

# Working Solutions

## Tuesday Stream D

Session 3  
1115– 1300

Sarah Thornton  
Management in Manual Handling PGCert  
Ergonomics and Human Factors MSc



## An ergonomics approach to managing transfer from two handed to one handed

This Theory session is aimed at Adult Care in the Community at the Experienced Trainer

### Biography:

I am a Moving & Handling Advisor for Kirklees Council (Adult Services). I have been an Advisor for the past 13 years. In that time I have attended Loughborough University twice, achieving a PGCert in Management of Manual Handling and MSc in Ergonomics and Human Factors.

### Abstract:

**Objectives:** Presentation of MSc Thesis (Loughborough University): An ergonomics approach to managing transfer from two handed to one handed care.

Motivation for this study came from the investigators own experience of single handed care (SHC) implementation in home care services. The well-publicised social care crisis has led many home care providers, staff and service users (SU) to believe that *cost savings* for the commissioning authority eclipse the *safety* of the care providers and their SUs. The question investigated was *'is an overhead with SHC safer, or as safe as, a floor-based hoist with a double-up?'*

Several studies have compared floor-based and overhead hoists. Current evidence supports the use of overheads over floor-based hoists. However, only one study has compared one vs two handlers undertaking a hoisting task. Other SHC publications focus on cost savings. This study adds to the current body of evidence and fills in gaps regarding the views of home care providers and their staff.

A three-part investigation was used to compare both systems and explore the views and experiences of SUs and their home care service providers.

**Methods:** Both systems were compared within and between controlled laboratory (LAB) conditions ( $n=8$ ), through home care service evaluation (SE) ( $n=8$ ) and group interviews ( $n=10$ ). The following outcome measures were designed to encompass the task, the SU and the care provider. *Task:* Hierarchal Task Analysis and time for transfer. *SU:* self-rated feelings of safety & security, comfort, privacy and dignity. *Care staff:* self-rated performance success and perceived exertion, Direct Observation Instrument for Assessment of Nurses' Patient Transfers and Rapid Entire Body Assessment (LAB only). *Care provider supervisors:* group interviews. Statistical analysis was used to compare both systems within LAB and SE and between LAB and SE.

**Results:** A total of 32 conditions were observed. Results indicate the overhead/SHC to be the safer option. Statistical significance was found in 14 comparisons. Handler performance influences the SU's feelings of safety, security and comfort. Frequent problems experienced with the floor-based are space constraints, flooring interface and transferring heavier SUs. The overhead overcomes these issues. Views on SHC vs double-up are mixed. SHC has benefits for the SU in terms of independence, privacy and person centered care. There is resistance to SHC from some care staff, who feel double-ups are safer. SHC is recognised to increase cost saving and/or capacity of the workforce.

**Conclusions:** The results indicate that overhead hoist/SHC is a safer option to the floor-based hoist/double up.

### Objectives:

Findings from MSc project