Guidelines for the Safe Use of Mobile Electric Patient Lifting Hoists

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**Introduction**

Mobile electronic patient lifting hoists form part of the moving & handling strategy of the Trust. These guidance notes are available for staff to consult in the event of having to use a hoist, so that a safe transfer can be carried out. The guidance will cover employers and user responsibilities, together with practical advice about using any type of electrical hoist.

*This guidance should be read in conjunction with the Trusts Moving and Handling Policy and the Trusts Falls Management Policy for Service Users*

**Purpose**

This guidance is for all staff whose duties covers the treatment of service users who are not able to weight bear, and cannot be transferred safely in any other way. It is only for use by staff who have received training in the use of patient hoists.

**Any required definitions/explanations**

A mobile electric patient lifting hoist is an item of manual handling equipment that is used to mechanically lift a service user from one surface to another in a manner which is safe both for the service user and member of staff. *This guidance includes standing hoists*

**Responsibilities and Accountability**

**Employer’s responsibility**

Under the Lifting Operations and Lifting Equipment Regulations 1998, (LOLER), all equipment that has lifting as its primary function, must be inspected by a competent technician every six months and serviced every year. All hoists must have on them some form of label that identifies that they have undergone these inspections and services.

The Trust provides training in the use of hoist to all members of staff likely to use the equipment.

**Employees’ responsibility**

Under the above regulations, employees should ensure that prior to them using the hoist they have determined that it is in full working order. Employees must inspect the hoist prior to each use. They must check:

- LOLER inspection is in date on hoist and sling
- The brakes to ensure that they work
- The electric control to ensure that it works
- The spreader bar, (where the sling hangs from), rotates 360 degrees
- The hoist is fully charged or has been on charge when not in use. That any spare battery has been charged or is being charged when not in use
- The wheels freely rotate
- The legs open and close with ease
- The sling is not torn or ripped in any way and is the correct type of sling for the hoist

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- The stitching on the loop/clip attachment is secure
- Prior to using a hoist the staff must ensure that they have selected the correct sized and type of sling for the service user. The choice of sling depends on the amount of support that the service user requires, the condition of the service user, the tasks to be undertaken and the service user’s comfort.

A checklist detailing this information is attached to every hoist within Trust premises. Staff must complete this checklist prior to hoisting. This information can also be found on The Staff Room.

Staff have other responsibilities:

a) Each member of staff must be able to identify those service users who require a hoist and be able to ensure their safety, based upon a suitable risk assessment, please refer to the Moving and Handling Policy (HSC010) for further information on risk assessment.
b) The staff must ensure that there are no contra-indications in the use of a hoist with a particular service user. For example, the use of a fabric sling with a patient who has a spinal injury/suspected hip fracture.
c) Two members of staff MUST be present when a hoist is being used in Trust premises, unless deemed different by thorough detailed risk assessment.

**Use of Hoist**

**Safe Working Load**

Staff members using the equipment must ensure that the service user’s weight does not exceed the safe working load, (SWL) of the hoist and sling. The weight that the hoist can safely take is clearly marked on the hoist mast, or boom the SWL of the sling can be found on the slings label.

If the SWL of the hoist is 150kg and the SWL of the sling is 130kg, then the weight of the patient must not exceed 130kg. You do not exceed the item of equipment with the lowest SWL.

**Procedure**

When putting the slings into position, staff must ensure that they monitor their own posture and are not bending over the service user. This is particularly important when the service user is in their chair.

On hoists with slings that have loops, ensure the loops on the slings are the same both sides. For example, if the loops on the left side of the service user’s upper body are on long, the right side should also be on long unless the risk assessment states otherwise. (This may be different for specialist bespoke slings)

**Do not** put the brakes on a hoist unless the hoist is being put away for storage, when using the standing hoist follow the manufacturer’s instructions with regard to brake use.

**Do not** use the hoist as a mode of transport.

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Do not move a service user in a hoist through a doorway, unless risk assessed thoroughly and no other option is available.

When raising a service in a hoist, only ever lift them to the lowest height required, i.e. their bottom only just clears the plinth/chair or other receiving area.

Do not leave a service user unattended whilst hanging in a hoist.

