

Promoting Healthy Postures when using Donation Chairs and Donation Couches

Module 4

Updated January 18

Equipment required:

Copy of the Donation Chair DVD for Part 1

TV/DVD player for Part 1

Power point + Projector (optional) or Presenter Pack/Resource Kit – order from H&S Admin at Filton or Manchester for Parts 1 & 2)

Donation Chair (for Part 1)

Have a couple of Base Frames Laid out for everyone to practice using the lever for practical

Have 3 or 4 or more donation chairs fully set up ready for everyone to split into groups to practice changing the seat position on the practical

Component Donation Couch (for Part 2)

If delegates are mobile team based only

- Part 1 needs to be completed

If delegates are donor centre based only

- Part 2 needs to be completed

If delegates work in both environments

- Parts 1 & 2 need to be completed
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Mobile Team

Part 1



Learning Outcomes

1. Adjusting the Seat Position Using Lever
 2. Chair Positions and Healthy Postures
 3. Effective Communication
 4. Emergency Evacuation
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Facilitator to go back and read through each learning outcome to ensure that it has been sufficiently covered.

Adjusting the lever on the chair

Up is open



Part way



Down is closed



Explain that when the lever is in the up position the lock is open. The lever opposite to the side you are working on needs to be in this open position to enable you to move the chair into the different positions.

If not a quarter turn release to fully open, revert back to the beginning.

When the lever is in the down position the chair is locked into place. To move the chair the lever needs to be moved out of this position to either open (up) or part way

The lever is taken out of the locked position, move the chair slightly and then let go of the lever to half way, take the chair to the required position. The pin will click into the next available hole. This may take a while to get used to but will get easier each time you use it.

If you need to take the donor into the fainted position you will need to ensure that the lever is in the unlocked position first or it will click into the R position & then require unlocking again to get back to the U position.

Demonstrate moving the lever – Have just a couple of Base Frames laid out and let everyone have a go at moving it up/ down and half way without the upper frame on so that they can see how it works.

Relevant General Principles

- **Know your limitations.** Ask for help.
- **Clear communication** with the donor
- Maintain a **neutral spine**
- **Stable, flexible base.** Feet shoulder width apart
- **Soft knees** and hips
- Face **direction of travel** (no twisting)
- Effort in **direction of force**
- Stay **close to load**

Display slide – Recap on all the points and check understanding. Physically demonstrate the points. Discuss any the group did not come up with.

Communication: Key Words and Phrases

On recline, encourage the donor to:

- Sit right back in the chair and put their head against the head rest
- Not to make any sudden movements during the process
- Keep hands on lap
- Look up to the ceiling
- Raise their legs if they are able to

Assistance from colleagues:

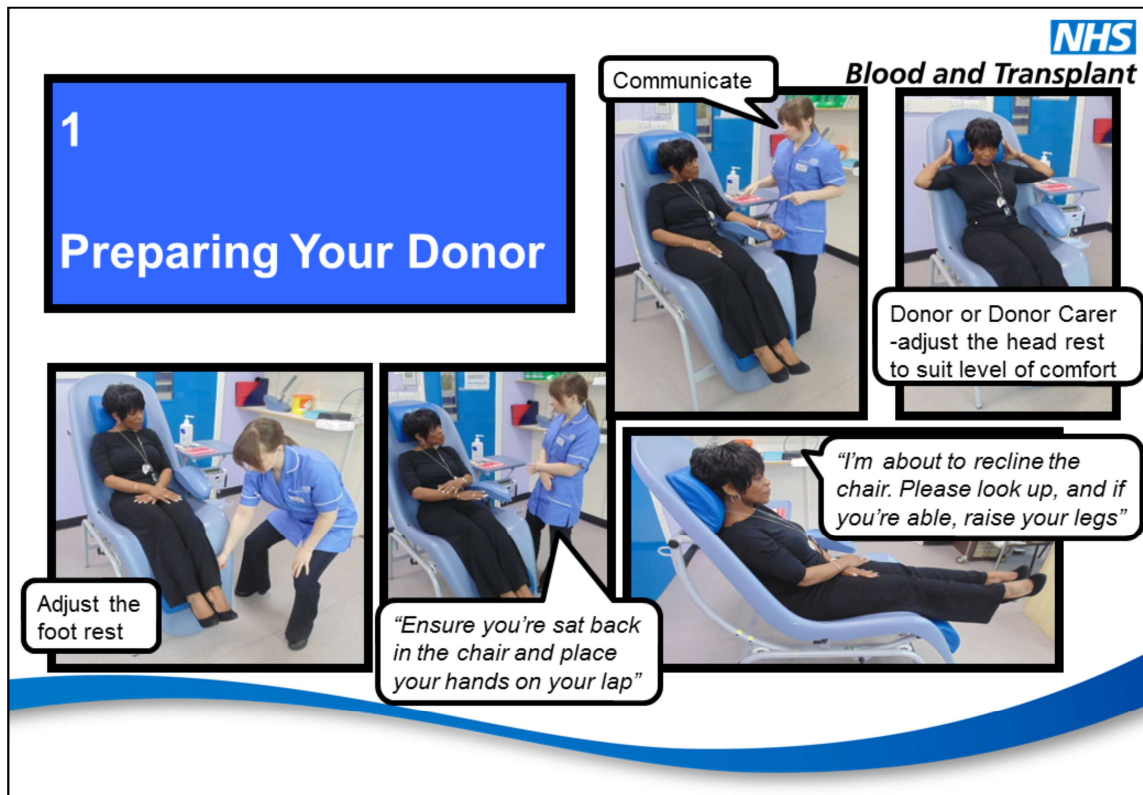
- Assessing when this is required - if the chair remains stationary once the lever has been released
- Agreeing with each other how you will communicate this

