

# **Bed Pole/Stick Work Instruction**

## 1 Purpose

Mobility aims to ensure the safe and appropriate use of mobility aid and equipment such as bed poles/sticks, which may be employed to assist clients in repositioning themselves, maintaining stability while changing positions, or facilitating the ease of bed transfers. Usage of bed pole/stick may be considered a restrictive practice. To support the use of a bed pole/stick, an Occupational Therapist (OT) risk assessment should be in place with proper client education around the usage of the bed pole/stick.

#### 2 Work Instructions

## Positioning a Bed Stick | | | | |

- Stand at the pillow end of the bed and raise the top end of the mattress, sliding the base end of the stick underneath.
- Place the bed stick between the client's shoulder and hip (while lying on the bed), approximately 600mm down from the bed head.
- Ensure the bed stick allows the client to comfortably sit beside it and lie down, reaching the pillow easily.
- The bed stick's arm should extend up the side of the bed, accessible for support as the client turns and moves.
- Confirm the bed pole sits securely against the mattress with no gaps. Avoid tying or fixing it to the bed frame unless equipped with a built-in clamp or fixation device.

#### How to Use a Bed Stick

- Stand the client with their back of legs against the bed
- The bed stick is positioned between client and the pillow
- Guide client to sit well back on the bed, beside the stick. Grasp the stick with your closest hand.
- While client grips the stick, instruct client to swing their legs up onto the bed and their upper body and head towards the pillow.
- If required, demonstrate how to use the bed stick to reposition themselves in bed.
- To get out of bed, instruct the client to grasp the stick and pull to sit up, swinging their legs off the side of the bed.
- Emphasize the importance of maintaining a grip on the stick until they are standing securely beside the bed.

### **Precautions:**

- A Bed Stick is:
  - NOT to be used on any bed with power options
  - NOT to be used to prevent falls from the bed
  - NOT to be used as a form of restrictive practice
  - NOT to be used for any other purpose than that prescribed by health professional.

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- You must notify mobility office immediately if you noted client functional ability (physical, thinking and/or behaviour) changes resulting in near miss/falls from the bed.
- The bed stick or pole needs to be checked for compatibility with the client's current bed
  and their functional level during the assessment. If client condition changes or they
  change beds in the future, mobility office must be notified as we may need to consider
  having their needs re-assessed by health professional such as an Occupational
  Therapist.
- Please make sure that you follow the shift checklist every shift.

### **Cleaning and Maintenance**

- Wipe over regularly with a soft damp cloth. Dry thoroughly
- Check the end caps are in place and not damaged
- Check that there is no cracked paint or rust on the metal tubing
- Report any damage.

### Moving and Dignity of Risk:

- Emphasize the balance between a client's Dignity of Choice and mobility's obligation through open discussions. This should be discussed between client, carer and the occupational therapist during the assessment.
- This work instruction is intended to promote safe and effective use of bed poles. If you have any questions or need clarification, please contact mobility office.



## **Shift checklist**

It is important to check the position of the bed pole every shift to ensure safety. If you answer yes to any of these questions, please follow the instructions on what to do.

Things to check	If the answer is yes, what should I do?	
Is the bed pole new to the client and not	Please notify mobility office immediately as it	
documented in client's care plan?	is not safe to use bed pole without assessed	
	and instructed by a health care professional.	
Has the bed pole moved?	Re-position the bed pole so that it is firmly	
	under the mattress. Contact mobility office if	
	the bed pole is moving or causing difficulties.	
Has the mattress moved?	Re-position the mattress onto the base.	
	Ensure there is no gap between the mattress	
	and bed pole. Contact mobility office if the	
Is there a gap between the bed pole and the	bed pole is moving or causing difficulties.  Re-position the bed pole to reduce the gap	
mattress?	between the mattress and bed pole. Contact	
matticos:	mobility office if the bed pole is moving or	
	causing difficulties.	
Has the medical or physical condition of the	Please notify mobility office immediately as it	
person using the bed pole changed? For	is no longer safe to use. Client will have to be	
example, drowsiness, confusion, reduced	reviewed by health care professional for	
strength or in their arms, legs or body –	further advice.	
reduced ability to call for assistance or move		
away from a dangerous position?		
Is there any change to the type of mattress	Please notify mobility office immediately as it	
(e.g. to an air mattress)?	is no longer safe to use. Client will have to be	
	reviewed by health care professional for further advice.	
Is a different bed height being used (e.g. a	Please notify mobility office immediately if the	
hospital bed that can be raised and lowered)?	bed is below hip-height of the person. Client	
Thospital bed that earl be raised and lowered):	will require health care professional review	
	for further advice.	
Is the bed in a different position (e.g. does	Do not put the bed pole under the head or	
the bed have a reclining backrest that has	reclining area of the bed. Re-position the bed	
been moved)?	pole so it is beneath the flat section of the	
	bed.	
Is there any item hanging on the bed pole?	Remind the client not to hang anything on the	
	bed pole and gain consent to remove the	
	items hanging on the bed pole.	



## **3 Document History**

Reviewed by: Head of Care

Authorised by: CEO Date Adopted: 23/11/23 Next Review Due: 23/11/25

#### **Version Control**

Version	Date	Change
1	23/11/2023	New

### **Administration of this Policy**

The policy will be reviewed every three years.

# **Related Policies and procedures**

mobility Code of conduct
Restrictive Practice Procedure – Aged Care
Restrictive Practice Work Instruction – Aged Care

## Applicable standards, legislation, or other requirements

Aged Care Act 1997 Aged Care Quality Standards (ACQS) Work Health and Safety Act 2011 National Registration and Accreditation Scheme (NRAS)

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i Occupational Therapy Australia. (2015) Position Statement: Provision of Bed Stick and Poles.

<sup>• &</sup>quot;Occupational Therapy Australia. (2015). Practical guide for safe and effective use: Bed sticks and rails for community, acute and residential care use.

iii Occupational Therapy Australia. (2015). Fact Sheet: Bed sticks and rails.