

### Manual Transfer - One Person Assist with Help

#### Instructions

**Both Caregivers can Prepare Transfer:**

Fasten the transfer belt on patient's waist.  
Ensure patient is wearing shoes.

If using a wheelchair, remove the footrests, ensure front castors are swiveled forward and that the wheelchair brakes are on.

**Caregiver #1: Position the Patient and Lead the Transfer**

Ask the patient to shuffle his buttocks to the edge of the bed or chair with his feet flat on the floor and slightly apart. Use the armrest if possible.

Reach across the patient's back--grasp onto the transfer belt.

Ask patient to lean his upper body forward so his nose is over his toes.

Use a thumb-to-thumb grasp – place your right hand (palm up) into the patient's right hand (palm down) (or left hand to left hand depending on patient and space).

Ask the patient to lean forwards and stand, providing guidance with the pressure of your arm and hand in a forward direction—**NOT** lifting up

Once standing, remain at patient's side to provide support with your hip and hand grasp. Only proceed with transfer once you are sure the patient can balance and has completed weight shifts by taking one small step forward or to side.



#### Safety Points

This procedure is to be used only after a recent Patient Mobility Assessment form or a rehab assessment indicates that the patient is capable of a manual transfer with minimal assistance.

**The patient must be able to:**

- Bear full weight on at least one leg
- Stand erect
- Step around to at least one side
- Follow instructions/is cooperative

**Conduct Point-of-Care Risk Assessment** – ensure the patient still has the ability to carry out the manual transfer as indicated on the care plan.

**If the Point-of-Care Risk Assessment indicates a change in their ability – choose a safer transfer method, e.g. mechanical lift.**

Contact the clinician or your supervisor – and follow communication plan – regarding the patient's change in status.

Caution is required when asking a patient to reach back to the armrest. It may help them to support their weight as they sit—however, this may allow their trunk to lean too far back, throwing them—and you—off balance. Ensure you are prepared for this the first time you work with this patient.

Keeping the patient's weight forward as they sit down will put you at less risk of overbalancing, taking too much of the weight and being injured.

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**Caregiver #2: Provide assistance**

May provide assistance by:

- Guiding patient to the transfer surface (e.g. wheelchair or commode) while positioned behind the patient
- Repositioning wheelchair or commode (or other equipment) if necessary as patient transfers
- Guiding patient to sit in the center of the transfer surface



Ensure that awkward body mechanics are avoided when standing behind the patient between the bed and the transfer surface.

Ensure you are **GUIDING** the patient's movement, not **LIFTING**.