Communication is a key General Principle. In this case we need to communicate with the “Load” i.e. the donor. At the same time we must ensure at all times the highest levels of customer care of the donor. With the donation chair the donor is a healthy person who can assist us, especially with the Recline stage as they have not had a VP at this point. Their body weight and positioning in the chair is crucial to the way the chair will move so donor and DC need to work as a team whilst the chair is being moved.

To bring donor back up the donor needs to ensure that they don't make any sudden movements to “help” the DC and keep their hands on their laps.

Where you assess that the donor is going to be more tricky to move you need to subtly ask a colleague for assistance.

Ask participants to think of key phrases such as: “look up at the ceiling” to help with keeping head back or avoiding sudden movements. Post ideas onto flip chart.



Preparation

Communicate effectively with the donor

Ask them to ‘Adjust the head rest to suit them’

Use the same principles to the foot rest

Ensure the donor is sat right back in the chair and their hands are placed on lap

Instruct them “I’m about to recline the chair. Please look up and, if you’re able, raise your legs?”

Not to make any sudden movements during the process

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Reclining Your Donor

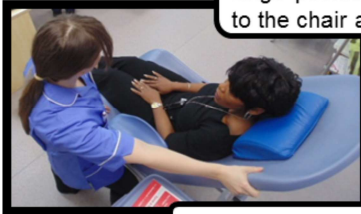


Ensure you are square onto the lever as you squat to release it



Where there's room, straighten the arm rest

Re-adjust your feet to a lunge position as close to the chair as possible



Strong hand hold



Don't over reach. Effort in the direction of force



Reclining the donor

Where there's room, straighten the arm rest inline with the seat

Ensure you are square on to the lever as you squat to release it

Strong hand hold

Readjust your feet to a lunge position as close to chair as possible

Don't over reach. Effort in the direction of force

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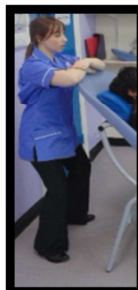
Reclining Your Donor

Suggestion: When working in pairs to recline the donation chair, this is a good manoeuvre for the assisting colleague.

Don't forget:
Communicate –
“ready, steady, move”



TOP TIP:
If the chair does not start to recline when the lever is released then discreetly ask for help from a colleague.



Reclining the donor – continued

TOP TIP:

If the chair does not start to recline when the lever is released then discreetly ask for help from a colleague

Assistance from Colleagues:

Assessing when this is required

Agreeing how you will communicate this

When working in pairs to recline the donation chair this manoeuvre is a good position for the assisting colleague

Don't forget to communicate “ready, steady, move”

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Sitting Up Your Donor

If the chair comes up rapidly, DON'T TRY AND STOP IT just keep the donor in the position they are in for longer and monitor them



Advise the donor that you are about to start sitting them up and ask that they keep lying back in the chair.
HOWEVER, if the chair does not start to move on it's own once the lever is released then request the donor tips their chin toward their chest



Adjust your base – from square onto lever to either side of the base frame front leg.

