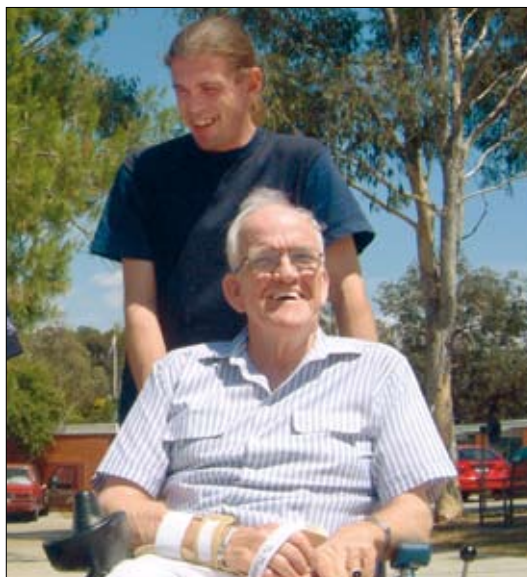




# BACK TO BASICS

handy hints for carers to help prevent  
back injuries



Back to Basics– handy hints for carers to help prevent back injuries was compiled by the Department of Veterans' Affairs.

Inquires about this book should be forwarded to:

Social Health Policy  
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Copies of this book can be obtained by phoning DVA on:

133 254 (metropolitan callers) or  
1800 555 254 (non-metropolitan callers)  
or by visiting the DVA website at  
[www.dva.gov.au](http://www.dva.gov.au)

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**Department of Veterans' Affairs**

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“...carers at home caring  
for their spouse or other  
family members have  
unique needs..”

# INTRODUCTION





# INTRODUCTION

## SAFETY TIPS

### Safety Tips—General

- Never attempt to lift the person you are caring for.
- Utilise every technique possible, such as machines or other people to reduce the risk of injury to yourself or the person you are caring for.
- Familiarise yourself with equipment that is available to assist you in your caring role.
- Do not attempt to move someone by yourself if you can get help.
- Before moving or transferring a person, explain to them exactly what you are going to do. Plan the transfer yourself carefully before attempting it.
- Gain the co-operation, both physically and mentally, of the person being moved.
- Avoid loose-fitting clothes that may interfere with your manual handling tasks. Wear appropriate clothes and footwear as recommended by your health provider.
- Posture is important. Try and maintain good posture at all times.
- Keep areas where you are performing transfers unobstructed.

“...carers at home caring for their spouse or other family members have unique needs...”

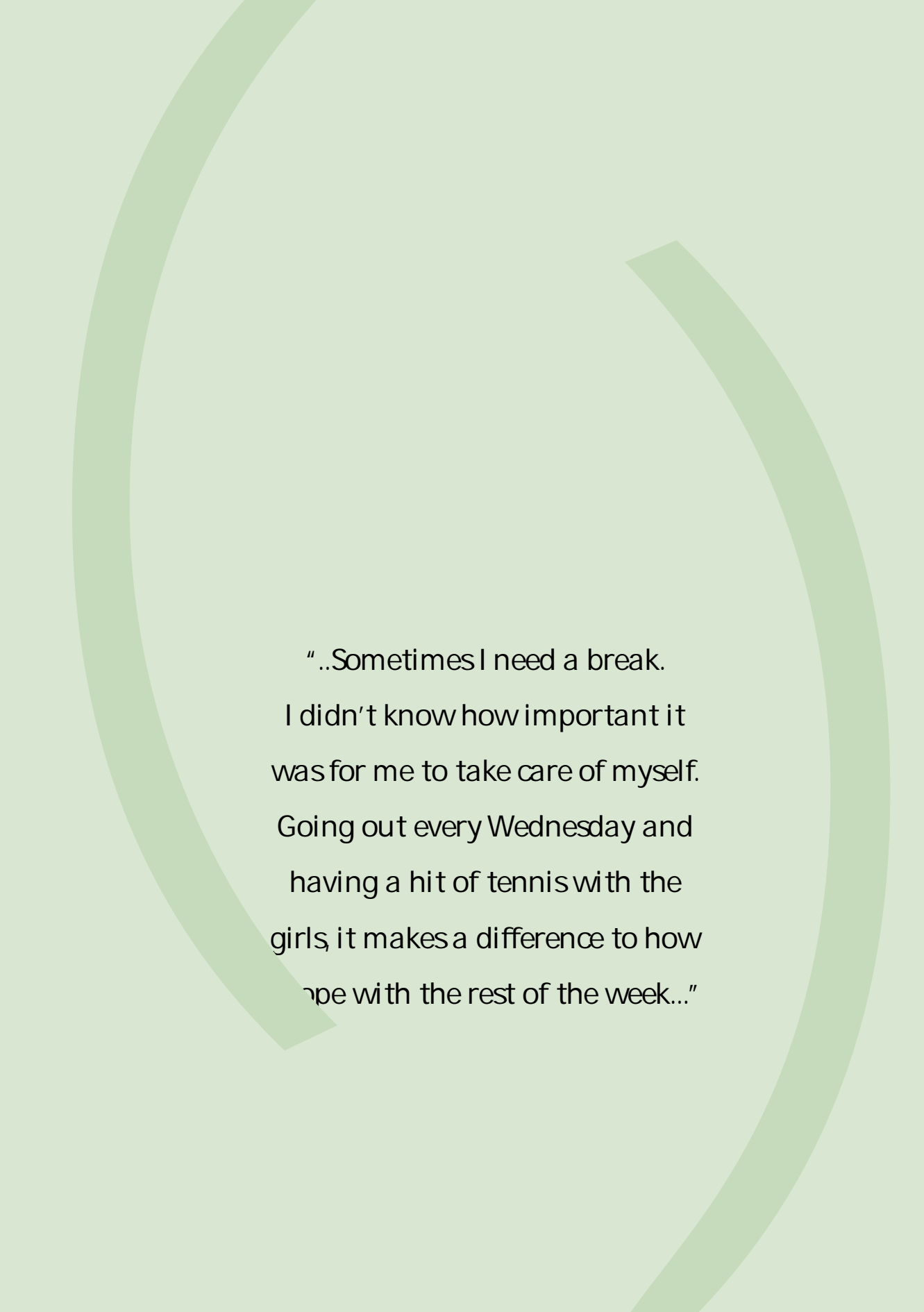
Carers play an important role in providing essential support to their spouse, family members, friends or other members of the veteran community who are unable to totally care for themselves. The Department of Veterans' Affairs recognises this vital role, through its support to veterans and war widows/widowers, their dependants, families and carers.

*Back to Basics* is an easy-to-use reference guide for carers that demonstrates current, accepted methods for moving or transferring a person in their care.

The techniques of 'transferring' encourage a carer to transfer the bodyweight of the person being moved, rather than lifting the person. These principles ensure the safety of both the person being cared for and the carer.

This guide includes an overview of products and aids available, including those that encourage mobility and can reduce the risk and severity of injury in the case of falls. Exercise ideas to assist the carer to maintain good health and help them to perform their role are also included.





“..Sometimes I need a break.  
I didn't know how important it  
was for me to take care of myself.  
Going out every Wednesday and  
having a hit of tennis with the  
girls, it makes a difference to how  
I cope with the rest of the week...”

# HEALTH OF THE CARER





# HEALTH OF THE CARER

## HEALTH TIPS

### Health Tips

- Eat a diet high in fresh fruit and vegetables—this will help you maintain strength and energy throughout the day.
- Drink plenty of water—this will help you remain hydrated throughout the day and can aid digestion.
- Keep active—exercise regularly.
- Time out—take time for yourself.
- Ask for help when you need it.

## HEALTH OF THE CARER

Your role as a carer is a very important one. It is a constant role that can be physically and mentally demanding and it is important that carers look after themselves to avoid injury or burnout. Your health and physical fitness is important in assisting you to look after the person you care for and it is important to consider your own needs and take time for yourself.