When lowering a service user into a chair ensure that as they lower down, their bottom slides down the back of the chair. This ensures that when they get to the seat of the chair they are at the back of the chair. It must be noted that as the service user slides down the chair the chair may tilt backwards this should be allowed to happen. As the service user gets closer to the seat of the chair the chair will start to tilt forward, as this happens the hoist will start to move backwards. This should all be allowed to happen but the service user must be told that this is going to occur and the staff member must control the descent. The aim of this is that the staff will not have to pull the service user to the back of the chair using the straps at the back of the sling. (These were provided for directional change only.) For chairs that do not tilt push the service user back from the front using the sides of the sling NEVER push on the knees.

Laundering of Slings

All slings must be laundered as instructed by the manufacturers care label. If a sling is used for an individual service user this should be kept with the service user for continued use. If more than one service user in a clinical area requires the same size/type of sling, different clients, a separate sling needs to be identified for each service user. All slings have an identifying (serial) number. Asset registers detailing these should be kept at ward level. Slings must not be marked with permanent marker pens as research indicates this degrades the fabric.

Education and Training

a) Staff who use hoisting equipment must attend patient handling foundation training and subsequently pass a patient handling competence assessment or complete masterclass session, which includes the safe use of hoists, at least once every 12 months.

b) Staff must understand the principles involved and the purpose of the activity. Staff should not attempt to use the hoist until they have had appropriate training. If they have any doubts they must not use the hoist and must seek advice or assistance.

c) This training will be delivered by members of the Trusts Manual Handling Team and will include instruction regarding the completion of pre-use checks of both the hoist and slings.

d) Staff must all be aware of the location of this guidance document.

e) Staff must have access to the manufacturer’s instruction booklet. Manufacturer guidance, along with further ‘how to information’ can be found within the manual handling pages on The Staff Room

f) Training on these guidelines will be carried out by the Manual Handling Team during mandatory training sessions. Please refer to the Trusts Statutory and Mandatory Training documents and Moving and Handling Policy,
g) A record of training delivered and names of attendees/non-attendees is recorded and passed on to the Learning and Development department for recording on the training database.

Audit
Hoists and slings within the Trust are audited annually by the Manual Handling Team; hoists are inspected to ensure a LOLER certificate has been issued within the last 6 months and that they are in a good state of repair.

All fabric slings presented to the manual handling team at the time of the audit are physically inspected to ensure Trust identification/serial numbers are visible that they have a valid LOLER inspection label present and are in good working order. Information collated through the audit is stored within an excel spread sheet which is accessible by the manual handling team, estates department and staff responsible for the Trusts assurance policies. All clinical areas within the Trust with hoisting equipment complete a quarterly self-audit tool when requested by the manual handling team.

Copies of all hoist and sling 6 monthly service reports are stored alongside the hoist and sling spreadsheet this enables the manual handling team to identify if a sling without a visible label has been inspected.

The Trust’s insurers suggest that all fabric slings that are more than 10 years old should be replaced, this would be a costly exercise in areas where slings are not used on a regular basis; advice regarding a sling shelf life was sought from the manufacturers of the equipment that we have within the service. Appendix 1 provides the manufacturer’s advice regarding the shelf life of their slings and the manual handling team endorse this so long as the LOLER inspection has been completed and is in date.

Following the audit, reports are written to individual units identifying if hoisting equipment requires attention/inspecting or equipment is missing. A poster identifying equipment allocated to the particular area is also sent for displaying where the equipment is stored to ensure that all equipment is inspected when the service/LOLER inspection is due.

It is the responsibility of the clinical areas to arrange the inspections via Helpdesk and to replace any missing or condemned equipment. The manual handling team must be notified of any condemned equipment/new purchases to enable the serial numbers to be added to the equipment database.

Slings purchased by individual service users must be clearly labelled, as should equipment for trial from Millbrook to ensure that they are not included on the Trust data base or inspected by the Trusts nominated servicing company when they complete their 6 monthly visits.

Equality considerations
The author has considered the needs of the protected characteristics in relation to the operation of this policy and protocol to align with the outcomes with Health & Safety Committee. We have

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identified that ensuring that communication reaches all vulnerable groups this includes taking into consideration communication barriers relating to language or specific needs to reach the whole population. Some groups are particularly vulnerable in relation to their protected characteristics, e.g. age, ethnic minority communities and disability and where we identify that, the expectation is that staff will meet the needs appropriately.

