✓ |  |  |  |  |
| **Standing** | |  | ✓ |  |  | Assist to manoeuvre lifter |
| **Walking** | |  | ✓ |  |  | To and within resident room or area |
| **Climbing** | | ✓ |  |  |  |  |
| **Stooping** | |  |  | ✓ |  | Assist to place sling on |
| **Bending** | |  |  | ✓ |  | Move resident to open area. Assist to place sling on |
| **Kneeling** | |  |  | ✓ |  | Move resident to open area. Assist to place sling on |
| **Squatting** | |  |  | ✓ |  | Assist to place sling on |
| **Crawling** | |  | ✓ |  |  | Assist to place sling on |
| **Gripping** | |  | ✓ |  |  | Assist to place sling on |
| **Forward Reach** | |  |  | ✓ |  | Assist to place sling on |
| **Overhead Reach** | |  | ✓ |  |  |  | **Risk of developing a MSI** |
| **Lift** | |  | ✓ |  |  | Reposition limb, to 10kg | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | | ✓ |  |  |  |  |
| **Push / Pull** | |  |  | ✓ |  | Lifter, move bed , furniture, to 12-15kg |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Neck:**  **Shoulders:**  **Knees and hips:**  **Thoracic:**  **Lumbar:** | Neck flexion, looking down for observations and to assist with sling application.  Forward reach to 90 degrees  Repetitive full flexion (bend)  Sustained forward bend  Sustained forward bend | | | | | |
| **Lift/Push/Pull demands-Medium** | | | | | | |

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| SWP_logo | | **Role** | | **Care worker Resident Care Facility** | |
| **Task** | | **Assisted walking** | |
| * Care staff assist residents who are ambulant when walking. * Residents may use aids such as walking stick, quad stick, or walking frame. The assistance required should be mainly standby verbal, with light touch. * Care staff giving clear instructions to allow the resident to stand from sitting, and clear instructions to encourage a steady independent walking pattern, with light touch to guide only. * The pictures show the “walking stick” hold if the resident requires assistance and does not use an aide, and the hand hold and light touch assistance when the resident has a walker. | | | | | |
|  | P1020205 P1020205 | | P1020207 | | Light touch, standby assistance to guide ambulant residents |
| The resident is advised to lean forward and the frame is steadied by the care staff while the resident stands | IMG_2480.JPG | | IMG_2481.JPG | | IMG_2489.JPG |
| The resident is given light touch support and verbal direction to walk | P1010991 | | P1010977 | | Dcp_3157 |

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| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical range of motion** | Shoulder flexion and abduction 45 degrees, hips and knees flexion 45 degrees | | **Lift capacity** | Nil | | **Push / Pull force** | To 3kg | | **Shift duration / Roster** | Care staff can work from 7am in the morning through to overnight shifts. Personal Care shifts can be from 6-8 hrs. | | **Environmental factors** | Inside different floor surfaces, or outside may be uneven or sloping surfaces. | | **Task Rotation** | Nil, frequently changing task | | **Breaks** | 15 minute tea break, 30 minute meal break | | **PPE** | Closed shoes | |
| **Sitting** | | ✓ |  |  |  |  |
| **Standing** | |  | ✓ |  |  | At side of resident |
| **Walking** | |  | ✓ |  |  | To side of resident |
| **Climbing** | | ✓ |  |  |  |  |
| **Stooping** | |  | ✓ |  |  |  |
| **Bending** | |  | ✓ |  |  | To provide verbal direction to stand from sitting |
| **Kneeling** | | ✓ |  |  |  |  |
| **Squatting** | | ✓ |  |  |  |  |
| **Crawling** | | ✓ |  |  |  |  |
| **Gripping** | |  |  | ✓ |  | Light touch to steady frame |
| **Forward Reach** | |  | ✓ |  |  | To 45 -60 degrees to guide resident |
| **Overhead Reach** | | ✓ |  |  |  |  | **Risk of developing a MSI** |
| **Lift** | | ✓ |  |  |  |  | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | | ✓ |  |  |  |  |
| **Push / Pull** | |  | ✓ |  |  | Guide resident with walker |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Neck:**  **Knees:**  **Thoracic:**  **Lumbar:** | Neck flexion, looking down when assisting resident to stand, and position frame.  Repetitive bend to 45 degrees, and forward and sideways lunge.  Sustained forward bend to 15 degrees.  Bending forward to guide resident from sit to stand. Can be minimised with adoption of semi-squat / lunge | | | | | |
| **Lift/Push/Pull demands-Light** | | | | | | |

