## **Department of Nursing**

Policy and Procedure SGHC NP0894

### Purpose

- Mobilize the patient without injury to the patient or nurse.
- Use minimum muscle strength on part of nurse.
- C. Increase patient independence.

#### Scope

This policy applies to all inpatient units but is most likely to be used in the Smith and White C Units.

## **Expected Outcome**

- A. Patient transfers without injury.
- Patient transfer by two staff, with another staff member on hand to assist with emergency or malfunction of the lift.

## **Equipment**

Hoyer Lift

### **Procedure**

The use of Hoyer lift for patient assistance will be in keeping with the manufacturer's recommended capacities for weight and use. Staff must complete training as required to ensure correct and proper use of Hoyer Lift.

All clinical care nursing staff in Smith East unit will receive initial competency training at the unit level by the PT department regarding the proper use of the Hoyer lift to reduce injury to the patient and staff.

The PT department will provide a copy of the training to the unit supervisor for the employee file and provide the training record to the Department of Learning Resources.

# A. Moving from Bed to Chair.

 A minimum of two staff is required for this task. Explain the procedure to the patient. Ensure the patient's privacy and dignity. Position the chair next to the foot of the bed, facing the head. Turn the patient on his/her side and place the back and seat slings under

- him. Be sure the seat sling is under the lower part of the buttocks and above the bend of the knees.
- Bring the Hoyer lift as close to the bed as possible. Adjust seat and back slings as necessary. Attach the S-hooks to the back and seat slings. Use 5<sup>th</sup> chain unless otherwise instructed. Place hooks so that open end is away from the patient. Base legs should be spread to widest position.
- To raise patient, turn release knob if applicable to close hydraulic valves. Apply pumping motion on the pump handle to raise the patient from the mattress. Hoyer lift that has a pin instead of a knob require pumping the handle back and forth without depressing the pin. Support head and neck with one hand.
- 4. Swing patient's feet off the bed and using the guide handles of the lifter, move patient away from the bed. Keep patient centered between legs of base and facing toward attendant who is operating the Hoyer. Always move lifter with base as wide as it will go.
- With the patient suspended directly over the wheelchair seat, turn the release knob slowly to the left, or press handle against pin. While lowering patient into chair guide resident's legs.
- After the patient is positioned in the chair, and weight is off chains, open release knob if applicable about two turns, disconnect S-hooks and remove back and seat supports. To slacken the suspension chains, press down on the overhead boom.

### B. Moving from Chair to Bed

- 1. To move the patient from chair to bed, reverse the procedure.
- 2. Move the lifter into position and attach the S-hooks to the back and seat slings.
- Close the hydraulic valve and apply a pumping motion on the pump handle, raise the patient clear of wheelchair seat.

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- 4. Grasp the guide handles of the lifter and move patient so that he is directly over the bed. Always approach the bed straight forward so that the widened base of the Hoyer lift can be rolled under the bed.
- 5. Turn the patient and place his feet on the bed.
- 6. Open the release valve slowly, lowering the patient into bed. Support head and neck.
- Disconnect the S-hooks. Turn the patient from side to side and remove the slings. Ensure the patient is comfortable.
- 8. Remove the Hoyer lift to its storage place.
- 9. Ensure the Hoyer lift is clean and on charge.

The Unit supervisor will ensure the Hoyer lift is stored properly, available and maintained in good working condition.

Approved by

\_6/23/22

Prisca Njume-Mbulle, DNP, MSN, BSN, RN Date

**Chief Nursing Officer** 

\_6/23/22\_\_

Marie Rose Alam, M.D., FAPA,

Date

**Acting Chief Executive Officer** 

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