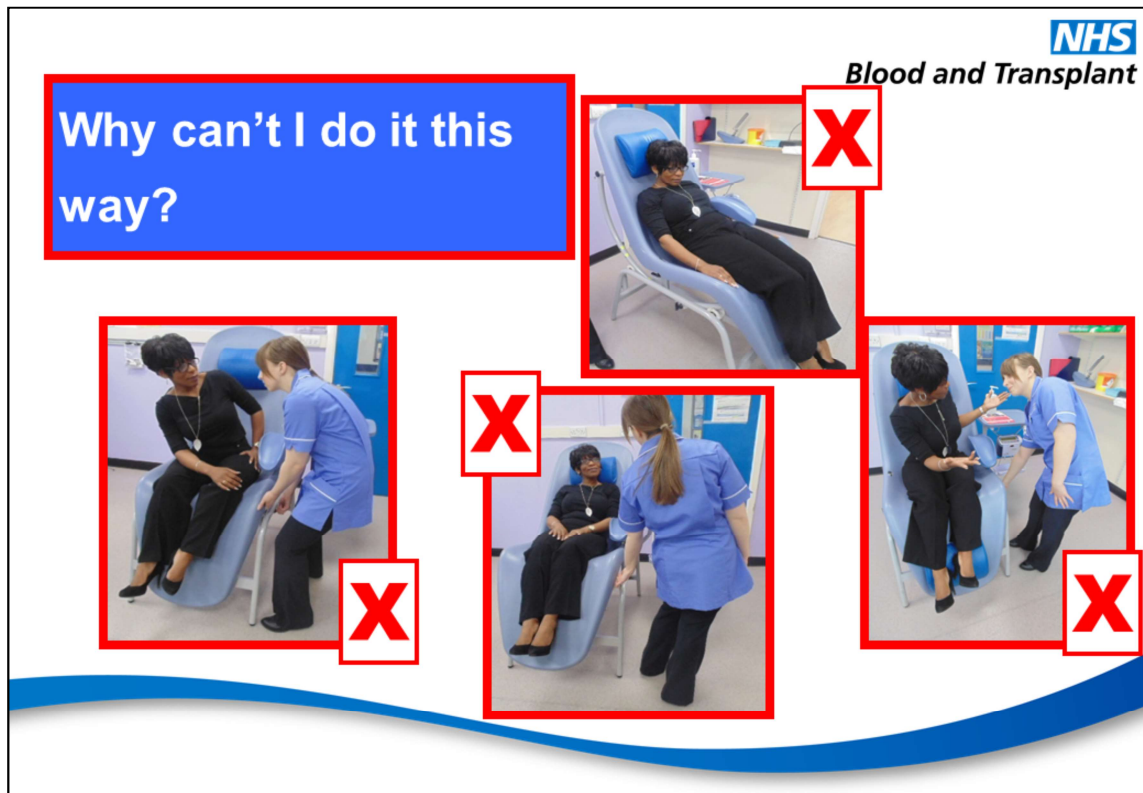
Sitting up the donor

Advise the donor that you are about to start sitting them up and ask they keep lying back

HOWEVER – if the chair does not start to move on it's own once you release the lever then request the donor tip their head forward slightly

If the chair comes up rapidly DON'T TRY AND STOP IT just keep the donor in the position they are in for longer before moving again

Adjust your base – from square to the lever to either of the front leg of the base frame



Case Study

The individual sustained a lower back injury as they moved a large donor back into the donate position on a donation chair. The individual was aware that assistance was required as they looked around for it. No one appeared free so they attempted the adjustment on their own even though they have a pre-existing upper back issue and various supportive controls put in place by management to promote their ongoing recovery and reduce the risk of further injury.

The investigation has ascertained there is a risk assessment and training in place and the chairs are being lubricated by team staff. The annual refresher training for the individual was just overdue and the risk assessment was also overdue for its review,.

Was this incident avoidable?

What could have been done differently?

What do you think caused the incident (immediate and root cause)

Immediate cause – was the adjustment of the chair by the individual on their own when it contained a large donor. Believing that “it won’t happen to me”

Root – was the poor choice made by the individual to do this activity on their own without assistance contrary to their training and management controls. This poor decision may have been influenced by the pressure they felt to keep the session flowing and the belief that they

could not wait for assistance.

Reclining the Donation Chair Sitting the Donor Back Up and Communication

Time to practice these techniques together, acting as donor / member of staff and between colleagues where assistance is required to ensure the health and wellbeing of all.

Split into small groups to practice communication with donor and colleagues.

Ask delegates to think of key phrases such as: “look up at the ceiling” to help with keeping head back or avoiding sudden movements. Post ideas onto flip chart.

Split into small groups to practice communication with donor and colleagues. Get people playing the part of the donor to raise their legs slightly if comfortable and see how this helps in reclining the chair and sitting the donors back up.

Emergency Evacuation



This is shown in detail in the DVD, so staff should already be able to visualise this. It is very unlikely that this will be required. Depending on how much time you have, either verbally run through what is needed (below) as a recap to the DVD or else, if you do have time, run through information below and then practice as per instructions below. If you do this, make sure you have something soft for the person acting as the donor to land on.

