



HAMMOCK (2) CHAIR

PURPOSE: To reposition the client to the back of the chair

Number of caregivers: Two

Weight considerations: No weight restriction

Level of difficulty: Transitional



NECESSARY PROCEDURES TO ENSURE SAFE CLIENT

BEFORE BEGINNING A LIFT OR TRANSFER

1. Check the pictogram.
2. Assess and prepare the client and the environment:
 - Has their status changed
 - Do they need preparatory help, such as clearing a pathway, placing equipment (canes, walkers, etc.) within reach, or ensuring personal articles are in place.
 - Does the client with emotional needs or cognitive or visual deficits (confusion, blindness, mental instability, aggression, etc.) need spoken instructions?
3. Assess your physical limitations (How are you feeling? Do you need a second person? Do you need to use a mechanical lift?)
4. Request assistance, if required.
5. Explain the procedure to the client and show them how to help, if possible, keeping instructions short and simple.
6. Follow the essential tips for safe and efficient body mechanics in the Employee Training Booklet.
7. After completing the technique, assess the client's comfort.



POSITIONING AND MOVEMENT

REPOSITIONING TRANSFER: HAMMOCK (2) CHAIR TRANSITIONAL

CONSIDER

Direction of Movement

Front-to-back, back-to-front, side-to-side, side-to-side (on the diagonal), or side-to-side (with pivot) = 90°, upright and forward to down and back, down and back to upright and forward.

CLIENT

Front-to-back

CAREGIVER

Side-to-side (on the diagonal) (1)
Positioned at the back of the chair
Upright and forward to back and down (1, 2)
Counterbalance movement

CONSIDER


Line of Movement

As close to the horizontal as possible.

CLIENT

Horizontal 

CAREGIVER

Horizontal at an angle slightly away from chair (2, 3)
45° Counterbalance  (2, 3)

CONSIDER

Range of Movement

The span of movement that covers the distance between the start and end of the move. Distance of caregiver's move equals client's span of move.

CLIENT

How far do they need to be moved back in the chair?

CAREGIVER

Start foot faces load, end foot faces direction of move; place end foot first where the client's buttocks will rest upon completion of the move. To maintain the counterbalance movement throughout entire transfer, move end foot away from the chair to achieve a start position of side-to-side (on the diagonal) (1, 2).

CONSIDER

Point of Force Application

The point where the force is applied to the client's body.

CLIENT

Buttocks and thighs. Place repositioning slider sheet under client or transfer belt around the hips and thighs (high chair arms may dictate the need to use the transfer belt).

CAREGIVER

Roll slider or grip transfer belt to produce tension. Grip on slider should see the wrists neutral and palms either down or rotated slightly upward with elbows flexed. Grip on transfer belt should see the thumb over the top of the transfer belt and grasping the client's pants (1).

CONSIDER

Command and Count

Verbal command given by caregiver.

CLIENT

CAREGIVER

CHEST UP, BACK STRAIGHT, ARMS BRACED... BRACE OFF... 1, 2, LOAD, PUSH (3)

CONSIDER

Force Production

The force needed to effect movement, which is relayed from your feet, knees and/or hands through the braced body and arms to the point of force application. For example, friction and weight will dictate the amount of force required.

CLIENT

Reduce friction and weight by:

- Bracing off (raises client slightly off chair).
- Using a slippery repositioning draw sheet.
- Using a transfer belt (one may be placed around the hips and the other around the thighs).
- When possible, have client assist by pushing with arms.

CAREGIVER

Brace off. Set body weight as a unit in a backward direction to raise the client off the chair (2).

Next, while maintaining this brace off, initiate a **LOAD** by **PUSHING** from the end foot to the start foot (3).

Now, **PUSH** simultaneously through the start foot back and down to achieve a counterbalance movement and side-to-side to shift your body weight as a unit to the end foot. Make sure you maintain the counterbalance movement throughout the entire shift as this will reduce friction, causing the client to remain slightly raised off the chair throughout the move (3, 4, 5).

CONSIDER

Tips

CLIENT

- Chair brakes must lock.
- Exercise control if chair is light.
- Excellent for recliners, solid armchairs, geri-chairs and acute care situations.

CAREGIVER

- Be sure to maintain counterbalance throughout entire move. The end foot positioned slightly away from the chair will allow this to happen (2, 4, 5).
- Do not pull with arms.

CONSIDER

Contraindications

CLIENT

- Lack of trunk control. The trunk may be positioned over the over-bed table to provide support.

CAREGIVER

CONSIDER

Options

CLIENT

CAREGIVER

- A third caregiver may place themselves in front of the chair in a proposal push position. This caregiver can provide support to the trunk, block the knees to counteract any forward movement or actively participate in the transfer.