### KEEP FIT—EXERCISE REGULARLY

**Exercise regularly—it will be good for you physically and mentally as well as a chance for respite from your caring role.**

Physical activity is recommended for at least 30 minutes on most days. You can accumulate this during the day by combining a few shorter sessions of activity throughout the day.

Regular activity can:

- help prevent heart disease, stroke and high blood pressure;
- reduce the risk of developing Type II diabetes and some cancers;
- help build and maintain healthy bones, muscles and joints reducing the risk of injury; and
- promote psychological wellbeing.

If undertaking an exercise program is impractical for you there are a wide range of physical activities you can do during your daily activities that offer great benefits. Think of movement as an opportunity, not an inconvenience.

Four types of exercise are needed to keep you healthy:

- 1. Fitness activities**—keep your heart, lungs and blood vessels healthy.
- 2. Strength activities**—help your muscles and bones stay strong and assist in injury prevention.
- 3. Flexibility activities**—help you to move more easily and assist in injury prevention.
- 4. Balance activities**—improve your balance and help to prevent falls.

Here are some suggested exercise activities:

Walking to the shops

Golf

Walking the dog

Water aerobics

Mopping and vacuuming

Swimming

Dancing

Lifting and carrying (e.g. groceries or small children)

Climbing stairs (instead of taking the lift or escalator)

Moderate yard work (e.g. digging and shifting soil)

Tai Chi

Bowls (indoor and outdoor)

Yoga

Bike riding

## STABILITY

As well as making sure you maintain good back posture when transferring, it is important to be aware of how to stabilise your abdomen (trunk) and lower body. Stability is important as it prepares your body for transferring and helps prevent injury.

Stabilising is performed by contracting the 'corset' like muscles that support



your spine and lower back. Prior to undertaking any transferring, contract your pelvic floor muscles and at the same time gently draw your navel towards your spine. This action of drawing your navel towards your spine causes the deep stomach muscles to contract. As these muscles tighten they will act as a 'brace' to support your spine. By performing this action during everyday tasks such as gardening and cleaning the house, you are developing your core stability and reducing your chance of a lower back injury.

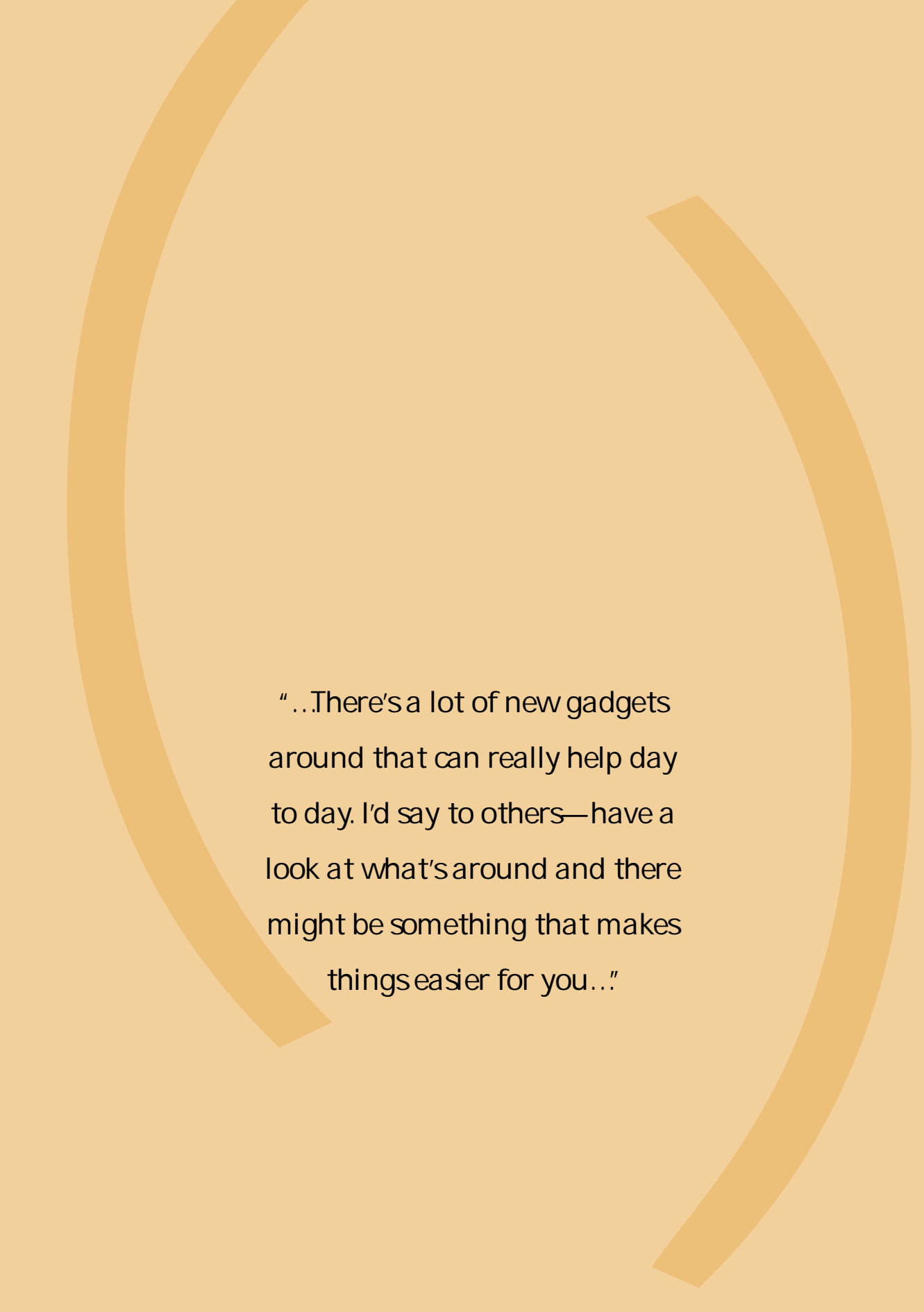
To transfer the person you care for safely, it is important that you use these muscles each time you perform a transferring movement.

If you are unsure of how to stabilise effectively, please contact your health provider.

Maintaining your fitness, balance, strength, flexibility and stability is vital to minimising your risk of injury when helping to transfer a person, and in your general day-to-day activities.

## MINIMISE YOUR RISKS

- Explain to the person you are about to transfer what will be done during the intended move so they can assist where possible.
- Where possible use equipment to reduce effort and stress on yourself and the person.
- Always bend your knees and maintain good back posture.
- Do not go into a position that is uncomfortable for you (e.g. a squat).
- Never try to catch a person if they are falling.
- Never attempt to take all of a person's weight when transferring.
- Be aware of your own ability and physical limitations and exercise regularly to remain strong.
- When in doubt—do not attempt the transfer.



“...There’s a lot of new gadgets around that can really help day to day. I’d say to others—have a look at what’s around and there might be something that makes things easier for you...”

# CHAIR TRANSFERS

Helping someone to stand up

Helping someone to sit down





# CHAIR TRANSFERS

## SAFETY TIPS

### Safety Tips For You

- Bend your knees when assisting a transfer and maintain good posture.
- Contract your deep corset-like muscles to help stabilise your spine.
- If the person is having difficulty standing from a low chair, you may need to raise the chair height using an extra firm cushion, or by placing blocks or a platform under the legs of the chair. Ask your health provider about appropriate aids.
- If you feel strain in your lower back when preparing to assist a transfer—stop the movement.
- If the person you are transferring is beyond your strength and ability—do not attempt the transfer, and seek extra assistance.

### Safety Tips For The Person Being Cared For

- Try to only sit in chairs with arm rests on both sides.
- When getting out of a chair, get up slowly and push up from the arms rests.
- Check chair stability prior to standing.
- Avoid sitting in low chairs.
- Make sure that you have sensible, supportive footwear with a non-slip sole (not slippers).
- Blood pressure can fluctuate when you change your posture, such as lying to sitting or sitting to standing. To avoid dizziness, wait a few minutes before moving.

