



## WALKING CLIENTS (ONE PERSON)

**TYPE OF TRANSFER:** With or without force

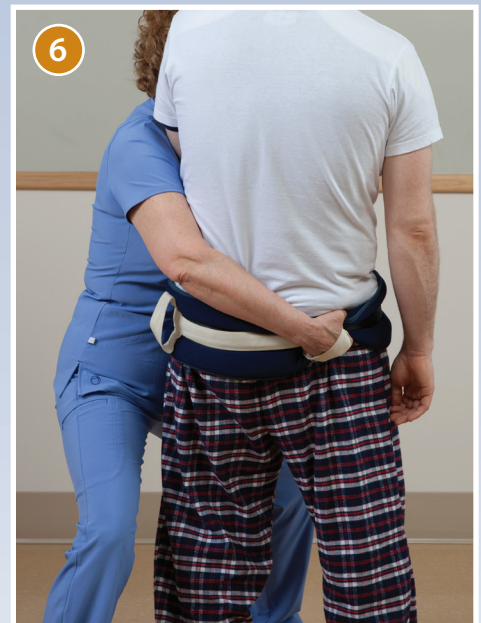
**PURPOSE:** Client is rocked forward out of chair or bed to a standing position and supported while walking short distances

**Preparatory repositioning transfer:** Sitting Up; Block, Squat & Rock; Any transfer that repositions client to front of chair

**Number of caregivers:** One

**Weight considerations:** Weight ratio

**Level of difficulty:** Complex



## 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

## TRANSFER: WALKING CLIENTS (ONE PERSON) COMPLEX

### 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

**Out of chair and rise:** Back-to-front

**Walking:** Back-to-front/Side-to-side

### CAREGIVER

**Out of chair and extend:** Side-to-side (1, 2, 3, 4, 5)

**Walking:** Side-to-side (on the diagonal) (5)

### CONSIDER

#### Line of Movement

As close to the horizontal as possible.

### CLIENT

**Out of chair and rise:** ——— | Horizontal and vertical

**Walking:** ——— Horizontal

### CAREGIVER

**Out of chair and extend:** ——— | Horizontal and vertical (1, 2, 3, 4, 5)

**Walking:** ——— Horizontal (5)

### 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

**Out of chair:** How far do they need to be moved to get out of the chair?

**Walking:** What is the distance of each step?

### CAREGIVER

**Out of chair and extend:** Start foot faces load; end foot faces direction of move; place end foot first to cover span (1, 2).

**Walking:** Start foot faces load; end foot faces direction of move; place end foot first to cover span. This foot should be placed in front of the client's foot as this will allow you to cover both directions of the client's walking motion (back-to-front and side-to-side). Your body should be angled and your pelvis facing the client (5).

### CONSIDER

#### Point of Force Application

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

### CLIENT

Hips. Client holds caregiver's hand at hip level to widen their base of support. Caregiver's hand becomes client's cane.

### CAREGIVER

Proper grip on transfer belt around hips (6).

Do not let client grasp your thumb; use an open hand grasp, with flexed elbow at client's centre of gravity (1, 3).

## CONSIDER

### Command and Count

Verbal command given by caregiver.

## CLIENT

## CAREGIVER

**CHEST UP, BACK STRAIGHT, ARMS BRACED... 1, 2 LOAD (1, 2), PUSH (2, 3), PAUSE (3, 4)**

Let client rise, then reposition yourself to begin walking.

## 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:

- Using a transfer belt.
- Bringing buttocks forward in chair (Block, Squat & Rock).
- Positioning client's feet to receive weight (strong foot forward).
- Leaning upper body forward to raise buttocks off chair.
- Initiating body rock to create momentum.
- Have client assist by pushing on chair with hands.

## CAREGIVER

The momentum achieved with the body rock starts and assists the move and will allow the client to come forward out of the chair (not up). Load to the back of the chair by **PUSHING** through your end foot and shifting your body weight as a unit to the start foot (2). Next, **PUSH** through your start foot and shift your body weight as a unit to your end foot (4). The force is relayed through your braced body and arms to the transfer belt allowing the client to come forward out of the chair (3, 4). Ensure you do not shift up; maintain your shift along a horizontal line throughout the move. Pause and allow the client time to receive their weight and stabilize (4). Now reposition yourself to walk the client by setting yourself up in a side-to-side stance (on the diagonal) to cover the client's movements in both directions (5). Your end foot should be in sync with and adjust to each step of the client as their front foot moves forward.

## Tips

## CLIENT

**Walk:** Ensure they are given appropriate time after they come out of the chair to rise to their necessary level to allow them to determine if they are physically able to walk.

## CAREGIVER

**Out of chair and extend:** Do not load down, load back on a horizontal line of movement so client will rock forward out of chair and you will not lift them up. Remember, once the client is out of the chair, rise with them and let them do as much of the work as possible.  
**Walk:** Maintain **ready position**, wide base of support, low centre of gravity and horizontal line of move while walking client.

## Contraindications

## CLIENT

- Not consistent and reliable with balance.
- Confusion, aggression, or unco-operative.
- Unable to follow commands.
- Unable to bear weight on both feet.

## Options

## CLIENT

This transfer should **only** be used to walk clients short distances (to bathroom, chair, etc.). Clients capable of walking longer distances should be assessed as independent or assisted transfers, requiring only preparatory or verbal, but not physical assistance. A walker, such as a SteadyMate™, may also be an appropriate aid to allow the client to relax and walk with security and confidence.