This is covered in **DAT2025**

Generally CPR would be carried out on chair in C. If the nurse felt need to get donor onto floor because of height or other factor then this is how you would do this. Or if you needed to evacuate a fainted donor in an emergency.

Explain use chair like a slide to get donor quickly to floor

Put chair into O position. Lock chair on both sides.

1 person at head end. Ensure head does not bang against anything on way down. Do not hold head. This person is likely to be the nurse and will be in control of the manoeuvre and will say "Ready Steady Move"

2 DCs in middle – directing donor down chair

1 DC at foot end ensuring feet taken outwards to avoid buckling underneath

1 person at the back of the chair to prevent it from moving backwards when donor is being taken from the chair and to pull the chair back when the donor is on the floor so that they can be laid flat.

Once donor on floor, pull chair back out of the way and gently lower donor to ground

Learning Outcomes

1. Adjusting the Seat Position Using Lever
 2. Chair Positions and Healthy Postures
 3. Effective Communication
 4. Emergency Evacuation?
- 

Facilitator to go back and read through each learning outcome to ensure that it has been sufficiently covered.

- If not continuing to the Donation Couches presentation – Part 2

Any Questions ?



Donor Centre

Part 2



Course Aims

Healthy Postures when using Component Donation Couches

Practical application to confirm your competency in performing the following techniques:

- Relevant General Principles
- Reclining Donors and Returning them Back to the Upright Position

Ensure Awareness of the impact of a poor posture on your health and wellbeing

Clear Communication. Working effectively with the Donor and your Colleagues - Key Words and Phrases to Use

Let them know that this will be an interactive session

Relevant General Principles

- **Know your limitations.** Ask for help.
- **Clear communication** with the donor
- Maintain a **neutral spine**
- **Stable, flexible base.** Feet shoulder width apart
- **Soft knees** and hips
- Face **direction of travel** (no twisting)
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Assistance from colleagues:

- Assessing when this is required - if the chair remains stationary once the lever has been released
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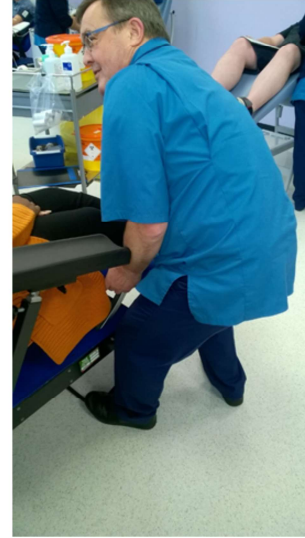
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Reclining the component donation couch



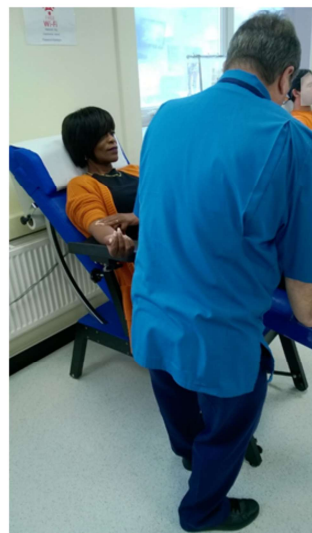
Ask the group...

What's good?

What could be improved?

Answers should include: hips/feet facing direction of travel, gravity assisted force in the direction of travel by shifting weight forward, neutral spine, strong hand hold, soft knees, stable/flexible base, close to load

Sitting the Donor back up



Ask the group...

What's good?

What could be improved?

Answers should include: hips/feet facing direction of travel, gravity assisted force in the direction of travel by bending knees, neutral spine, strong hand hold, soft knees, stable/flexible base, close to load

Reclining the Component Donation Couch Sitting the Donor back up and Communication

Time to practice these techniques together,
acting as donor / member of staff and
between colleagues where assistance is
required to ensure the health and wellbeing
of all.

Split into small groups to practice communication with donor and colleagues.

Ask delegates to think of key phrases such as: “look up at the ceiling” to help with keeping head back or avoiding sudden movements. Post ideas onto flip chart.

Split into small groups to practice communication with donor and colleagues. Get people playing the part of the donor to raise their legs slightly if comfortable and see how this helps in reclining the chair and sitting the donors back up.

Learning Outcomes

Making Healthy Postures an everyday “habit” when using Component Donation Couches

Practical application to confirm your competency in performing the following techniques:

- Relevant General Principles
- Reclining Donors and Returning them Back to the Upright Position

Ensure Awareness of the impact of a poor posture on your health and wellbeing

Clear Communication. Working effectively with the Donor and your Colleagues - Key Words and Phrases to Use

Facilitator to go back and read through each learning outcome to ensure that it has been sufficiently covered.

Any Questions ?