Reference Guide

HSC010 Moving and Handling Policy
APPENDIX 1

Within the service we use a variety of sling manufactures below is the information from each manufacturer sling user guide regarding the ‘shelf life’ of their fabric slings, this must be used in conjunction with the LOLER inspection/report when a decision is needed regarding replacement.

**Care & Independence Slings**

**LIFETIME WARRANTY**
We proudly guarantee every sling we make to be free of defects in materials and workmanship. Any defects in materials or workmanship are covered for the lifetime of the product. Product damage through wear and tear, neglect or misuse can be repaired at a reasonable charge. If you have a problem with a Glove Sling, don’t worry, we are here to support you.

- Any manufacturing defect will be rectified free of charge. You can be confident about our quality.
- Damage to the sling by ‘wear and tear’ may be repairable. We can examine slings under the LOLER process and provide a quotation for repair at a reasonable cost.

**PRODUCT CARE**
Just like your clothes, a sling will gradually deteriorate with washing and will need replacing when it shows signs of wear. Laundering varies enormously in temperature, vigour and frequency depends on use requirements and hygiene policies. The life of the sling will vary accordingly. Every sling is marked with its maximum wash temperature. If infection control requirements permit a sling to be washed at a lower temperature on a more gentle cycle it will last longer, just like your clothes. Deterioration due to laundering may be indicated by discolouration to some materials or leading labels, however, a sling may be still safe to use. We offer a re-labelling service combined with a LOLER examination to ensure ongoing safety. Unlike clothes, slings are exposed to considerable loading and deterioration can affect safety. This is why it makes sense for sling to be replaced when it is worn or damaged rather than after a specified time. As with clothes, it is virtually impossible to predict the life expectation of a sling in months or years. This is why our guarantee is against manufacturing defects and is not time limited.

[Image of Care and Independence Systems Ltd]

**LIKÖ slings**

**Expected Life Time**
The product has an expected life time of 1-5 years during normal use. Expected life time varies depending on fabric, use frequency, washing procedure, and weight carried.

**Periodic Inspection**
The product must be inspected at least once every 6 months. More frequent inspections might be required if the products are used or washed more often than normal. See Liko’s protocol Periodic Inspection for the respective product.

[Image of Liko Original HighBack Sling]

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Oxford slings

Expected Service Life

The expected service life of an Oxford sling will vary dependent on use and following the care and washing instructions provided in the user guide. Factors such as wash temperature, detergents, frequency of use and patient weight will impact on the lifetime of your sling. Joens Healthcare recommend that slings are checked each and every time prior to use to ensure the safety of the patient. Bleached, torn, cut, frayed or broken slings are unsafe and must be discarded and replaced. It is a requirement under LOLER (Lifting Operations and Lifting Equipment Regulations 1998) that slings are thoroughly checked and passed fit for use. For further advice, please contact your authorised Oxford Service Provider or Joens Healthcare.

⚠️ WARNING

- Oxford recommends the use of genuine Oxford parts. Oxford sling and lift products are designed to be compatible with one another. For country specific guidance on sling use and compatibility, please refer to the sling label or contact your local market distributor or Joens Healthcare.
- For the safety of the patient and carer, before using a sling a full risk assessment must be conducted to ensure that the correct sling choice, method of positioning in the sling and procedure for transfer has been determined for the patient.
- CHECK sling and stitching before each use. Using bleached, torn, cut, frayed or broken slings is unsafe and could result in serious injury of death to the patient.
- DO NOT alter slings. Destroy and discard worn slings.
- NEVER leave a patient unattended.
- DO NOT exceed the rated capacity of the sling or lift.
- DO NOT attempt to re-position a patient by pulling on the sling loops.

Arjo Slings

- The expected operational life for fabric slings and fabric stretchers is approximately 2 years from date of manufacture. This life expectancy only applies if the slings and stretchers have been cleaned, maintained and inspected in accordance with the 'ARJO Sling Information' documents, the 'Operating and Product Care Instructions' and the 'Preventive Maintenance Schedule'.

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