

Body Mechanics

POSITIONING, MOVING, AND TRANSFERS



Body Mechanics for the Caregiver

Body mechanics involves standing and moving one's body so as to prevent injury, avoid fatigue, and make the best use of strength.

When you learn how to control and balance your own body, you can safely control and move another person. Back injuries to nursing home aides are common, so when doing any lifting be sure to use proper body mechanics.

General Rules

- Never lift more than you can comfortably handle.
- Create a base of support by standing with your feet 8–12" (shoulder width) apart with one foot a half-step ahead of the other.



- DO NOT let your back do the heavy work—USE YOUR LEGS. (The back muscles are not your strongest muscles.)
- If the bed is low, put one foot on a foot-stool. This relieves pressure on your lower back.
- Consider using a support belt for your back.

Helpful Caregiver Advice for Moving a Person

These pointers are for the caregiver only.

1. • Tell the person what you are going to do.
• Before starting a move, count with the person, "1-2-3."



2. • To feel in control, get close to the person you are lifting.
• While lifting, keep your back in a neutral position (arched normally, not stiff), knees bent, weight balanced on both feet. Tighten your stomach and back muscles to maintain a correct support position.
• Use your arms to support the person.
• Again, *let your legs do the lifting.*



3. • Pivot (turn on one foot) instead of twisting your body.
• Breathe deeply.
• Keep your shoulders relaxed.
• When a lot of assistance is needed with transfers, tie a strong belt or a transfer belt around the person's waist and hold it as you complete the transfer.



Prevention of Back and Neck Injuries

To prevent injuries to yourself, get plenty of rest and maintain:

- Good nutrition
- Physical fitness
- Good body mechanics
- A program for managing stress

Common Treatments for Caregiver Back Pain

If you **do** experience back pain:

- Apply a cold ice pack to the injured area for 10 minutes every hour (you can use a bag of frozen vegetables).
- Get short rest periods in a comfortable position.
- Stand with your feet about shoulder width apart and hands on hips, bend backwards. Do 3–5 repetitions several times a day.
- Take short, frequent walks on a level surface.
- Avoid sitting for long periods because sitting is one of the worst healing positions.

As the caregiver, you should seek training from a physical therapist to provide this type of care so as to reduce the risk of injury to yourself or the person in your care. The therapist will correct any mistakes you make and can take into account special problems. To determine the best procedure for you to use, the therapist will consider the physical condition of the person you care for and the furniture and room arrangements in the home.

Moving a Person

When you have to move someone—either in bed or out of bed—remember these tips:

- Plan the move and know what you can and cannot do.
- Let the person do as much work as he is capable of.
- Avoid letting the person put his arms around your neck or grab you.
- Use a transfer belt to balance and support the person.
- Place transfer surfaces (wheelchair and bed) close together.
- Check wheelchair position, **brakes locked**, armrests and footrests swung out of the way.
- Let the person look to the place where he is being transferred.
- If the person is able, place his hands on the bed or chair so he can assist in the movement. If the person has had a stroke or is afraid, have him clasp his hands close to his chest.
- Ask the person to *push* rather than *pull* on the bed rails, the chair, or you.
- Work at the person's level and speed and check for pain.
- Avoid sudden jerking motions.
- Never pull on the person's arms or shoulders.
- Correctly position the person. (This helps the body regain lost function and helps prevent additional function loss.)
- Have the person wear shoes with good treads or sturdy slippers.

NOTE

To encourage independence, let the person assist as he is able. It's okay for the person to stand up partly and sit back down. ■

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