POSITIONING & MOVING



G.F. Strong Rehab Centre





OBJECTIVES OF SESSION:

- To understand how positioning and moving can affect your health.
- To better understand your options for posture and seating positions.
- To discuss the most optimal ways of repositioning



Position and Moving: Why is it Important?

- …Because positioning can affect so many areas of your health
 - Skin
 - Range of Motion
 - Appearance
 - Function
 - Pain
 - Socializing
 - Overall Health



WHERE DOES POSITIONING and Moving HAPPEN?

1. In BED

- 2. In your **CHAIR**
- 3. During **ACTIVITIES**
- 4. For your ARMS / HANDS
- 5. For your **FEET**



1. Bed Positioning

You spend a lot of time in bed during each 24 hour period.

Positioning in bed is just as important as positioning in your wheelchair

- For skin health
- For maintaining range
- To function (i.e. eating)

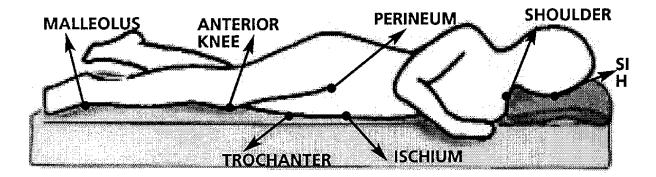
BALANCE IS KEY!

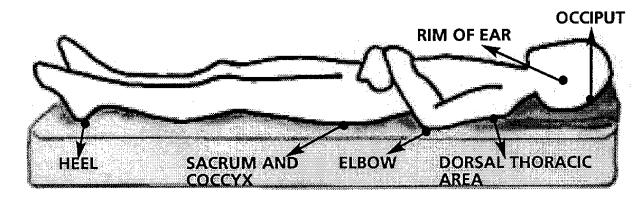


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Areas of Highest Risk for Skin Breakdown when Lying in Bed

Figure 1: Pressure Points







1. Bed Positioning

- Head of the bed low as possible
- Knee gatch putting the foot of the bed up before the head
- Heels and ankles prop up calves on pillows



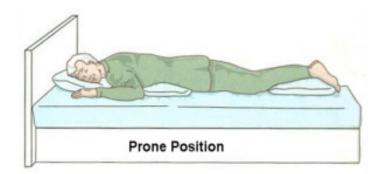
1. Bed Positioning

Semi-side lying position –



Semisupine position is a variation of supine..

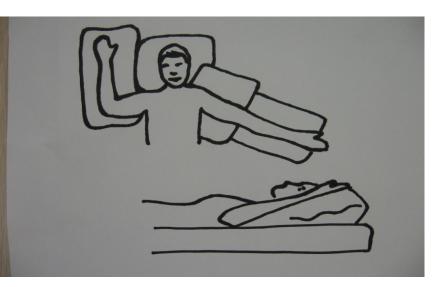
Lying on your front -





1. Bed Positioning (For Shoulders)







2. Chair Positioning

Positioning and moving in your wheelchair is important

- For skin health
- For range
- To function (i.e. using your arms in activities, breathing, wheeling)

Your body will likely change over time – Keep track of what is going on with your body.

Involve a therapist for a seating review as soon as you notice a problem developing.



Ideal Manual Wheelchair Set-Up

- Back vertical
- Seat pan slightly angled upwards (seat dump)
- Proper seat depth, only the length of thigh supported
- Thighs parallel to seat angle
- Hand should reach the axle

- Axle should be slightly ahead of shoulder.
- Balance point should be so you do not have "work to maintain sitting" in your wheelchair





Power Wheelchair Set-Up

- Trunk upright and centered
- Armrests with elbows at right angles
- Thighs supported
- Hips and knees at right angles
- Feet supported on
 Foot pedals



Don't ALWAYS Blame The Gremlins when Your Headrest Moves!!

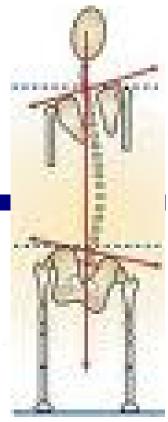
2. Chair Positioning

What are some signs that you are not sitting well in your chair?

- New **pain** after being up in your chair for a while.
- New <u>difficulty doing things</u> that were easier yesterday.
- Fatigue.
- Difficulty breathing.
- Your <u>chair seems to have changed</u> the way it is setup overnight?
- Something doesn't <u>look</u> quite right when you look in the mirror.
- Something doesn't **feel** quite right (i.e. leaning).

2. Chair Positioning

- Check to see if your pelvis is level
 - Feel hips
 - Look at shoulders
 - Look at creases in body
 - Check to see if your pelvis is rotated
 - Feel hips
 - Look at knees
 - Look at shoulders
- Ears over shoulders over hips





3. Positioning and Moving for Hands and Arms

Splinting:

- To decrease the time spent in a non-desirable position.
- To encourage tissues to lengthen or shorten to help improve function.
- Night time use may be enough, or when tone and contractures are a concern, day and nighttime use may be required.



3. Positioning and Moving for Hands and Arms

Arm/hand program:

- Range of motion
- Positioning
- Exercises
- Daily Activities
 - Don't always make it too easy (but do if it is a repetitive activity)
 - Find activities which are meaningful and motivating
 - Balance your activities

USE IT OR LOSE IT!



4. **Positioning of Feet**

In bed In wheelchair



CARE CONSIDERATIONS

- You are the teacher!
- Working with your care providers is a team effort.
- Use written materials or a helper to demonstrate.
- Be patient!



Case example

 It has been over a year since you were discharged from GF Strong and you are noticing that you are constantly sliding forward in your chair throughout the day.
 What should you consider doing?



Case example

 You are noticing that you are unable to reach for objects as well as you used to – even passively, your elbow does not extend out straight.

What should you consider doing, regarding your positioning and movement?