## HELPING SOMEONE TO STAND UP



### Person's position

Ensure the person is sitting forward in the chair. Their feet should be slightly apart, placed back just underneath the chair.

Before standing, the person should bend forward at the hips and look up so that their:

### 'Nose is over their toes'.

The carer in this example is only able to offer assistance and guidance.

← THIS CHAIR IS LOW AND MAY NEED TO BE RAISED UP ON BLOCKS.



### Carer's position in front

If the person requires light to moderate assistance, you will need to stand in front. Have one foot in front of the other, maintain a wide base and grasp the person just below their waist or hold onto their waistband.

The person should have their hands on your hips or on the arm rests of the chair to assist with standing.

Blocks to raise the chair height would assist in this example.

To stop the person's feet slipping, use a non-slip mat under their feet or place your feet in front of theirs while assisting them to stand.



## **Carer's position at the side**

If the person requires less assistance you may like to stand at the side.

The person can push up with their arms, while you assist from the side.

## **SITTING DOWN**



Ask the person to feel for and use the arm rests or edge of the bed if possible.

The person should lower themselves down slowly onto the surface and not flop.

Ask the person to 'stick their bottom out' when sitting to ensure they sit back in the chair. This can save you from then needing to further assist the person into the correct sitting position.

Ensure the person can feel the seat with the backs of both legs before sitting down.

STANDING UP USING TRANSFER SLING



A transfer sling (or transfer strap) can be used to transfer a person needing light assistance from a chair to a standing position as well as a range of other transfers. For more information about transfer slings, talk to your health provider.

STANDING UP USING A SPRING CHAIR



This type of chair is a low cost and effective aid to standing.

The spring mechanism must first be adjusted for the individual's weight. See instruction manual and / or your health provider for information on how to adjust the mechanism.

THIS CHAIR HAS HEIGHT ADJUSTABLE LEGS.



“...I care for my husband and around our home the biggest risk area for falls is definitely in the bathroom, with slippery tiles and hard surfaces. We just have to take extra care by ensuring a non-slip mat is used and our tiles are coated with a non-slip finish...”

# SHOWER, BATH AND TOILET TRANSFERS

Transfer from wheelchair to shower chair

Transfer from wheelchair to toilet

Bathing someone using a bath board





# SHOWER, BATH AND TOILET TRANSFERS

## SAFETY TIPS

### Safety Tips

- Remember to bend your knees and not your back when assisting the person to put their legs into or out of the bath.
- Do not use the towel rail, door knob, toilet paper dispenser, or soap holder as a grab rail—they are not designed to carry a person's body weight.
- Use a non-slip mat in the bath and shower.
- Ensure the bathroom and toilet floors are non-slip and textured.
- Rails in bath, shower and toilet increase safety.
- Consider leaving the hallway and toilet lights on at night if night toileting is needed.

## TRANSFER FROM WHEELCHAIR TO SHOWER CHAIR



Position the wheelchair so the distance of the transfer is minimal. Ensure the wheelchair brakes are on and any footplates are taken off or swung away.

← BRAKES ARE ON



Assist to standing. Note the position of the carer's feet i.e. one foot pointed in the direction of the transfer. Do not let the person grab you around the neck. A transfer sling (or transfer strap) can also be used in this transfer.

Once standing, use your weight to balance the person. Your knees should remain slightly bent with your feet apart and maintain good back posture. Get as close to the person as possible.

← NON-SLIP MAT



During this transfer the person being assisted needs to use their own upper and lower body strength to help.

If the person cannot use their lower limbs, a hoist should be used.

**Note: The carer in this example is too far away from the person.**



Ensure the person bends forward when sitting down to avoid 'flopping back' in the chair.

You can move the chair closer if needed before guiding the person into the sitting position.

If the person you are caring for has insufficient upper body and leg strength to assist with this transfer, you will require a mechanical lifter or hoist.

## TOILET FRAMES AND AIDS

A toilet rail or over-toilet frame can be installed to assist with transfers on and off the toilet. There are different types of frames available. Two are pictured here.



Hygiene care after toileting can be completed in the standing position (supported by a handrail).



A mobile shower/commode chair can be used in the shower or over the toilet. A variety of models are available. Consult your health provider for advice regarding this equipment.

## TRANSFER TO BATH



### **To get into the bath**

To avoid having to step over the edge of the bathtub, sit the person down on the bath board first.

Bring their legs into the bath, one at a time.

The person may have to hold onto a rail on the wall or the rail attached to the board.

### **Do not allow the person to stand up in the bath.**

Side wall mounted taps, a hand held shower hose, and soap on a rope all eliminate the need for bending or reaching too far forward when in the bath.





**To get out of the bath**

Reverse the procedure for getting into the bath. Ask the person to bring their legs out first by pivoting on their bottom, then move legs out of the bath, one at a time. Do not allow the person to stand up in the bath.

You may need to assist by helping the person to lift their legs one at a time out of the bath.

**Most falls occur when a person is getting out of the bath.**



**If you are on your own**

To get into the bath, a person can use a bath board or bath seat independently. Seek advice from your health provider on this range of equipment.

A towel can be used to assist the person to lift their legs into the bath.

## BATHING SOMEONE USING A SLIDING BATH BOARD



A sliding bath board is another option for bathing.

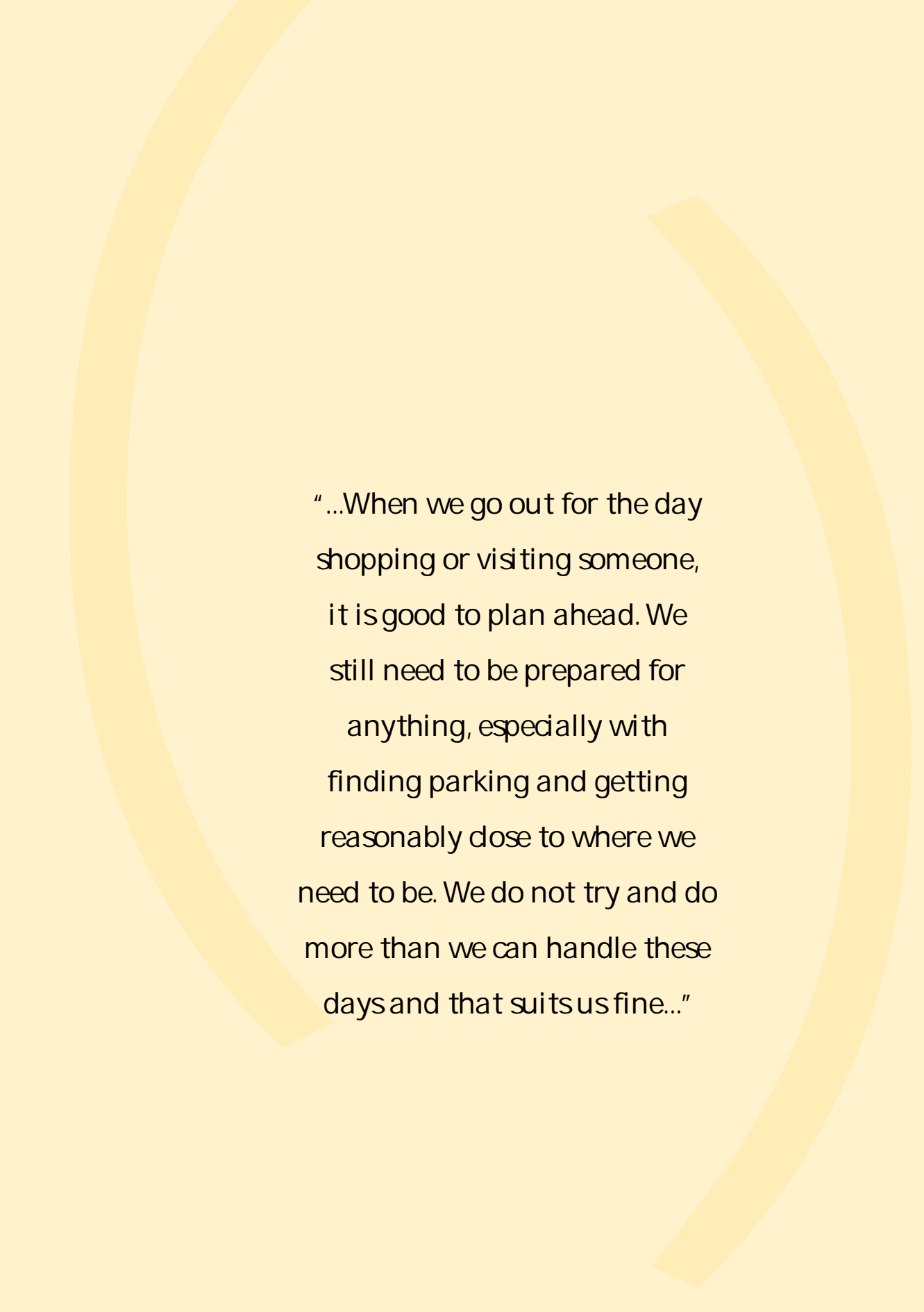
Sliding bath boards eliminate the need to turn when entering the bath.

