# One Person Manual Transfer

## Instructions

### PREPARE TRANSFER

Use a transfer belt. Have patient wear shoes.

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

### Position the Patient

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

Fasten the transfer belt around the patient’s waist.

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 the patient is standing, remain at their side to provide support with your hip and hand grasp. Only move away from the chair once you are sure the patient can balance.

## 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.

Ensure the patient still has the ability to carry out the transfer as assessed by the clinician.

If the patient is unable to carry out these actions—this may indicate a change in their ability. Contact the clinician or your supervisor for advice.

None of the options given will be safe for the caregiver or the patient if the patient cannot stand upright, cannot step or is unreliable.

In addition, if you feel that you are at risk of injury with this patient contact the clinician or your supervisor for advice.

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 will put you at less risk of overbalancing, taking too much of the weight and being injured.

Maintaining contact with the knees and transfer belt allows you to counterbalance the weight of the patient BUT it still can be a risky transfer for the caregiver if the patient does not have the necessary abilities to complete it safely.