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| SWP_logo | | **Role** | | **Care worker Residential Care** | |
| **Task** | | **Bed making unoccupied bed** | |
| * On a morning shift, Care staff make the residents bed. * In high care all beds in high care are adjustable and on wheels. * In low care some beds may be low and not adjustable. Here beds may be against the wall, or there may be limited space on each side for access by carers, increasing physical demands to make the bed. * Where practicable beds are encouraged to be on wheels and in some facilities the low care section also have all height adjustable beds. | | | | | |
| If the bed is height adjustable it is raised to maximum height.  Carers are advised to adopt a lunge stance and keep elbows in close to body to tuck in sheets | Description: P1110125 | | Description: P1050605 | | P1050604 |
| If the bed is fixed height it is move away from the wall.  A high volume of low bend, semi squat and low lunging, along with repetitive kneeling occurs to make a low bed. | Description: P1100188 | | P1030052 | | P1030053 |

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| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical range of motion** | Reach forward and sideways to 90 degrees, forward bend, lunge and squat to kneel to make low bed. | | **Lift capacity** | To 2kg (bed linen) | | **Push / Pull force** | To 5kg if moving bed away from wall, can be greater if small wheels or heavy bed. | | **Shift duration / Roster** | Care staff can work from 7am in the morning through to overnight shifts. Personal Care shifts can be from 6-8 hrs. | | **Environmental factors** | Indoor, can be hard floors to kneel on. | | **Task rotation** | Nil, frequently changing task | | **Breaks** | 15 minute tea break, 30 minute meal break | | **PPE** | Closed shoes, gloves | |
| **Sitting** | | ✓ |  |  |  |  |
| **Standing** | |  |  | ✓ |  | On either side of the bed |
| **Walking** | |  | ✓ |  |  | Short distance inside the room |
| **Climbing** | | ✓ |  |  |  |  |
| **Stooping** | |  |  | ✓ |  | Make low bed |
| **Bending** | |  |  | ✓ |  | Tuck in sheets and bed linen |
| **Kneeling** | |  |  | ✓ |  | Low bed |
| **Squatting** | |  |  | ✓ |  | Low bed |
| **Crawling** | | ✓ |  |  |  |  |
| **Gripping** | |  |  |  | ✓ | Bed linen |
| **Forward Reach** | |  |  |  | ✓ | To 60 degrees height adjustable bed and to 120 degrees low wide bed |
| **Overhead Reach** | |  | ✓ |  |  |  | **Risk of developing a MSI** |
| **Lift** | |  | ✓ |  |  | Bed linen | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | |  | ✓ |  |  | Bed linen |
| **Push / Pull** | |  |  | ✓ |  | Bed away from wall |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Neck:**  **Shoulders:**  **Knees:**  **Thoracic:**  **Lumbar:**  **Repetition:** | Neck flexion, looking down when making bed and looking up when reaching forwards if bed is low to tuck sheets and bedding in.  Repetitive forward and sideways reach to 60 - 90 degrees.  Repetitive knee flexion, kneeling, low squatting (Fixed height low bed)  Sustained forward bending.  Bending forward and sideways frequently.  Semi-squat / lunge and leaning forward.  Frequent arm action and bend / lunge / squat to access all areas of bed. | | | | | |
| **Lift/Push/Pull demands-Very light** | | | | | | |

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| SWP_logo | | **Role** | | | **Care worker Resident Care Facility** | |
| **Task** | | | **Push/pull trolleys, linen skips, beds** | |
| * Pushing of items on wheels occurs at various times during a shift. Mostly small trolleys (linen skips) are moved. * Beds are rarely pushed as resists do not change beds or rooms very frequently. * Linen skips and trolleys are pushed mostly short distances on a ward or with in an area of a facility. | | | | | | |
| P1050785 | 29 06 10 013 IMG_6293 | | | IMG_6250 | | IMG_6292 |
| Beds are pushed by two workers. The force required will vary between 5kgF and 15kgF depending on the surface and type of bed. | Linen skips vary in size and type. Some linen skips have handle and two spaces for linen bags. Push force varies between 2kgF and 5kgF. | | | Linen skips have up to 3 spaces for linen bags. The skips may be pushed a short distance when workers are changing bed linen and showering residents. | | Linen may also be placed on trolleys and pushed short distance. Force up to 5kgF depending on the surface and trolley. |
|  | IMG_6252 | |  | | | IMG_6233 |
| At times workers may push a clothing trolley when distributing clothing from the laundry. Force up to 5kgF. | Larger trolleys may be pushed at times for medication rounds. These vary in size and force required up to approximately 10kgF for very heavy trolleys. | | When pushing trolleys workers are best to keep their arms tucked in by their side and use their body weight. | | | Small trolleys may be used for wound dressing or light tasks. Force up to 5kgF. |

