Client transfers:
Safely match abilities with needs

These words are all interchangeable: patient, resident, and client
How to ensure a safe transfer:

Use this tool to find out if you need to use equipment and which type is best suited for your client*. Make sure the equipment is rated for the client’s weight.

A client’s ability level and willingness may change throughout the day. Don’t assume it’s the same as last time.

*Based on 2019 equipment choices

Before starting any manual transfer that will involve a client standing or using legs to push off, do a quick ability screen.

It helps you see if the client understands you, can follow directions and is cooperative. If clients can’t do the tasks, it hints at their ability level or a change in ability level. Tell the clinician of changes. The clinician may need to do a new assessment.
Quick ability screen - if client is lying on a bed...

1. Lift 1 leg up with your knee straight. Hold it for 5 seconds. Repeat with other leg.

2. Lift both arms up together and hold for 5 seconds.

3. Make a bridge by lifting your bottom off the bed. Hold for 5 seconds.
Quick ability screen - if client is sitting...

1. Lift 1 leg up with your knee straight. Hold for 5 seconds. Repeat with other leg.

2. Lift both arms up and hold for 5 seconds.
## How much can your client do?

A best practice is to do a quick ability screen before starting a transfer.

<table>
<thead>
<tr>
<th>Details about Client</th>
<th>Details about caregiver</th>
<th>Caregiver effort</th>
<th>Therapy wording</th>
<th>Recommended lift equipment</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A. Fully able</strong></td>
<td>Client is safe to transfer independently</td>
<td>No caregiver needed</td>
<td>None</td>
<td>Independent</td>
</tr>
<tr>
<td><strong>B. Mostly able</strong></td>
<td>Client can do most of the transfer using own effort</td>
<td>Caregiver only needs to closely watch or give a little help with the stand or transfer.</td>
<td>Very little</td>
<td>Supervised or contact guard</td>
</tr>
<tr>
<td><strong>C. Partly able</strong></td>
<td>Client uses some leg and arm strength to stand</td>
<td>Manual transfers are OK <strong>only</strong> if lift effort is less than 35 pounds. If not, use a sit-to-stand lift. Much lighter weight limits apply if you twist or lift from far, low, or high.</td>
<td>Light to medium effort with or without equipment</td>
<td>Minimum to maybe moderate assist</td>
</tr>
<tr>
<td><strong>D. Unable or dependent</strong></td>
<td>Client's legs are very weak so can't use legs to stand or support much body weight.</td>
<td>Caregiver uses a total body lift. Don’t do a manual transfer because lift is awkward or effort is more than 35 pounds of lift effort.</td>
<td>Light to medium--for setting up sling and moving lift equipment. Don’t do a manual transfer.</td>
<td>Moderate to maximum assist or dependent</td>
</tr>
</tbody>
</table>

*Click hyperlinks to see examples*
What is 35 pounds of lift effort?

Compare:

- Effort to lift or “transfer” a 35 pound load from a chair or bed

To

- Effort needed to transfer a person

Who needs more than 35 pounds of lift effort to transfer or boost up in bed? Tell the clinician, especially when there’s a change in a client’s ability level. The clinician may need to do a new assessment.
Examples of slide boards or sliding boards:

**Independent**

**With help**

= Home friendly
Examples of standing aids:

- Raised toilet seat
- Lift chair
- Grab bar
- Transfer pole
- Standing aid
- Standing aid

[Back to Table]
Examples of sit-to-stand devices:
Examples of total body lifts:

Floor-based lift: Hand-pumped version

Floor-based lift: Battery powered version

Ceiling lift: 4-post, free standing version

Courtesy of EWC Lift Systems