HEIGHT ADJUSTABLE BLOCKS  
WITH NON-SLIP RUBBER SOLE



Use the frame to slide the person above the bath.

You may need to assist in lifting the person's legs over the side of the bath one at a time.



"...When we go out for the day shopping or visiting someone, it is good to plan ahead. We still need to be prepared for anything, especially with finding parking and getting reasonably close to where we need to be. We do not try and do more than we can handle these days and that suits us fine..."

# CAR TRANSFERS





# CAR TRANSFERS

## SAFETY TIPS

### Safety Tips

- Ensure the car door is locked into the full open position before the person gets in or out of the car.
- Do not use the car door as a support as car doors are prone to move.
- You may need to assist the person to move their legs one at a time, unless they have hip pain where it may be better to bring both legs together.
- Ensure both yourself and the person have supportive, low-heel shoes on.

## TRANSFERRING INTO A CAR



Before attempting to transfer, push the car seat back as far as possible to ensure maximum leg room.

Open the car door fully, wind down the window and have someone brace it to stop it swinging back onto the person.

Assist the person to standing from the wheelchair if one is used.

Position the person with the back of their legs against the car seat before they sit down. Protect the person's head as they sit down into the car.

### **'Nose over their toes'.**

The person can use the dash or car body for support if necessary. Pivot the person on their bottom, bringing their legs around into the car.

Having the backrest of the car seat slightly reclined may make it easier for a person with hip pain to pivot on their bottom.

You may need to assist with their legs, but only one at a time. Ensure your back is protected by maintaining good posture, bending your knees and stabilising your core abdominal muscles.



## TO GET OUT OF THE CAR



Reverse the procedure for getting into the car i.e. legs out first, then stand.

Care should be taken to protect the person's head.

Place a large plastic bag with a little talcum powder inside it on the seat to make it easier to slide the person's bottom around or across the seat.



Guide the person out of the vehicle by placing a hand on their lower back. This also allows you to protect their head if needed.

Have the person's walking aids or wheelchair in the ready position before they stand up.

A transfer sling (or transfer strap) may also be used.

# HELPING SOMEONE TO WALK

One person assistance

With a single stick

With a frame





# HELPING SOMEONE TO WALK

## SAFETY TIPS

### Safety Tips

- Clear pathways and walkways of any obstructions that may restrict walking (remove telephone cords, loose mats, electrical cords, garden hoses, bushes, etc).
- Take up any clothes that fall below the person's ankles, e.g. a dressing gown.
- Good lighting in houses and pathways is important.
- Never try to stop a fall—you could injure yourself attempting to prevent it rather than helping the person.
- Make sure that you check the stoppers on the bottom of walking sticks regularly. If they are worn replace immediately. A worn stopper can slip and cause a fall.
- Check the state of the flooring and regularly repair or replace cracked or lifting tiles or linoleum. Be aware of the need for the person to lift their toes higher when walking on thick carpet. Frayed and upturned mats and carpet edges are a hazard.
- Have an Occupational Therapist or HomeFront Assessor look at the general mobility around the house.
- The height of the walking aid must be correctly adjusted specifically for the person's use. Consult your health provider on fitting of walking aids.

## ONE PERSON ASSISTANCE



If the person requires assistance to walk, you may use the 'thumb and forearm' grasp to assist them. Depending on the person's ability, you may need to ask your health provider how best to walk with the person.

Stand on the person's stronger side and get them to push their hand and elbow down into your hands to provide support as they walk.

If falling is a risk then do not embark on a walk without the appropriate level of aid. Have your health provider review the client's mobility, check walking aids and instruct on the safest way to assist (i.e. is a wheelchair appropriate at times?).

## WITH A SINGLE STICK OR FOUR PRONGED WALKING STICK



The stick is held in the hand of the person's strongest side. For example, if the right leg is weak or painful, they should hold the stick in their left hand.

If supervision or additional support is needed, you can stand by the person's other side.

Check with your health provider for advice about what will best suit the person.

## WITH A FRAME OR A WHEELED WALKER



If the person has one side weaker than the other, stand on the weaker side.

Have one hand at the back of the person, holding onto either their trousers, waist or use a transfer sling (or transfer strap).

Use the other hand to steady the frame and assist with lifting it, if necessary.



If the person requires only minimal assistance, you can stand at their back, holding their hips to steady them if required, or use a transfer sling (or transfer strap).

# STAIRS

Up the stairs

Down the stairs





# STAIRS

## SAFETY TIPS

### Safety Tips

- The person's stronger leg should lead up the stairs and weaker leg lead down; 'the good leg goes to heaven and the bad leg goes to hell'.
- Ensure stairs are in good repair, well lit and have non-slip strips on edges.
- Have a hand rail installed along the length of the stairs.

## UP THE STAIRS



Stand behind the person when going up the stairs.

Always step up with the good leg first:

**'The good leg goes to heaven'.**

To increase safety, you can also hold the rail with one hand.



Always use a handrail where possible.

## DOWN THE STAIRS

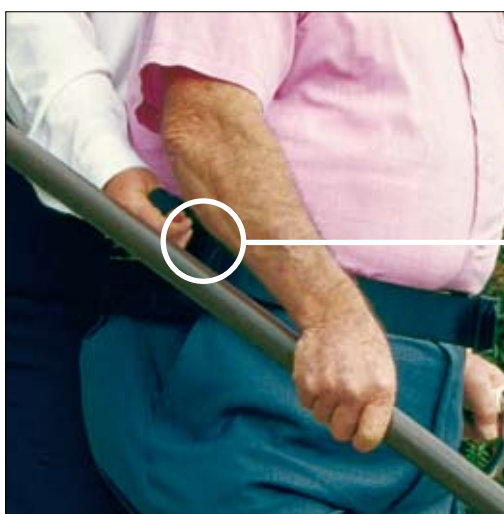


Stand in front, or at the side, of the person when going down the stairs and use a transfer sling (or transfer strap).

Always step down with the bad leg and stick (if used) first:  
**'The bad leg goes to hell'.**

To improve your safety, you can also hold the rail with one hand. Avoid descending the stairs at the same time as the person.

If the person requires a lot of assistance, you will need two people.



Use transfer sling (or transfer strap) whenever possible.

