

Teaching elderly patients to get on and off the floor Pathway

Procedure for teaching patient to get up from the floor based on reverse chain method

Owner:	Benjamin Thomas Physiotherapy and Orthotics Manager
Approved by	Therapies Clinical Governance Group
Approval Date	13 th June 2023
Review Date	13 th June 2026 This is the most current document and should be used until a revised version is in place

Key Amendments

Date	Amendments	Approved by:
25 th January 2023	Document extended to 30 th June 2023 whilst under review.	Dr J Trevelyan/ Benjamin Thomas
23 rd June 2023	Document extended for another 3 months whilst under review.	Benjamin Thomas
13 th June 2023	Document reviewed and approved for 3 years	Therapies Governance Group

The reverse chain method should only be attempted if clinically appropriate. A hoverjack or passive hoist should be easily accessible if the reverse chain method is not appropriate

Please refer to the Trust Policy – Inpatient Falls Prevention, Reduction and Management Policy for further guidance.

The aim of this method is to enable a person to move from the floor back into a chair or bed using a backward chain sequence. Demonstration of the technique with full explanation should be completed prior to commencing manoeuvre.

Method

Stage 1

- Assess ability to get up from floor
- Sit on edge of low bed, stools either side or chair in front, and pillow for knees. Feet should be on a mat.

Slide the outside 'weaker' knee onto the floor into half kneeling, hands on stools or chair, and then push up to starting position.

OR

Stand in front of the chair bring 'weaker' knee down onto pillow into half kneeling, and then stand up again.

Stage 2

- From half kneeling, bring other leg down to high kneeling, then back up to standing.

Stage 3

- From high kneeling, bring hands down onto ground, into prone kneeling, 'then into high kneeling'.

Stage 4

- From prone kneeling into side sitting, into prone kneeling.

Stage 5

- From side sitting, move down onto elbow into side lying, 'then into side sitting'.

Stage 6

- From side sitting, to side lying, to supine, to side lying, to side sitting, 'then up'.

Considerations

- Only when a patient can complete a manoeuvre confidently should the therapist continue onto next stage
- The manoeuvre can be stopped whenever it is clear that a person is unlikely to master a stage or is unwilling to persevere
- Pillows may be used to
 - Kneel down onto (stage 1)
 - Lower pelvis onto (stage 4)
 - Support head when supine (stage 6)
- Encourage patient to envisage the scenario at home – which chair, sofa would they crawl to? Ensure they have information on getting up from the floor for home use
- For those with a painful knee(s), reduced range of movement or an above knee amputation consider approaching a stair, step or box backwards, lifting bottom up on to raised surface by pushing up with arms.

Risks

- Changes in medical status of patient
- Change in patient cooperation / behaviour during procedure
- Tonal changes
- Total Hip Replacement and Total Knee Replacement – advice from orthopaedic physiotherapist to be sought if there are any concerns regarding patient's joint replacement when doing procedure.