

Moving a Hospital bed/trolley Theatre/between departments

General

- You should always follow instructions given by the team.
- Appoint one person to co-ordinate the move make sure that the team understands the sequence of actions.
- Always use the correct technique to avoid injuring yourself or helpers.
- Try and get as close as you can to the bed avoiding / dealing with any obstructions if you can when pushing/pulling the bed.
- Use the whole of the hand to move / hold loads. If arms and trunk can be used as well they can provide and even more secure hold (depending on the activity).

Suitable equipment / aids for this task:

- Adjustable height bed / trolleys

For all equipment, the user should, before attempting to use them have:

- Sufficient knowledge on purpose and how to use them safely
- Ensure brakes are released on equipment prior to moving.
- Check floors for any potential slipping hazards before commencing the transfer
- Trolleys / beds / tables all have slightly differing operating instructions so manufacturer's instructions need to be referred to or advice sought from hospital staff.
- Consider individual capability of staff involved and try and match height where possible so as to minimise disadvantaging anyone involved.

Preparation (minimum of 2 or more individuals may be needed depending on location, donor size etc.)

1. Donor size, weight, shape and any obstructions assessed (e.g. attachments to donor). Actual donor size and weight will be known (as this is part of organ donation procurement requirements anyway).
2. Identify team leader.
3. Ensure all attachments are secure and not likely to cause injury e.g. catheter bags.
4. Check brakes and adjust to comfortable working height making sure not to disadvantage shorter individuals.

Performing the bed movement.

1. Ensure the brakes have been released on the bed and the cot sides are up to ensure safety of the Donor when bed is being moved.
2. Position staff one/two at head end of the bed and one/two at the foot end depending on number of staff available. If only 3 available two at the head end would be desirable. Another person to open doors etc on route to ease move and warn of any obstructions to be used where possible particularly when moving Donor in a hurry.

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3. Communicate with colleagues route to be taken
4. When moving bed in a straight line push from middle if only one person of head end or side by side if two people, pull from middle of foot end in middle of bed, head end person taking care not to push too hard and foot end person to be the lead person, being mindful of feet position to avoid injury from bed striking against legs/feet.
5. When manoeuvring bed around corners, head end person to move to the right hand side of bed end for a left hand turn and left hand side of bed end for a right hand turn and push from the corner. The person at the foot end should do the opposite. This requires less force to move the bed and less strain on the body. The bed will move more easily.
6. If there are doors to open along the route and there is no-one available to open the doors for you the movement of the bed should be halted whilst doors are opened, timely communication with colleagues is important here so the bed is not pushed person leading bed movement. Where possible doors should be held open by an additional person if they do not automatically stay open. If this is not possible awareness of body posture should be paramount when guiding bed through doorway so as not to use twisted body positions and putting yourself at risk of injury.

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