TRANSFER SLING  
(OR TRANSFER STRAP)

# SHOES—PUTTING ON AND TAKING OFF





# SHOES—PUTTING ON AND TAKING OFF

## SAFETY TIPS

### Safety Tips

- The use of a long handled shoe-horn is recommended to reduce stress on your back.
- Footwear should be well fitting and safe, i.e. have non-slip soles, broad heels and fit securely.
- Care should be taken when moving into the lowered position on a stool or in a squat to help with shoes. Risk of injury is great during this time.

## CARER'S POSITION



Squat down close to the person's feet or sit on a stool with the person's feet resting in your lap.

Shoes with Velcro tabs or elastic laces may be easier to put on and take off.



### **WARNING**

**Do not bend like this—it is bad for your back.**



**Sock and Stocking Gutter Aid**



**Long Handled Shoe-Horn**

There are several aids available for taking off and putting on socks and shoes. For further information consult your health provider.



**Boot Jack—shoe removing aid**

# USING A WHEELCHAIR

Pushing someone in a wheelchair

Pushing a wheelchair up and  
down a kerb





# USING A WHEELCHAIR

## SAFETY TIPS

### Safety Tips

- Always look for kerb ramps.
- Do not attempt to take a person up a kerb if it is higher than you can manage.
- Never attempt to lift a wheelchair by the arm rests.
- Know how to apply and release the brakes before you set off.
- Know how to fold and release the footplates before you set off.
- Ensure tyres are inflated and the wheelchair is serviced regularly.

## PUSHING SOMEONE IN A WHEELCHAIR



### Carer's posture

Maintain good back posture. Have your elbows slightly bent.

Avoid pushing a person up a steep slope if you suffer from regular back pain.



**WARNING**

**Do not push like this—it is bad for your back.**

## PUSHING A WHEELCHAIR UP AND DOWN A KERB



### To go up the kerb

Back into the edge of the kerb.

Place one foot on the tipping lever at the rear of the chair and tip the chair back on its wheels.

Pull the chair up the kerb.

**Caution:** avoid this task if you have back pain or any other discomfort. If the person is heavy, do not attempt this on your own.



### To go down the kerb

Roll the chair to the kerb.

Gently roll it down over the kerb, tipping the chair slightly backward if necessary.

# BED MOBILITY

Getting someone into a bed

Rolling someone over in bed

Sitting someone up over the bed edge





# BED MOBILITY

## SAFETY TIPS

### Safety Tips

- Encourage the person to assist where possible, e.g. to move their legs over the edge of the bed.
- Remember to bend your knees and maintain good posture when lifting the person's legs onto the bed.
- When a person gets up from lying down, it is recommended they move slowly to a sitting position and sit there for several minutes before standing. This allows their blood pressure and circulation to adjust, to help prevent falls and feeling faint.
- Use a slide sheet when manoeuvring a person on a bed.
- Look at the bed height and use a small step if the bed height is too high, or add blocks under each bed leg if it is too low. You can also cut bed legs down to achieve the correct height.

## GETTING SOMEONE INTO A BED



Ensure the person's bottom and back of legs are touching the bed before they sit.

More support can be provided by having your hands on the person's trunk or pelvis.



Ensure the person is positioned so that their head will be on the pillow when they lie down.

## ROLLING SOMEONE OVER IN BED



Ensure there is sufficient room to roll the person over. The person may have to move across the bed to make enough room. Where possible, stand on the side of the bed the person is being rolled to.

Bend the person's top leg.

Bring the person's top arm across their body.

Have the person look in the direction they are being rolled.

Roll the person by guiding their hip and shoulder over in the direction of the roll. The person can assist by pushing with their top bent leg.

**Important—do not roll the person by pulling their top arm.**



A slide sheet is another useful aid for moving a person in bed. This requires a different procedure.

For further information on how best to use a slide sheet, consult your health provider.

SITTING SOMEONE UP OVER THE EDGE OF THE BED



Roll the person onto their stronger side.  
 Bring both legs over the bed edge.  
 The person can push themselves up using their arms or you can assist them with one hand on their lower shoulder and the other hand on their uppermost hip to act as a pivot.  
**Important—do not pull the arm, just support it.**



This is a guiding and steadying hold which can be used to assist the person when they are resting while their blood pressure is adjusting to the different position and preparing to stand (refer to page 13 *Helping someone to stand up*).  
**Do not grip the person's arm too tightly**  
 Always use a transfer sling (or transfer strap) if assistance is required.



Use of bed sticks, bed rails, ladders and triangles can assist in rolling and moving on a bed. These aids are more useful for people with good upper body strength and ability to grip, and their costs are relatively low.

Please consult your health provider for advice on how to use these aids correctly.

In many cases, if not used correctly, the aid may be a hazard.



# HELPING SOMEONE UP OFF THE GROUND





# HELPING SOMEONE UP OFF THE GROUND

## SAFETY TIPS

### Safety Tips

- Remember to bend your knees and maintain good posture.
- When a person gets up from lying down, it is recommended they move slowly to a sitting position and sit there for several minutes before standing. This allows their blood pressure and circulation to adjust, and helps prevent falls and feeling faint.



If the person is injured, is too heavy or is unable to assist you at all, telephone for an ambulance, for assistance.

Ensure the person is warm and comfortable.

If there are no injuries and you feel you can manage, wait until the person feels able to move.

If the person has fallen in a restricted space (such as a toilet) and you believe there are no injuries, encourage the person to crawl or slide to a more open space before assisting them to stand.



Assist the person onto their hands and knees. The person may have to roll onto their stomach and then come up into the crawling position.



Get the person to crawl to a solid chair with arm rests or bring the chair to them.



Have the person place their hands on the arm rests or seat of the chair, while you steady the chair.

Assist the person into a half-kneeling position, with the strongest leg up first.

Help the person to a standing position by assisting at their hips.



The person may need to rest at this point.

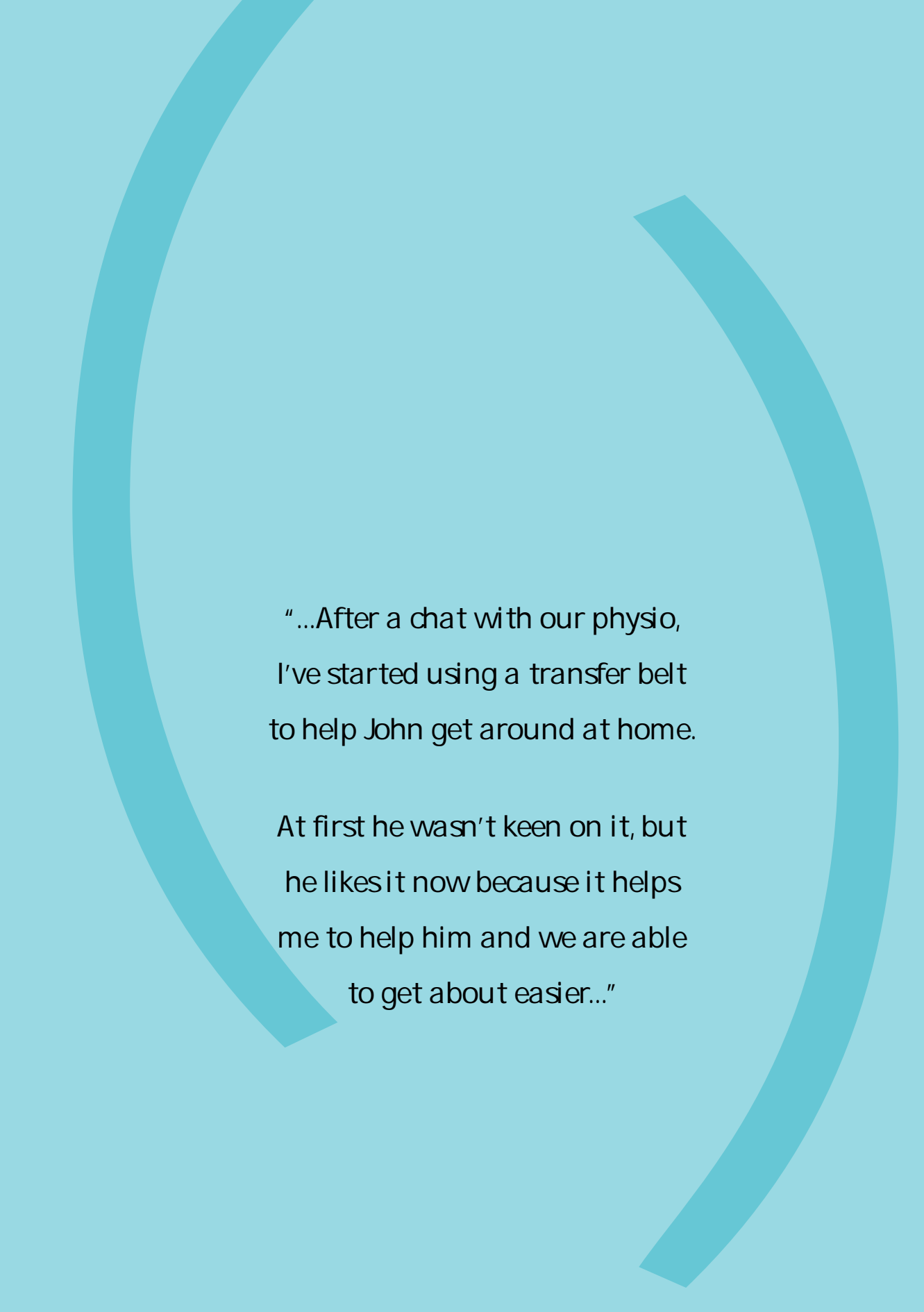
**Have a number of seats in their backyard at frequent intervals to allow the person to rest if needed.**



