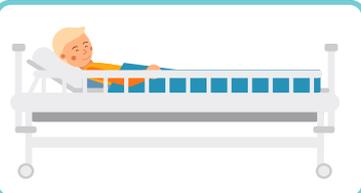


# Guide for care home staff on the use of bed grab handles



This guide is designed to support care home staff to implement best practice in the use of bed grab handles rails. This guide accompanies the "What you need to know about bed grab handles" poster resource which should be displayed within the care home as a quick reference guide for care home staff. Both resources have been produced by NHS GGC in collaboration with care home staff in response to latest MHRA guidance and NPSA. For full details of the MHRA guidance scan the following QR code.

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## About Bed Grab handles

### What are bed grab handles?

Bed grab handles (also known as bed sticks or bed levers) are used to support residents to get in and out of bed. There are many reasons why residents may struggle to get in and out of bed independently. Bed grab handles can be an excellent way of allowing residents to regain/maintain some independence as well as reducing the need for staff to require to give physical assistance. However it is essential that these are used appropriately and in line with the manufacturers/prescribers guidance.



### When is it appropriate to use bed grab handles?

- Bed grab handles are designed to support transfers in and out of bed
- To support independent and assisted bed mobility e.g. rolling or lying to sit
- To increase safety during sit to stand transfer from bed – reducing risk of falls



### It is important to ensure bed grab handles are:-

- Only fitted to the type/ style of bed approved by the manufacturer. There are different types of bed grab handles for different styles/ types of bed.
- Fitted securely – held in place by mattress or secured with straps
- Positioned appropriately to allow resident to use the handle
- Handle should be snug to the mattress to reduce risk of injury



## When should they not be used?

- To prevent residents from rolling or falling out of bed – if your resident is at risk of this then consideration should be given for suitability of bed safety rails.
- Should not be used to pull on when transferring back to bed from a commode, wheelchair or from a seated position as this can lead to the bed grab handle moving or the resident over reaching during transfer.
- Third party rails are not suitable for use with a mattress elevator, pillow lifter or profiling bed
- Should not be used on an ultra - low bed



## Risk Assessment

An assessment should be completed within 24 hours of admission to the care home.

When assessing the appropriateness of the use of bed grab handles, staff should consider the risks and benefits for individual residents. This should be documented in care home notes. An information leaflet is available to facilitate discussion with residents and their families.

### Things to consider when assessing the use of bed grab handles:

Resident safety may be compromised if bed grab handles are used improperly. As such, careful consideration must be given as to the need for their use in addition to the any other possible interventions available to assist bed mobility/transfers. Possible hazards include:

1. **Entrapment risk** – There is a risk of entrapment in a number of ways and in a number of places resulting in injury or death. Entrapment of a residents head, neck, body or limb can occur between gaps in the grab handle itself or between the grab handle and the mattress. Risk of entrapment or failure of the bed grab handle is further increased if the bed grab handle is fitted incorrectly. To prevent this there are a number of minimal measurements that are required to be in place to reduce unsafe gaps from causing an entrapment. Please see below which illustrates these gaps.
2. **BMI - body size/shape** – if the resident is under 1.46m/4'11", less than 40KG or has a BMI of less than 17 they will be at increased risk of entrapment. Most bed grab handles have gaps that are larger than those recommended for use in adults with atypical anatomy. Therefore, they will only be used after the assessor has weighed up the risks and benefits of provision.
3. **Dementia/delirium** – if the resident is showing signs of stress or distress or is unable to retain information then they may not be able to fully understand the use of the bed grab handle. They may be more likely to display risk taking behaviour e.g. trying to climb over the rail. The use of the rail may also add to their distress and agitation.
4. **Involuntary movements** – this may lead to the resident injuring themselves or potentially entrapping a limb.
5. **Is it in good working order?** – Ensuring the bed grab handle is in good condition is essential as wear and tear can lead to the grab handle failing or moving position when in use.
6. **Is it positioned properly?** – Incorrect fitting of a bed grab handle can lead to an increased risk of entrapment or suffocation. Please see the following advice around correct fitting of bed grab handles.

## Risk Assessment (continued)

To ensure there are no unsafe gaps, check these 3 measurements

- **GAP between grab handle and the headboard/wall** - This gap must be AT LEAST 318mm (or less than 60mm) to avoid entrapment and to provide a good hand hold without obstructing transfers in and out of the bed. For adults with atypical anatomy this should be at least 300mm (or less than 60mm).
- **Horizontal GAP between mattress edge and grab handle** - Gap must be NO MORE THAN 120mm to avoid head and neck entrapment.
- **Internal gaps within the bed grab handle** - Compliant: the smallest measurement of any of the internal gaps (in either a vertical OR horizontal direction) is NO MORE THAN 120mm to avoid head and neck entrapment. For adults with atypical anatomy these gaps should be less than 60mm.
- **NON-compliant:** If gaps are larger than 120mm in both a vertical AND horizontal direction as this could cause a head or neck entrapment. – the vertical gap should be measured from compressed mattress height



7. **Is it the right rail for the bed frame?** – Some bed grab handles are designed for use on specific types of bed. If a resident has an ottoman bed with under bed storage that is accessed by lifting the bed up then these are generally not suitable for bed grab handle use. If the under bed storage consists of drawers then there may be some circumstances where the use of a bed grab handle may impede the access to the storage drawers e.g. if handle turned down on partners side of a double bed. Using on the wrong type of bed frame can lead to issues with instability and movement during use and increase the risk of injury and entrapment. For example if the bed frame is slatted then some bed grab handles cannot be used. Also where an electronic profiling bed is in place must be suitable to be attached to the bed in accordance with the manufacturer's instructions. In addition, there is an increased risk of entrapment/entanglement between the grab handle and moving parts of the bed. Body parts must be clearly distanced from the grab handle during movement of the bed. A specific type of rail called a community bed rail should be used. Most bed grab handles are suitable for use on solid based/divan style bed frames. If you are not sure if a bed grab handle is appropriate for a resident's bed please contact your local authority Occupational Therapy service or the resident's occupational therapist if they have one for further advice?