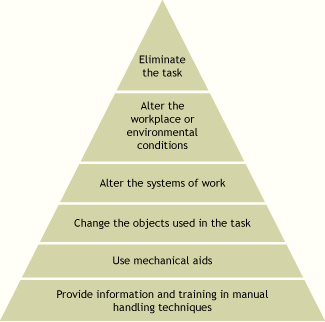
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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Critical physical demands** | | | | | | | |
| **Physical Demand** | | **N** | **O** | **F** | **C** | **Description** | |  |  | | --- | --- | | **Critical range of motion** | Shoulder to 45 degree flexion. | | **Lift capacity** | N/A. | | **Push / Pull force** | Skips up to 5kgF, beds up to 15kgF, and trolleys up to 10kgF. | | **Shift duration / Roster** | Variable shift times, examples:   * Morning 6.45am to 3.15pm. * Afternoon 2.45 to 9.15pm. * Shifts vary over a 7 day roster. | | **Environmental factors** | Indoors mostly. | | **Task rotation** | Short periods mostly. | | **Breaks** | Various depending on shift duration. | | **PPE** | Closed-in shoes, gloves as needed. | |
| **Sitting** | | ✓ |  |  |  |  |
| **Standing** | |  |  |  | ✓ | Various surfaces |
| **Walking** | |  |  |  | ✓ | Short distances pushing a trolley, bed or skip |
| **Climbing** | | ✓ |  |  |  |  |
| **Stooping** | | ✓ |  |  |  |  |
| **Bending** | | ✓ |  |  |  |  |
| **Kneeling** | | ✓ |  |  |  |  |
| **Squatting** | | ✓ |  |  |  |  |
| **Crawling** | | ✓ |  |  |  |  |
| **Gripping** | |  |  |  | ✓ | Trolley and bed handles and sides |
| **Forward Reach** | |  | ✓ |  |  | Pushing and turning a trolley |
| **Overhead Reach** | | ✓ |  |  |  |  | **Risk of developing a MSI** |
| **Lift** | | ✓ |  |  |  |  | http://www.warrenderpt.com/resources/_wsb_308x215_Body+Chart.jpg |
| **Carry** | | ✓ |  |  |  |  |
| **Push / Pull** | |  |  |  | ✓ | Variable force depending on the device |
| N = Never, O = Occasional (1–33%), F = Frequent (34–66%), C = Constant (67–100%) | | | | | | |
| **Repetitive action / sustained posture** | | | | | | |
| **Shoulders:**  **Lower Back:**  **Repetition:** | Sustained force pushing trolleys and items on wheels longer distances.  Sustained force pushing a bed up to 15kgF.  Trolleys, linen skips and beds are moved at varying frequencies.  Most trolleys are pushed short distances.  At times trolleys and skips may be pushed from one room to the next when making beds, showering residents and distributing items. | | | | | |
| **Lift/Push/Pull demands-Medium** | | | | | | |

