

NHS Training for
Physiotherapy Support Workers

Workbook 10
Taking a patient onto the stairs



Contents

Workbook 10 Taking a patient onto the stairs	1
10.1 Aim	3
10.2 Learning outcomes	3
10.3 Risk assessment and stair practice	6
10.4 Minimising risk	8
10.5 Taking the patient onto the stairs	9
10.6 Taking a patient on the stairs workbook completion	13
10.7 Taking a patient on the stairs reflection	14

Workbook 10

Taking a patient onto the stairs

10.1 Aim

The aim of this workbook is to provide the Healthcare Support Worker (HCSW) with the knowledge, understanding and skills to safely teach a patient how to go up and down stairs.

10.2 Learning outcomes

By the end of this workbook you will be able to:

- Identify the risks involved when taking patients up and down stairs and describe how to minimise them.
- Describe and demonstrate the correct procedure for safely teaching a patient to go up and down stairs with and without the use of a walking aid.
- Demonstrate that you can appropriately inform the therapist of any change in condition that requires reassessment by a therapist.



Activity

Therapists often take patients up and down stairs as part of their treatment in hospital.

Can you think of reasons why they might do this?

Therapists might wish to take patients onto the stairs for any of these reasons:

- to assess if the patient can manage independently
- to re-educate the patient to climb or descend the stairs
- to teach the patient to use a new walking aid
- to assess the patient's exercise tolerance
- to improve the patient's confidence on stairs
- to prepare the patient for home



Activity

Find out and describe the various reasons for taking patients up and down stairs on your unit.



Evidence

Describe an individual patient you have taken on the stairs with a therapist.

Indicate the reasons for taking the patient on the stairs.

10.3 Risk assessment and stair practice



Evidence

What factors might you need to consider in assessing the risk of taking a patient onto the stairs?

What factors might you consider in assessing the risk of taking a patient on the stairs?

You should consider:

- The general condition of the patient, and whether he can understand what you want him to do.
- Any previous medical condition, such as heart disease or obstructive airway disease that may make it difficult for the patient to climb stairs.
- Whether there is enough help available. You must never take a patient on stairs alone.
- Is the patient suitable dressed with appropriate footwear?
- The patient may climb the stairs without difficulty, but may struggle or be afraid to come down – is there somewhere for him to rest at the top of the stairs?

Case study

Mr Brown has been in hospital for the last three weeks because of a urinary tract infection and shortness of breath. He has become quite unsteady when walking, has osteoarthritis of the left knee and has been given a walking stick whilst in hospital.

He lives alone and his bedroom is up a flight of 12 steps. The plan is for him to go home at the end of the week.

The physiotherapist decides that he must be assessed on the stairs to ensure that he can manage before going home.



Activity

You have been asked to assist the therapist in assessing Mr Brown on the stairs.

What do you think might be the risks?

- Mr Brown is unsteady walking. Therefore he is likely to find stairs difficult.
- He also has a new walking aid and may have problems co-ordinating it on the stairs.
- He may develop pain in his osteoarthritic knee when on stairs.
- He was admitted with shortness of breath. This may become a greater problem with the exertion of climbing stairs.
- He needs to be able to climb stairs by himself, therefore at some point before discharge he must do this without physical help.

10.4 Minimising risk

The steps that could be taken to minimise risk in Mr Brown's situation are:

- Ensure that the patient is safe and confident walking with his normal aid before taking him on the stairs – patients who are unsteady walking will not be safe on the stairs. He may need more rehabilitation before he is ready for stair assessment.
- Ensure that there is adequate assistance – a minimum of two people should be available to take the patient on the stairs.
- A plan should be agreed in case more help is required. If the patient gets into difficulty, he can be sat on the steps whilst one person runs to the ward to get help.
- Ensure that his pain control is adequate.
- Mr Brown should be taken to the stairs in a chair so that he is not too breathless or tired before attempting the flight.
- The patient must have his walking aid with him, since he may struggle to climb stairs without it.
- Start on a short set of stairs, like those in the therapy gym – that way if the patient has difficulty or becomes short of breath, it will be easier to enable him to sit down.
- Progress gradually to a full flight of stairs, and ensure that there is a chair at the top to enable the patient to rest before descending.



Evidence

Describe one of your patients who has been taken for stair assessment or practice.

What risks did you identify?

What steps did you take to minimise the risks?

10.5 Taking the patient onto the stairs

You should never take a patient onto the stairs by yourself. The therapist will usually assess the patient, and will require assistance to do so. If you are practising with the patient thereafter, you must always have another therapist or assistant with you.

Many patients have pain or weakness of one leg. To climb stairs it is important therefore that they both protect that limb, but also that they are safe.

There is an old physiotherapist's rule that informs you how to teach patients to climb up or down stairs:

'Up to heaven and down to hell'

This means that the patient should be instructed to

- **step up with the stronger or less painful leg**, and to
- **step down with the weaker or more painful leg.**

Your supervising therapist will demonstrate how to ensure safety for stair practice and how to co-ordinate walking aids when assisting a patient to climb stairs.

You must be able to teach descent of stairs with:

- no aid
- one walking stick
- two walking sticks
- crutches
- handling belt
- non weight-bearing
- partial weight-bearing

You will be taught how to position yourself for maximum safety of the patient and what instructions to provide.



Activity

Mr Brown is ready to attempt to climb the stairs and you are there to assist.

What should you say to Mr Brown before asking him to climb the stairs?

- You should explain in detail what you are asking Mr Brown to do, and seek his consent.
- Mr Brown should be instructed to go as close to the bottom step as possible, using his walking stick.
- He should be told to hold the stick in one hand and the banister in the other, depending on which side his banister is at home.
- He should be told to step up with his right, better leg onto the first step, placing as much of his foot on the stair as possible, followed by the other foot and the walking aid.
- For coming down he should come as close to the edge as possible, lowers his left, poorer leg and stick to the step below. He can then step down with his better leg.
- This may be demonstrated by the therapist or assistant until it is clear that the patient understands the process.

You will be expected to:

- ensure that patient is positioned close to the step
- ensure that patient places injured leg correctly, leading with correct leg
- ensure that patient places walking aid correctly
- ensure that patient uses banister correctly
- correct the patient as required, and provide him with encouragement

Describe how you assisted a therapist to take appropriate patients up and down stairs.

What went well?

What could have been better?

Anything you would do differently next time?

If two support workers are taking patients on the stairs, you must inform the therapist of any change in condition that requires assessment by a therapist.



Evidence

From your work, provide an example of having recognised the need for therapy reassessment whilst taking a patient up and down stairs.

What indicated to you the need for reassessment?

What action did you take?

What did you record in the therapy records?

Acknowledgements

NHS Tayside

10.6 Taking a patient on the stairs workbook completion

Your supervising physiotherapist will sign your portfolio to indicate that you have completed this workbook successfully.

Objective	Physiotherapist's signature	Date
Explain the reasons why patients need to undertake stair practice		
Identify the risks of taking a patient on the stairs and suggest strategies to reduce these		
Demonstrate how to assist a patient to ascend and descend stairs with appropriate walking aids		
Describe and carry out the procedure to safely take patients up and down stairs		

Support worker (name)
Support worker's signature
Physiotherapist (name)
Physiotherapist's signature
Date

10.7 Taking a patient on the stairs reflection

Suggested KSF Dimensions: C2, HWB2, HBW7

This form should be placed in the appropriate section of your portfolio.

What did you learn from this module?

How has this influenced your work?

Date module completed

