Safe Student Lifting and Transfers in the School Setting: A Decision-Making Guide

School-based physical therapists’ (PTs’) required involvement in students’ daily school activities enables students with disabilities to participate in educational activities and access programs and campus facilities. PT’s knowledge in ergonomics, biomechanics, safe physical management, lifting, positioning, transfers, and transfer training is essential in school practice, especially for students with physical, multiple and/or complex disabilities. This guide was created as a reference for physical therapists in school systems. Relevant information was obtained from two government agencies: National Institute of Occupational Safety and Health (NIOSH) and Occupational Safety and Health Administration (OSHA). This guide is not intended to replace state or local educational policies governing lifting procedures. Please contact your administrator regarding any additional state or local policies or procedures that govern your practice.

NIOSH Recommendations

NIOSH recommends that the average worker lift no more than 51 pounds. This is based on ideal conditions of lifting a stable box from ground to waist height. When lifting or transferring people, however, NIOSH recommends a 35 pound limit due to multiple unpredictable variables (i.e. cooperation, ability to participate and understand directions, and muscle tone).

Assessment/Considerations when Creating a Lifting/Transfer Plan:

- Environment (available space for transfer/lifts, equipment, how equipment interfaces with other equipment, storage)
- Staff (number available, individual capabilities)
- Budget (availability of mechanical lifts)
- Student characteristics (ability to participate, seizures, muscle tone, height/weight, behavior/cooperation, precautions, involuntary movements, voluntary movements)
- Training (annually and as needed, documentation of training)

Decision-Making Algorithms: Please find below four commonly encountered lift/transfer situations in school-based practice with algorithms to assist in safe decision-making.
Figure 1: Repositioning Student on Changing Table: Rolling or Scooting

- **Can student assist?**
  - **Yes**
    - Student fully able to assist; may use positioning aid (e.g. grab bar). Staff assistance not needed.
  - **No**
    - Use friction reducing device such as a sheet and 2 or more staff if student weighs > 35 lbs.

Figure 2: Transfers To/From a Changing Table

- **Can student bear weight?**
  - **Yes, fully**
    - Staff assistance not needed. Stand by for safety as needed.
  - **Yes, partially**
    - Student is cooperative: if changing table can be adjusted to a low level, use a stand assist transfer. If not, use mechanical lift and/or 2 staff if student weighs > 35 lbs.
  - **No**
    - Student is not consistently cooperative: use mechanical lift and/or 2 or more staff if student weighs > 35 lbs.
Figure 3: Transfers from Chair to Chair or Chair to Toilet

- Can student bear weight?
  - Yes, fully: Staff assistance not needed. Stand by for safety as needed.
  - Yes, partially: Student is cooperative: Use stand/pivot technique using a transfer belt and 1 staff.
  - No: Student is cooperative but does not have UE strength to assist: Use a mechanical lift and/or 2 staff if student weighs >35 lbs.
    - Student is cooperative and has UE strength to assist: Use a seated transfer aid and transfer belt as needed for safety.
    - Student is not consistently cooperative: Use a mechanical lift and/or 2 staff if student weighs >35 lbs.

- Student is not consistently cooperative: Use a mechanical lift and/or 2 staff if student weighs >35 lbs.
**Figure 4: Transfers from Floor to Chair and Chair to Floor**

**Tips to Build a “Safe Lifting and Transferring” Process in your Local Education Agency (LEA):**

- Obtain school and/or LEA administrative and legal review of any lift/transfer guidelines and/or resources prior to dissemination to school staff.
- Integrate lift/transfer process into the student’s IEP/504 plan (i.e. student present levels of performance, IEP goals, supplementary aids and services, care plans, and/or assistive technology).
- Partner with administration for support for implementation and to ensure adequate resources.
- Perform environmental assessments (i.e. classroom, bathroom, physical education, community sites).
- Prioritize high risk classes/cases (i.e. children with multiple disabilities or behaviors).
- Consider district budget/budget cycle for ordering of transfer equipment such as mechanical lifts.
- Provide targeted school-staff training in safe lifting/transfers.
- Document staff participation in trainings for compliance and risk management purposes.
- Partner with transfer/lift vendors and schedule trials of their equipment with school staff.
- Become involved early in planning for new buildings and remodeling of current buildings.

**REFERENCES**

5. Maryland State Steering Committee for Occupational and Physical Therapy School-Based Programs in collaboration with the Maryland State Department of Education, Division of Special Education/Early Intervention Services. (Revised 2014) Occupational and physical therapy early intervention and school-based services in Maryland: A guide to practice. Appendix D: Lifting and transferring students/children in a school or other school setting. Baltimore, Maryland.

OTHER RESOURCES


Developed by a volunteer workgroup of the APTA’s Academy of Pediatric Physical Therapy’s School-Based Special Interest Group (chaired by Laurie Ray, PT, PhD). Special thanks to this workgroup which included: Karen Greeley, PT, DScPT; Lori Bartleson, PT, DPT; and Ronnee Greenstein, PT, MS, DPT.

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