A personal alarm linked to emergency services is a useful and inexpensive safety device.

In case of an emergency, press the alarm and an ambulance will automatically be called.

Talk to your health provider for advice.



"...After a chat with our physio,  
I've started using a transfer belt  
to help John get around at home.

At first he wasn't keen on it, but  
he likes it now because it helps  
me to help him and we are able  
to get about easier..."

# EQUIPMENT AND APPROPRIATE MODIFICATIONS





# EQUIPMENT AND APPROPRIATE MODIFICATIONS

## SAFETY TIPS

### Safety Tips

- You can improve the ergonomics of a house simply by making sure there is appropriate seating that assists the person who has mobility difficulty. Things to consider are the height of the seat; e.g. is it easy for the person to stand from, or is it too low and requires extra effort?
- Ensure the chair is stable with good 'grippy' feet.
- Ensure the chair has comfortable arm rests for the person to push up from.
- Make sure that the person has sensible footwear with supportive, non-slip soles (not slippers).

*Provision of any of the equipment below is based on clinical need following assessment by a relevant health provider.*

## DRESSING AND REACHING AIDS

### 1. Long handled shoe-horn

This aid can be used by both you and the person to take off and put on shoes. Many types have a hook on the end of the handle that can be used to aid dressing. Four types are shown below.



### 2. Stocking and sock aid

This aid is used in helping the person put on socks or stockings by themselves.



### 3. Dressing aids

These grip style aids can be used for a variety of purposes when a person's movement is limited.



### 4. Quick release shoe lace tightener, drawstring waist and button-opener

These aids show the variety of smaller implements designed to make fine movements easier.



## MOVING AND HANDLING AIDS



### 1. Slide sheet

Slide sheets come in a variety of shapes and sizes.

Pictured here are a tubular sheet and a flat square sheet.



### 2. Transfer sling

A transfer sling (or transfer strap) is used in assisting the transfer of a person from a variety of positions. The sling will usually be attached to the person's waist and have a number of handles to use in assisting the transfer.



### 3. Height adjustor blocks

These adjustor blocks can be used for beds and chairs to adjust height according to the needs of the person. They are a simple and inexpensive modification in the home.

**Only use approved purpose-built height adjustor blocks.**



### 4. Lifting hoist

A lifting hoist is a hydraulic mechanism that carries the weight of a person in a sling. It can be used in a number of transfer scenarios, most commonly from a bed to a chair.



### 5. Standing lifter

A standing lifter can assist a person into, or out of, the standing position. They can be used to lift a person out of a chair, off a bed or into or out of a standing position. There are several types available.

## BEDDING AIDS



### 1. Bed stick and bed rails

These aids assist the person's ability to move in bed; they can also assist a person to sit up in bed and to stand up beside the bed.



### 2. Rope ladder

The rope ladder is used to assist the person's mobility in bed, particularly sitting up from a resting position.



### 3. Overhead triangle handle grip

The triangle handle grip, like the rope ladder, assists the person's mobility in bed. It can assist a person to move around in a bed by helping them use their upper body strength.



### 4. V-shaped pillow

These pillows are widely available and can provide support and comfort for a person wishing to sit up in bed.



### 5. Woollen re-positioning under-pad

This under-pad can assist two people to transfer a person from one part of the bed to another.



### 6. Variable pressure mattress

This specialised mattress reduces the risk of the person developing pressure sores.

## MOBILITY AIDS



### 1. Walking stick

A walking stick is used to assist balance when walking and going up and down stairs.



### 3. Hip protector

Hip protectors are an inexpensive aid that can reduce the risk of injury of fractures to the hip. For those people who have fallen or are concerned about falling, hip protectors can help provide confidence when walking. The area most fractured from a fall is the neck of the thigh bone (femur). A hip protector is designed to reduce the risk of fractures to this area.



### 2. Four legged walking stick

A walking stick with added stability for balance.



#### 4. Walking stick with seat rest

This is a single leg walking stick with a built-in fold-down seat, to allow the person to rest when they need to.



#### 5. Four legged walker

This walker provides added stability and arm rests for the person requiring more assistance than a walking stick.



### 6. Wheeled-walker

This lightweight walker provides stability for the person and includes a seat, brakes and carry rack.



### 7. Wheelchair

A wheelchair provides mobility for a person unable to walk. There are a large variety of wheelchairs including lightweight, attendant propelled, transit, one arm drive, amputee and electric models.

## IN THE BATHROOM



### **1. Bath boards**

A bath board is a relatively inexpensive aid used to assist the transfer of a person into the bath. They come in a variety of different materials, most commonly timber and plastic.



### **2. Bath seat**

A bath seat is placed on the floor of the bath to make it easier for the person to get into the bath, as they do not have to lower themselves in as far.



### 3. Grab rails

A person can hold onto the grab rails when moving in and out of the bath, the shower or when using the toilet.



### 4. Over-toilet rails

These rails provide excellent support when sitting on and standing up from the toilet. There are a variety of over-toilet rails available and some are fully portable and removable.



### 5. Non-slip flooring

This makes moving around the bathroom safer, especially when feet are wet.

**Note: It is recommended the person's feet are dried properly after showering or bathing.**



### 6. Sliding bath board

This can assist the person entering the bath by helping to slide them over the wall of the bath.



### 7. Shower chairs

These are used to support a person while showering, and are non-slip and fully waterproof.



# FURTHER INFORMATION AND SUPPORT



## Department of Veterans' Affairs (DVA)

DVA can:

- answer questions and provide information about DVA pensions and allowances, and about health care eligibility;
- provide up-to-date information about health and support services available through DVA and in the community to help maintain health and wellbeing;
- work with local service providers to ensure that veterans and war widows/widowers have access to appropriate services; and
- work with community agencies to develop programs to meet the needs of veterans and war widows/widowers and their dependants.