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| **Description: cid:image001.jpg@01CB1834.70361670** | | **Job Dictionary**  **Definitions** |
| **Risk of developing a Musculoskeletal Injury (MSI)** | | |
| **Risk of Musculoskeletal Injury**  **Red** = **High** (e.g. repetitive movement, sustained awkward positioning, high force / very heavy lift)  **Yellow** = **Medium** (e.g. repetitive movement, high force/heavy lift, awkward position)  **Green**= **Low** (e.g. repetitive movement, awkward position e.g. bending)  _wsb_308x215_Body+Chart | | |
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| **‘Lift/push/ pull physical demands’** | | |
| **Very Light Work** | Lifting and carrying < 5kg. Variable posture sitting, standing and walking. Pushing up to 2kg Force and pulling up to 2kg Force occasionally at waist level. | |
| **Light Work** | Lifting and carrying up to 10kg maximum. Frequent lifting and / or carrying of objects weighing up to 5kg. Pushing up to 5kg Force and pulling up to 5kg Force occasionally at waist level. | |
| **Medium Work** | Lifting and carrying up to 22kg maximum. Frequent lifting and / or carrying of objects weighing up to 10kg. Pushing up to 12kg Force and pulling up to 12kg Force occasionally at waist level. | |
| **Heavy Work** | Lifting up to 45kg maximum. Frequent lifting and / or carrying of objects weighing up to 22kg. Pushing up to 24kg Force and pulling up to 24kg Force occasionally at waist level. | |
| **Very Heavy Work** | Lifting above 45kg maximum. Frequent lifting and / or carrying of objects weighing above 22kg. Pushing up to 35kg Force and pulling up to 35kg Force occasionally at waist level. | |

Adapted from Physical Work Demands, from the U.S. Department of Labor Dictionary of Occupational Titles, Fourth Edition, Supplement, Appendix D, pp 101-102, 1986 with conversion to metric system.

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| **Frequency of Task** | | | | |
|  | **Non-material handling** | **Non-material handling** | **Material handling** |
| **Never (N)** | 0% of 8hr/day | No reps/day | No reps/day |
| **Occasionally (O)** | 6-33% of 8hr/day  20 mins/hr | 0–100 reps/day  1/3 of full day | 3–32 reps/day  1 lift every 20 mins |
| **Frequently (F)** | 34-66% of 8hr/day  20-40 mins/hr | 101–800 reps/day  1/3 - 2/3 of full day | 33–200 reps/day  1 lift every 2 mins |
| **Constantly (C)** | 67-100% of 8hr/day  41-60 mins/hr | >800 reps/day  2/3 to a full day | >200 reps/day  1 lift every 15 sec |
| **Repetitive action/sustained posture**   * Repetitive means the movement or force is performed more than twice a minute * Sustained means the posture of force is held for more than 30 seconds at a time   Reference: Hazardous Manual tasks Code of Practice 2011 | | | |

**Reducing the risk of injury and re-injury[[1]](#footnote-1)**



<http://www.ectarc.com.au/cybertots/toolbox12_11/shared/resources/html/res_manualhand.htm>

The Hierarchy of Control is a list of control measures, in order of priority, which can be used to eliminate or minimise exposure to the hazard. Adopting appropriate and safe handling techniques and avoiding sustained and repetitive postures and actions is encouraged to prevent cumulative and reoccurring musculo skeletal injuries. Using appropriate and safe manual techniques is a lower order in the hierarchy of controls and where possible and practical, should be replaced with higher order solutions such as use of mechanical aids.

Consider using equipment that reduces physical handling, and encourages client participation. This could result in needing fewer workers to do the task and will lessen the likelihood of worker injury.

Some equipment can eliminate the need for assistance by allowing a resident/client to be totally independent.

Equipment is available for non-people handling tasks that reduced the need to undertake repetitive and sustained actions. E.g. trolley movers and pill crushers

Here are examples of equipment solutions currently in use across South Australia in hospitals, in the community and residential care facilities. For more information about specific equipment items please contact the Independent Living Centre on (08) 82665263 or undertake a product search on <http://ilcaustralia.org.au/search_category_paths>.

