

# Moving & Handling Practical Sessions

## Walking Assistance

## Assisting a Walking Client

Only walk a client who is wearing appropriate, well fitting footwear, has the relevant walking aid (if appropriate) and feels well and able to undertake the task.

### Minimum Assistance

*The care worker is best positioned to one side and slightly behind the walking client with their arm behind the client's back to their furthest hip area. The care worker should not be so close as to impede the client's walking. If a walking aid is in use, the care worker would generally assist on the opposite side to this. The client should dictate the pace of walking.*





### **Moderate Assistance**

*One or two care workers positioned at the either side and slightly behind the client. A handling belt, if assessed to be appropriate, may offer further support if required. Additional support may be offered by placing a hand on the client's shoulder for stability. Taking the client's hand is also useful as they can follow their own hand/arm to enable forward momentum.*

### **Assisted walking on steps/stairs**

*Clients who require physical assistance with their mobility are at risk of falling. Care workers assisting clients to ascend or descend steps and stairs need to be aware of the high risk to themselves and the client should this happen. However, this risk is somewhat decreased if care staff are working closely with therapists as part of a rehabilitation/reablement programme. Appropriate training, supervision and documentation should be in place from the therapist to ensure that the risk of the client and care staff falling is at its lowest practical level. The programme of treatment will be managed by the therapist. Goals set by them must be realistic and care staff will be encouraged to feedback progress to the therapist on a regular basis. See page 222-223 for further guidance.*

**Equipment Used:** Handling belt (optional)

**Sitting Client Back into Chair - not suitable for clients with painful/injured hips or knees**

*Independent client – not on a one-way glide sheet. May be able to 'bottom shuffle' themselves to back of chair after given verbal guidance by care worker.*

*Independent client sitting on one-way glide sheet. Client either pushes themselves back into the chair, or care worker assists by gently pushing just below knees (kneeling in front of them) this will slide the client back into the chair. This will not be appropriate for a client with painful knees or hips, although the use of a pillow in front of the client's knees for the care worker to push against will reduce the risk. Further assistance can come from an additional care worker supporting the client in a forward position. N.B. The client will not be able to move back into a chair unless their head, shoulders and trunk are positioned forward.*



### **Minimum Assistance – one care worker**

*Client slightly slipped in chair – not on one-way glide sheet.*

*Care worker to kneel (sat back on feet) in front of client. Position client's knees at right angle. Place one of client's feet on care worker's thigh, hold client's foot with both hands. Client to lean forward from back of chair and push foot gently against care worker's thigh, whilst pushing up on arms of chair. A step-stool would achieve same effect if placed under client's feet to allow them to push against it. Here a pillow can be placed against the knees of the client, a low kneeling care worker can then move into high kneeling and this action will slide the client back into the chair.*

### **Moderate Assistance – two care workers/one care worker**

*Client who is slouched in chair – not on one-way glide sheet.*

*Care workers to kneel at side of client's chair facing each other. Position client's feet, one at a time, under their knees, feet flat to floor and move client forward slightly by shoulders. Place both client's hands on arms of chair. Care workers to place hands over front of client's knees just below the knee joint and place other hand to lower back of client. One knee on floor, one foot on floor – use thigh muscles to move leg gently against client's knees, at the same time client to push up on chair arms and push back with their feet. This may need to be repeated more than once to get client to back of chair. This same technique can be utilised if the care workers are kneeling in front of the client. They would use a handling sling against the client's shoulders to keep them forward and ease the knees back using a pillow/cushion to protect them if possible.*

As with the technique shown to bring the client forward in the chair, a similar move can be used to assist a client back into the chair. The care worker is positioned in front of the client, kneeling on one knee. The care worker places one hand on the outside of the client's hip and the other hand on the front of the leg, just below the knee joint on the same leg. On command, the care worker gently assists with a hip hike (upward) motion whilst at the same time gently pushing just below the knee.

This move can also be performed with a small slide sheet. Robust care must be taken to ensure the slide sheet is placed only under the thigh and buttock being assisted back into the chair as the client is at real risk of sliding forward if they have placed the slide sheet under both thighs and buttocks.

If the care worker finds kneeling either difficult or unhygienic, sitting in front of the client on a chair or stool may be easier.



The figure on the right demonstrates the gentle, upward motion on the hip and the gentle pressure just below the knee to assist the client back into the chair

Equipment used: One-way glide sheet, pillow, step stool or small slide sheet.