DVA has fact sheets available on over 300 topics of relevance to veterans and war widows/widowers, their dependants, families and carers. Visit [www.dva.gov.au](http://www.dva.gov.au)

To contact the Department of Veterans' Affairs phone

**133 254** (metropolitan) or **1800 555 254** (non-metropolitan).

### New South Wales

Tower B, Centennial Plaza  
280 Elizabeth Street  
SURRY HILLS NSW 2010

### South Australia

Blackburn House  
199 Grenfell Street  
ADELAIDE SA 5000

### Victoria

300 La Trobe Street  
MELBOURNE VIC 3000

### Tasmania

Montpelier Building  
21 Kirksway Place  
BATTERY POINT TAS 7004

### Queensland

259 Queen Street  
BRISBANE QLD 4000

### Northern Territory

Ground Floor  
Palmerston City Council  
Building  
2 Chung Wah Terrace  
PALMERSTON NT 0830

### Western Australia

AMP Building  
140 St Georges Terrace  
Cnr William Street  
PERTH WA 6000

## DVA INFORMATION AND SUPPORT

### ALLIED HEALTH SERVICES

A range of allied health services are available to entitled veterans and war widows/widowers under DVA health care arrangements. These include services from physiotherapists, chiropractors, osteopaths, podiatrists, speech pathologists, social workers, occupational therapists, psychologists, clinical counsellors and dietitians. Your clinical needs must be assessed for you to receive any of these services and you must obtain a referral from either your general practitioner, Local Medical Officer, medical specialist, treating doctor in a hospital, hospital discharge planner or provider of the same treatment type.

For more information about these services phone DVA on 133 254 (metropolitan) or 1800 555 254 (non-metropolitan).

### COMMUNITY NURSING

Community nursing services are available to eligible veterans and war widows/widowers to meet their assessed clinical and/or personal care needs. A referral is required from a general practitioner, Local Medical Officer, treating doctor in hospital, hospital discharge planner or a Veterans' Home Care assessment agency. Community nursing services are provided in the person's home by a DVA-contracted community nursing organisation. Community nursing helps restore or maintain the optimal level of health and independence at home, and helps to avoid premature or inappropriate admission to hospital or residential care.

DVA-contracted community nursing organisations use a mix of registered nurses, enrolled nurses and nursing support staff, according to their qualifications, experience and legislative requirements, in the delivery of nursing care. The community nursing organisation bills DVA directly for community nursing services provided to eligible veterans and war widows/widowers.

For more information about these services phone DVA on 133 254 (metropolitan) or 1800 555 254 (non-metropolitan).

### DENTAL SERVICES

A comprehensive range of dental services is provided to veterans, their widows/widowers and their eligible dependents from general dentists, dental specialists and dental prosthetists. Veterans may attend a dentist or dental prosthetists without a referral.

All Gold Card holders are eligible for dental treatment. White Card holders are eligible for dental treatment only for their accepted war-caused disabilities, or for dental treatment required as a result of malignant neoplasia.

An Annual Monetary Limit (AML) applies to certain high-cost dental items, including crowns and bridges, meaning DVA contributes a set dollar amount per calendar year towards the cost of these services. The limit does not apply to dental treatment for:

- war-caused injury or disease; or
- malignant neoplasia (cancer); or
- ex-prisoners of war.

For more information about dental services phone DVA on 133 254 (metropolitan) or 1800 555 254 (non-metropolitan).

## HOMEFRONT PROGRAM

HomeFront is a falls and accidents prevention program aimed at assisting veterans and war widows/widowers to continue living independently in their own homes. All DVA Gold and White Card holders are eligible for an annual free home assessment to identify hazards in and around the home. Following the assessment, some financial assistance will be provided towards recommended items or home modifications. Phone for a HomeFront falls prevention assessment on 1800 80 1945.

## OPTOMETRY SERVICES

Optometry services are available without referral through any optometrist who accepts the DVA card. Provision of glasses and other visual aids are also available through most optometrists. DVA will supply one of the following every two years:

- one pair of distance glasses and one pair of reading glasses; or
- one pair of multi-vision glasses.

Where there is a significant change in eyesight, or where glasses are damaged or lost, arrangements may be made to replace the glasses within the two year timeframe.

## VETERANS' HOME MAINTENANCE LINE

The Veterans' Home Maintenance Line (VHML) is a telephone advice and referral service to assist with property maintenance advice and referral to reliable, efficient tradespeople. This service is available to all veterans and war

widows/widowers, not just those with Gold and White Cards. Where possible VHML will link you with government subsidised services. Phone the VHML on 1800 60 1945.

## **REHABILITATION APPLIANCE PROGRAM**

The aim of DVA's Rehabilitation Appliances Program (RAP) is to restore or maintain an individual's independence and minimise the effect of disabilities. Providing aids for daily living, surgical appliances, and home modifications where clinically prescribed can assist people to remain living within their own home. Phone DVA on 133 254 (metropolitan) or 1800 555 254 (non-metropolitan).

## **VETERANS' HOME CARE**

The Veterans' Home Care (VHC) program provides a range of home care services for eligible veterans and war widows/widowers. A VHC assessment agency will assess the need for home care services and, based on that assessment, services such as domestic assistance, personal care, safety related home and garden maintenance and respite care may be provided. The VHC assessment agency may also provide referrals, with the person's consent, to other government programs and community agencies that are best placed to meet specific needs. An assessment for VHC services can be arranged by phoning 1300 550 450.

## **VVCS - VETERANS AND VETERANS FAMILIES COUNSELLING SERVICE**

VVCS provides free and confidential counselling and group program services for veterans and their families and promotes community awareness and understanding of the problems they face. Veterans of all conflicts and peacekeeping missions and their family members, including war widows, are eligible. VVCS centres are located in each State and Territory capital and several regional centres. After hours telephone crisis counselling is available through the Veterans' Line on 1800 011 046.

## OTHER INFORMATION AND SUPPORT

### AGED CARE ASSESSMENT TEAM (ACAT) OR (ACAS IN VICTORIA)

An Aged Care Assessment Team is made up of nurses, doctors, social workers and other health professionals who provide assistance to older people in determining their needs for home based support or residential care.

All people requiring residential care **must** be assessed by an ACAT before applying to an Australian government funded care facility.

You can contact your closest ACAT by phoning the number listed in the 'Age Page' of your telephone directory, or the Aged Care Information Line on 1800 500 853. Your doctor or hospital can also help you to contact an ACAT.

### ALZHEIMER'S AUSTRALIA

Alzheimer's Australia provides information, counselling and support for people with all forms of dementia and their families and carers. Alzheimer's Australia produces a large number of Help Sheets on a variety of dementia related topics. Help Sheets can be obtained by phoning the National Dementia Helpline on 1800 100 500 or by visiting Alzheimer's Australia at [www.alzheimers.org.au](http://www.alzheimers.org.au)

### ARTHRITIS FOUNDATION

The Arthritis Foundation operates in each State and Territory providing support and assistance for people with arthritis as well as their family and friends. Trained staff offer counselling, self management courses and support groups. The Foundation has a variety of resources for carers, including illness management courses and a range of excellent physical activity videos. Phone the Arthritis Foundation on 1800 011 041.

### CARERS AUSTRALIA

Carers Australia works in each State and Territory to bring the needs, views and concerns of carers to the attention of the community, including government, policy makers, health professionals and service providers. Carers Australia also provides carers with information and education resources. Carers can phone Carers Australia in their State or Territory on 1800 242 636 or visit [www.carersaustralia.com.au](http://www.carersaustralia.com.au)

### CARER RESPITE CENTRES

A Carer Respite Centre is an Australian Government funded agency that keeps

updated records of all available respite beds and coordinates access to respite services in your local area, including those funded by the Australian Government, State Governments, non-profit organisations, private agencies and the wider community. You can phone your local Carer Respite Centre on 1800 059 059.