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| --- | --- | --- |
| **Equipment** | **Use** |  |
| Getting people off the floor  Manger Camel  Hoverjack  Raizer | Lifts a person from the floor up into a sitting position. (Air assisted device)  Lifts a person from the floor with patient supine. (Air assisted device)  Raises a person from the floor up into a sitting position | Mangar Camel Floor Lift  http://www.statinahealthcare.com.au/wp-content/uploads/2014/07/HoverJack-use1-800px.jpg |
| Repositioning in bed  Air assisted Transfer mats. Reusable or single patient use (SPU)  HT Roller  Turning sheet  Beds with turning functions or transfer systems that attach to beds  E.g. Linet Turning bed. Vendlet turning system | Placed under bottom sheet. Used to reposition heavy clients/residents in bed  Turns a client in bed using a Hovertech® dual speed air supply  Used with hoist or ceiling lifter to turn a heavier patient in bed  Mechanical Turning functions | http://www.vendlet.com/admin/public/getimage.ashx?image=/Files/Images/Vendlet/Produkter/VENDLET/VENDLET-V5.jpg&crop=0&Width=1200  http://www.linet.com/-/media/Media-Catalogue/photos/beds/latera-acute/pluses/acute_00117.ashx?bc=White&as=1&h=450&w=800&hash=7DB3486B7734EA98C16DA5E758C9238239ACEDD8    http://www.statinahealthcare.com.au/wp-content/uploads/2014/07/ht-roller-use-800px.jpg |
| Bed to ‘stretch chair’ transfer (a chair that can be moved into a horizontal position)  Air assisted transfer mat  Desirable chair features: electric chair height, back rest and foot rest. | Used when lifter sling transfer is too difficult (i.e. bariatric resident), places resident at increased risk of skin injury or pain or if using a lifter sling is contraindicated | [CH-3100A](http://www.highgatehealthcare.com.au/highgate/wp-content/uploads/2015/03/CH-3100A.jpg) |
| Ceiling mounted lifters/gantry lifters | Reduces pushing and pulling forces to move the resident and requires less space to safely move a resident  Can be used with gait harnesses | [Image result for gait harness with ceiling lifter](http://www.google.com.au/url?url=http://www.opemed.net/gait-training-equipment/&rct=j&frm=1&q=&esrc=s&sa=U&ved=0ahUKEwi3hfSFyLfLAhUjhqYKHdyIDggQwW4IFjAA&usg=AFQjCNGTd34AUp0DZfUcoYuQLJ8Z56N08Q)Handi-Move Freedom Bridge Gantry Hoist |
| Leg/limb lifters | Slings to hold legs during nursing tasks  Devices to assist a resident to lift their own legs into bed  Devices to attach to the bed to lift heavier legs | sallysling_leglifter2[Image result for leg lifter](http://www.google.com.au/url?url=http://www.arthritissupplies.com/leg-lifter.html&rct=j&frm=1&q=&esrc=s&sa=U&ved=0ahUKEwjDs6jQ0bfLAhUBUKYKHekoCfUQwW4IJjAE&usg=AFQjCNESZT9LYM-kHS45dK2IuHN7cRhDzQ) |
| Motorising Trolleys | Many trolleys, medication cartes, Bain maries can be retrofitted with a motorised unit to prevent sustained and heavy pushing | [http://www.phantompower.com.au/images/trollee.jpg](http://www.phantompower.com.au/products/trollee.html?id=76) |
| Detachable Mechanical moving devices | ‘Turtle’- used to move occupied Comfort chairs or bins  Wheelchair drive kits | [http://www.phantompower.com.au/images/TURTLE.jpg](http://www.phantompower.com.au/products/the-turtle.html?id=78)[Bin Mover](http://www.phantompower.com.au/products/bin-mover/84-products/108-bin-mover.html) |
| Lifting wheelchairs into boots | Boot sliding devices to reduce lifting demands |  |
| Mechanical pill crushers | Alleviates repetitive pill grinding actions by shoulders, forearms and hands | http://www.phantompower.com.au/images/process.jpg |

**Glossary of terms and abbreviations**

Abduction: Movement of a body part away from the median plane (of the body, in the case of the limbs; of the hand or foot, in the case of digits).

Adduction: Movement of a body part toward the median plane (of the body, in the case of the limbs; of the hand or foot, in the case of digits).

Bending: To force into a different or particular, especially curved, shape, as by pressure.

Biceps: A muscle with two origins or heads. Commonly used to refer to the biceps brachii muscle.

CPR: Cardio Pulmonary resuscitation

DDA: Dangerous Drugs (drugs of dependence)

Deltoid: Large muscle of the shoulder that abducts and otherwise moves the upper arm about the shoulder joint against external loads.

Distal: Situated away from the centre of the body, or from the point of origin; specifically applied to the extremity or distant part of a limb or organ.

Dorsiflexion: Turning upward of the foot or toes or of the hand or fingers.

Dynamic: The science of motion in response to forces.

Ergonomics: A branch of ecology concerned with human factors in the design and operations of machines and the physical environment.

Extension: The act of bringing the distal portion of a joint in continuity (though only parallel) with the long axis of the proximal portion.

Flexion: The act of flexing or bending, e.g. bending of a joint so as to approximate that parts it connects.

Force: That which tends to produce motion in a body.

Frontal plane: In front; relating to the anterior part of a body.

Gross gripping: Grasping, seizing, holding with a large finger span.

