**SMHF 2023 - SMHPS Module C Chair Activities Workshop**

Attendees to the SMHF 2023 Study day at Dunblane chose to attend the above workshop. This was not a focussed representative group chosen by SMHPS Review Group and does not necessarily represent what is going on across Scotland and the different sectors. It is a small snapshot.

**Purpose of workshop:** This practical workshop looked at how different organisations deliver their chair activities specifically in relation to SMHPS Module C learning outcomes and content. It also provided opportunities to share good practice and training methods and provided useful information to help inform the SMHPS review.

Information on time taken to complete initial training was completed by participants during the workshop. The information gathered from these and during the workshops is summarised below.

**Time Taken to Complete Initial Training**

**33 participants** responded to length of time spent on initial training, with no clear difference between different types of Organisations. Two respondents stated their whole course was theory only, with a test at the end. The majority of respondents run their courses with module A being online e-learning and 1 day to cover Modules B to F with 6 respondents covering Modules B-F over 2-days.

**Time Taken to complete Chair Activities**

There were **25 responses** ranging from 20 minutes to 3.5 hours with some areas including risk assessment into the module. One area (HSCP) integrated the chair module with the bed module. The average time taken for the Chair module to be delivered is 2.15 hours.

**Summary of feedback from practical groups**

**There were four practical groups looking at a couple of activities: 1. Sit to Stand from a chair; 2. Sit to Stand from a bed; 3. Stand to Sit on a chair; 4. Stand to Sit on a bed; 5. Forward in a Chair; 6. Back in a Chair; 7. Assisted Walking; 8. Instructions of the floor** Organisational training content was discussed & demonstrated by participants & key similarities & differences recorded.

**Sit to Stand from a chair**

**Key similarities in foundation training content:** Most considered basic initial position of ‘handler’, bringing the person forward in chair, stable base of ‘handler’ and person. The movement demonstrated and practiced was with the persons hands on arm of chair, leading movement with their head and push through their legs. Support by the ‘handler was with open palm holds and not twisting.

Individual risk assessment was also discussed with sitting balance, weight-bearing ability and cognition being relevant.

**Key differences or variations in foundation training:** Instructions on how the person stands with nose over toes, rocking, or stretch and relax identified as variations. There was also variation in the use of the armrests.

**Sit to Stand from a bed**

**Key similarities in foundation training content:** Most considered the height and position of the bed. Handler standing side-on to the person, facing the direction of the movement with a short hold on front and back and sitting on the bed to support the person if required.

**Key differences or variations in foundation training:** Facing backwards,standing close in at an angle to the person with main supporting hold anterior, across the persons front, was discussed as a variation taught by some organisations.

**Stand to Sit on a chair**

**Key similarities in foundation training content:** Mostconsidered that the person would have the back of their knee close/touching the chair, encourage/communicate for person to have their bottom over chair/bend over, care giver encourages patient to guide them down by initiating movement, clear communication.

The ‘handler’ would have a dynamic stance, use verbal prompts and indirect holds, lower their height, moving in the direction of travel.

Discussion of bad practice eg drag lift.

**Key differences or variations in foundation training:** Transfer of ‘handler’ weight during the activity with a step back or weight transfer was identified as a variation. There was also some variation in ‘handlers’ position either facing backwards or front facing, with hand placements varied dependent on direction of ‘handler’

**Stand to Sit on a bed**

**Key similarities in foundation training content:** Groups discussed that they would use same principles as sitting on a chair i.e. person close to bed, dynamic stance, indirect holds, ‘handler’ guides down, lowers height, with the addition of adjusting the bed height when required.

**Key differences or variations in foundation training:** Some would demonstrate and practice with the ‘handler’ sitting on the bed with the person, some didn’t. As with stand to sit on a chair, some would demonstrate the ‘handler’ facing backwards.

**Forward and back in a chair**

**Key similarities in foundation training content:** It was identified that the content covered for coming forward in a chair was the same as moving back. Normal movement is discussed, indirect holds used with placement of holds common across groups of one hand on shoulder and one behind the person. Encouraging weight transference of the person and assisting to slide their leg forwards. Process also used for assisting forward on a bed.

Considerations/instructions for the person would be to establish what they can do to help, lean forward to come off the back of the chair, shuffle forward, use chair arms.

Assisting with one person would be with instruction to the person, with two people to assist one would assist with weight transfer and other would assist to slide leg forward. Repeat on both sides.

**Key differences or variations in foundation training:** the variations identified by groups was with the ‘handlers’ personal movement principles: wide base or close stance; Spine in line or move spine; weight transfer of ‘handlers’ or no weight transfer; hold stays in position or hold tends to move on the person. If difficulty coming forward in chair some would stop activity and review with physio, some may use a handling belt or sling.

Back in the chair some may use a one way glide sheet

**Assisted Walking**

**Key similarities in foundation training content:** Being close to the person using indirect holds and communication by the lead person were all identified as similar across groups. Also the importance of a clear environment.

**Key differences or variations in foundation training:** There was much variation in holds, for some a shoulder hold and hip hold was taught for others supporting the forearm close to persons body; supporting the forearm away from the body; holding at both hips; ribcage support; elbow support. Also, the close position of the ‘handler’ varied with some supporting from behind and some locking in at the persons hip and rocking / walking with the person.

**Instructing off the Floor**

**Key similarities in foundation training content:** Covered in foundation training as a group discussion activity. Reading the care plan to check intervention required, demonstrating to groups, talk through the process and practice. Person roll and rise on to hands and knees, one foot up into open kneeling position and sit on to chair.

**Key differences or variations in foundation training:** Some demonstrated with one chair some with two. Some carers have process to call emergency team.