## COMMONWEALTH CARELINK CENTRES

Commonwealth Carelink Centres around Australia provide information about the range of community care programs and services available to help people to stay in their homes. The Centres act as a single point of contact, providing reliable information and guidance about community care services and aged care homes available in the local area and how to contact them. Phone 1800 052 222 or visit [www.commcarelink.health.gov.au](http://www.commcarelink.health.gov.au)

## COMMONWEALTH CARER RESOURCE CENTRES

Commonwealth Carer Resource Centres are part of Carers Associations in each State and Territory and provide families and carers with information and referral to community services and government assistance available to support them in their caring role. You can phone your local Carer Resource Centre on 1800 242 636 or visit [www.carersaustralia.com.au](http://www.carersaustralia.com.au)

## CONTINENCE FOUNDATION OF AUSTRALIA

The Continence Foundation of Australia (CFA) provides practical advice and information for people with bowel/bladder problems and their carers. Phone the National Continence Helpline on 1800 330 066 or visit [www.contfound.org.au](http://www.contfound.org.au)

The National Public Toilet Map shows the location of more than 14,000 public and private toilet facilities across Australia. It can be used to help plan both short and long trips. Useful information is provided about each toilet, such as location, opening hours and accessibility for people with disabilities. You can visit [www.toiletmap.gov.au](http://www.toiletmap.gov.au)

## DEPARTMENT OF HEALTH AND AGEING

The Department of Health and Ageing has an Aged and Community Care Information Line. For more information on any aspect of aged care you can phone 1800 500 853 or visit the Department's website at [www.health.gov.au](http://www.health.gov.au)

## INDEPENDENT LIVING CENTRES

Independent Living Centres (ILC) are information resource centres in each State and the ACT that display a comprehensive range of products and equipment to assist with daily living activities. They are an advisory and display centre for equipment for

older people, people having difficulties with every day tasks or activities, people with disabilities, their carers, families, builders, architects and health professionals.

ILCs offer appointments with a health professional who will discuss your particular needs and advise on the most suitable products. Most centres have occupational therapists, registered nurses and physiotherapists.

Information is available about a number of products including:

- household and kitchen equipment;
- eating and drinking utensils;
- lounge, dining and office seating;
- back supports;
- office equipment;
- bathroom and toilet aids;
- wheelchairs - manual and powered;
- powered scooters;
- specialist mattresses and beds;
- walking aids;
- clothing and dressing aids;
- incontinence aids and advice;
- building fittings e.g. grab rails;
- lifting aids e.g. hoists;
- recreation and leisure;
- transport resources and equipment; and
- augmentative communication information.

You can phone the Independent Living Centre on 1300 885 886 or visit [www.ilcaustralia.org](http://www.ilcaustralia.org) to find the location of your nearest centre.

## OT AUSTRALIA

OT AUSTRALIA is the peak body representing occupational therapists in Australia. Occupational therapists assess the impact of disease and disabilities on people's ability to function and provide advice, assistance and recommendations to increase their safety and to maximise independence in their daily activities. They work in private practice, public hospitals, aged care facilities and community health centres throughout Australia. They can assist veterans and their carers by recommending appropriate equipment, training in self care and assessing modifications of home environments. Most state offices of OT AUSTRALIA maintain lists of occupational therapists specialising in aged care. For more information, please visit the OT AUSTRALIA website [www.ausot.com.au](http://www.ausot.com.au)

## BOOKS

These resources are available free of charge to the veteran community by phoning the Department of Veterans' Affairs on 133 254 (metropolitan) or 1800 555 254 (non-metropolitan).

### **CARER'S BOOKLET: ASSISTANCE FOR THE VETERAN COMMUNITY**

This booklet has been developed to assist carers. It provides information about specific services available through DVA, including respite care and community nursing, as well as general information about services available in the community.

### **CHOOSE HEALTH: BE ACTIVE**

This booklet shows simple ways to fit exercise into a daily routine and is designed to help the veteran community achieve sufficient physical activity for good health as they age. It includes information about finding suitable activities, getting started, overcoming setbacks and exercising with chronic health problems, together with a handy activity planner.

### **KEEPING YOU SAFE IN THE RIDER'S SEAT—A SAFETY INITIATIVE FOR THE VETERAN COMMUNITY**

This web-based publication provides valuable information about the purchasing, safety and maintenance issues relating to the purchase and use of motorised scooters. Available on-line **only** at [www.dva.gov.au/media/publicat/2003/scooter/index.htm](http://www.dva.gov.au/media/publicat/2003/scooter/index.htm)

### **LIVING WITH DEMENTIA—A GUIDE FOR VETERANS, THEIR FAMILIES AND CARERS**

This book provides practical information and support to assist people with dementia, and their families and carers in understanding the condition. It will assist in making well-informed decisions and maximise quality of life.

## OTHER RESOURCES

### CARER'S HANDBOOK

*The Carer's Handbook* is an easy reading, practical guide to caring for someone in a home setting. The book covers a range of topics including communication, emotions, adapting the home, mobility, bed comfort, care skills, emergency care, managing money, respite care and includes carers stories. The book costs around \$20 and is available by contacting the Carers Association on 1800 242 636.

The following videos and books are available from Arthritis Australia on 1800 011041 or Osteoporosis Australia on 1800 242 141

### EXERCISE BEATS ARTHRITIS SERIES—VALERIE SAYCE AND IAN FRASER

A specially designed system of nine gentle exercise routines to help decrease pain and stiffness, and increase muscles and ligament strength. Includes DVD, video and book.

### FALLS AND FRACTURES—BEATING THE ODDS

This falls prevention exercise video is a 30-minute strength training exercise video that will help build bone strength and improve balance, which are essential for preventing falls.

### TAI CHI VIDEO AND BOOK SERIES—DR PAUL LAM

Dr Paul Lam, a family physician for 25 years, is a world leader in the field of tai chi for health improvement. Dr Lam and his team of medical experts have created many tai chi for health programs, including arthritis, diabetes, back pain and osteoporosis.

### TAKING CHARGE OF ARTHRITIS—LARRY KATZENSTEIN

The 'take-charge' approach in this book can help you develop and maintain a positive, confident attitude that will enable you to manage your condition and get you out enjoying life.

### THE ARTHRITIS HELP BOOK—KATE LORIG AND JAMES FRIES

Topics include types of—arthritis, exercise, pain management, dealing with depression, medications and much more.

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The Australian Physiotherapy Association and OT Australia for reviewing this book.



# EVALUATING *BACK TO BASICS*

## YOUR FEEDBACK IS VALUABLE TO US!

Back to Basics aims to assist carers by illustrating a range of techniques to be used when moving and transferring people. This book endeavours to provide carers with a series of practical hints to be used during their daily caring role, while attempting to ensure the health and wellbeing of the carer is maintained.

In order to assess the usefulness and effectiveness of Back to Basics, we would appreciate it if you could please complete the following evaluation form.

The information you provide to us will be used to improve further editions of this book, and in the production of other resources, to further assist all carers in their important caring role and the wider veteran community.

After completing the evaluation form on the following page, simply cut along the dotted line, fold with the Department of Veterans' Affairs (DVA) return address clearly visible, seal with sticky tape and return to DVA. No stamp is required.

Your help is greatly appreciated.

# evaluating **Back to Basics**

## **CONTENT**

How useful did you find the information in this book?

- Very useful
- Fairly useful
- Useful
- No use at all

## **PRESENTATION**

What do you think about the layout of the information?

- Excellent
- Good
- Fair
- Poor

## **READING**

How easy is it to read the text?

- Very easy
- Easy
- Difficult
- Very difficult

## **IMPACT**

Did you learn anything from reading this book?

- Yes—lots
- Yes—quite a lot
- Only a little
- No—nothing at all

Are you a veteran or war widow/widower?

- Yes
- No

What is your age?

- Under 60
- 60-69
- 70-79
- 80-89
- 90 or over

**COMMENTS:**

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COMMENTS:

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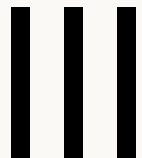
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if posted in Australia



Back to Basics  
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# Back to Basics

handy hints for carers  
to help prevent back injuries