Isometric: In physiology, denoting the condition when the ends of a contracting muscle are held fixed so that the contraction produces increased tension at a constant overall length.

Job: A set of tasks designed to be performed by one individual in return for a wage or salary.

Kyphosis: A deformity of the spine characterised by extensive flexion.

Lordosis: An abnormal extension deformity; anteroposterior curvature of the spine, generally lumbar with the convexity looking anteriorly.

Lumbar: Relating to the loins, or the part of the back and sides between the ribs and the pelvis.

Lumbosacral joint: Joint between fifth lumbar vertebra and sacrum.

Medial: Relating to the middle or centre; nearer to the median or midsagittal plane.

Occupation: A set of jobs with similar sets of tasks.

Plantar flexion: Bending about the ankle joint in the direction of the sole of the foot.

Prehensile: Adapted for taking hold of or grasping.

Pronation of the forearm: Rotation of the forearm in such a way that the palm of the hand faces backward when the arm is in the anatomical position, or downward when the arm is extended at a right angle to the body.

Proximal: Nearest the trunk or the point of origin, said of part of a limb

Pulmonary: Pertaining to the lung.

Range of motion: The range of translation and rotation of a joint for each of it degrees of freedom.

Rotation: Turning or movement of a body round its axis.

Stiffness: Rigid or firm in substance; not flexible, pliant or easily bent.

Strain: To make an effort to the limit of one’s strength; or, the change in shape that a body undergoes when acted upon by an external force.

Stress: The force or pressure applied or exerted between portion of a body or bodies, generally expressed in pounds per square inch.

Supination: Supination of the forearm: Rotation of the forearm in such a way that the palm of the hand faces forward when the arm is in the anatomical position, or upward when the arm is extended at a right angle to the body.

Torsion: Twisting or rotation of a part upon its long axis.

Transverse: Crosswise; lying across the long axis of the body.

Work: That which is accomplished when a force acts against resistance to produce motion.

# Relevant legislation

Work Health and Safety Act 2012 (SA)

The key principles of the *Work Health and Safety Act 2012* (SA) are consistent with long established and familiar occupational health and safety standards.

The Act:

* establishes health and safety duties, including the primary duty to protect any person from exposure to hazards and risks that arise from work
* provides for worker representation, consultation and participation including through Health and Safety Representatives and Health and Safety Committees
* enables compliance and enforcement through SafeWork SA, the regulator
* provides for the creation of regulations and approved codes of practice.

Work Health and Safety Regulations 2012

* Identify the control measures that must be applied to specific work activities and hazards, for example machine guarding and noise exposure.
* Are specific in legal requirements on certain issues.
* Normally related to a particular hazard or activity, e.g. manual tasks.
* May be administrative, e.g. injury reporting
* In the case of manual handling prescribe process that must be followed to achieve a minimum standard of occupational health and safety in the workplace.

**Return to Work Act 2014 (SA)**

The *Return to Work Act 2014* establishes the Return to Work Scheme, which commenced on 1 July 2015. The scheme provides South Australian workers and their employers with a personalised service to achieve the best possible recovery and return to work outcomes in the event of a work injury. Mobile case management has been implemented in regional and metropolitan South Australia to provide face-to-face services, to assist early intervention and targeted return to work services. Workers who are seriously injured may receive income support to retirement age and lifetime care and support. There is also limited access to common law for seriously injured workers. Workers who are less seriously injured may receive time-banded income support which ceases at two years from the date of incapacity. Lump sum payments for economic and non-economic loss are available.

References

*National Code of Practice for the Prevention of Occupational Overuse Syndrome* [NOHSC:2013(1994)] (Archived) <http://www.safework.sa.gov.au/show_page.jsp?id=5892#.VsVvgE9f21s>

*Return to Work Act 2014* (SA)

*Return to Work Regulations 2015* (SA)

*Work Health and Safety Act 2012* (SA) <https://www.legislation.sa.gov.au/LZ/C/A/WORK%20HEALTH%20AND%20SAFETY%20ACT%202012.aspx>

*Work Health and Safety Regulations 2012* (SA) *Code of Practice: Hazardous Manual Tasks* <https://www.legislation.sa.gov.au/LZ/C/R/Work%20Health%20and%20Safety%20Regulations%202012.aspx>

1. This section as provided by Hal (Helen) Robertson, SA Health [↑](#footnote-ref-1)