

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 09/07/2022

FORM APPROVED

OMB NO. 0938-039

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER 155400		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING		X3) DATE SURVEY COMPLETED 08/04/2022	
NAME OF PROVIDER OR SUPPLIER CARDINAL CARE STRATEGIES				STREET ADDRESS, CITY, STATE, ZIP COD 4600 E JACKSON ST MUNCIE, IN 47303			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIE (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)			ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		(X5) COMPLETION DATE
F 0000 Bldg. 00	<p>This visit was for the Investigation of Complaint IN00387005.</p> <p>Complaint IN00387005 - Substantiated. Federal/state deficiencies related to the allegations are cited at F689.</p> <p>Survey dates: August 4, 2022</p> <p>Facility number: 000269 Provider number: 155400 AIM number: 100267720</p> <p>Census Bed Type: SNF/NF: 37 Total: 37</p> <p>Census Payor Type: Medicare: 4 Medicaid: 32 Other: 1 Total: 37</p> <p>This deficiency reflects State Findings cited in accordance with 410 IAC 16.2-3.1.</p> <p>Quality review completed on August 11, 2022.</p>			F 0000			
F 0689 SS=D Bldg. 00	<p>483.25(d)(1)(2) Free of Accident Hazards/Supervision/Devices §483.25(d) Accidents. The facility must ensure that - §483.25(d)(1) The resident environment remains as free of accident hazards as is possible; and</p>						

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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	<p>§483.25(d)(2) Each resident receives adequate supervision and assistance devices to prevent accidents.</p> <p>Based on observation, interview and record review the facility failed to ensure staff operated the mechanical lift in accordance with facility policy (Resident E) and followed facility policy for use of gait belts for resident transfers (Resident B) for 2 of 4 residents reviewed for safe transfers.</p> <p>Findings include:</p> <p>1. The clinical record for Resident B was reviewed on 8/4/2022 at 8:54 a.m. Diagnoses included, but were not limited to, muscle weakness, paranoid schizophrenia, morbid obesity, lumbar spinal bifida, and chronic obstructive pulmonary disease.</p> <p>The most recent quarterly Minimum Data Set (MDS) assessment, dated 7/19/2022, was reviewed on 8/4/2022 at 8:54 a.m. The resident required extensive assistance of 2 persons for bed mobility and toilet use. The resident required total assistance of two persons for transfers.</p> <p>During an interview 8/4/2022 at 9:30 a.m., CNA 1 indicated during a two person transfer Resident B's left knee bent and she was lowered to the wheelchair. "We picked her up and turned sideways." The CNA indicated she and NA 2 were able to keep the resident upright and the resident did not fall.</p> <p>During an interview on 8/4/2022 at 10:11 a.m., NA 2 indicated she and CNA 1 transferred Resident B from the bed to the wheelchair. The mechanical lift was unavailable and was not used for the transfer. NA 2 indicated they did not use gait belts for the transfer. NA 2 indicated staff were</p>			F 0689	<p>Plan of Correction:</p> <p>The filing of the plan of correction does not constitute an admission that the alleged deficiency did in fact exist. This plan of correction is filed as evidence of the facility's desire to comply) with the requirements and continue to provide quality care.</p> <p>The facility requests paper review for compliance.</p> <p>What the facility did for the resident identified:</p> <p>Resident B was sent to the ER and returned with orders to wear an immobilizer. The resident's care plan and Kardex was updated to reflect the need for a Mechanical Lift transfer while wearing the immobilizer. The use of the Mechanical lift for transfers will be reassessed at least quarterly and for significant change.</p> <p>How the facility identified others:</p> <p>The facility IDT completed an audit of all residents to determine the need for mechanical lift/Gait Belts. Any residents identified requiring mechanical lift for transfer/Gait Belt, the resident care plans were updated and communicated to nursing staff via resident Kardex. Therapy screens were completed on those residents identified b', the IDT for need for Mechanical Lift/Gait Belts.</p>		08/26/2022

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	<p>supposed to use gait belts for resident transfers and ambulation.</p> <p>During an interview on 8/4/2022 at 10:49 a.m., QMA (Qualified Medication Aide) 3 indicated Resident B should have been transferred using a mechanical lift. "I have always transferred her with a hooyer. That is what I have been told in report since I started working here." She indicated Resident B was a total assist of 2 persons for transfers. She indicated she has never had a problem with mechanical lift availability.</p> <p>During an interview on 8/4/2022 at 11:29 a.m., COTA 4 indicated Resident B had been discharged from therapy in July 2022 due to non-progression. At the time of discharge the resident required the assistance of 2 persons for transfers.</p> <p>Review of a facility investigation dated 8/1/2022, indicated Resident reported a fall and complained of left knee pain. The facility obtained an in house x-ray that was non-conclusive. The facility contacted the physician with the x-ray results and received an order to send the resident to the hospital for evaluation and treatment on 8/2/2022. The resident returned to the facility with a diagnosis of a fractured left patella.</p> <p>2. The clinical Record for Resident E was reviewed on 8/4/2022 at 9:47 a.m. Diagnoses included, but were not limited to, diabetes type 2, anxiety, depression and hypertension.</p> <p>The most recent quarterly Minimum Data Set (MDS) assessment, dated 5/9/2022, was on 8/4/2022 at 9:47 a.m. The resident required extensive assistance of two persons for bed</p>				<p>System:</p> <p>An Inservice was provided for the nursing staff regarding safe transfers utilizing a mechanical lift and use of gait belt.</p> <p>Therapy screens will be completed on all residents quarterly and for significant change.</p> <p>Therapy will communicate to the IDT any recommendations or instructions as a result of the quarterly screens or during therapy treatment.</p> <p>Care plans and Kardex will be updated as needed as per the [DT to reflect, the recommendations for transfers utilizing a Gait Belt or Mechanical lift.</p> <p>Care plans will continue to be reviewed at least quarterly and for significant change by the for additional transfer interventions.</p> <p>How the facility will monitor:</p> <p>Facility will complete proficiency observations of nursing staff</p> <ul style="list-style-type: none"> utilizing the Mechanical Lift/Gait Belts for transfers at random times on residents identified for the need of Mechanical Lift/Gait Belts. Any issues identified as a result of the proficiencies; the identified employee will be reinserviced. At least two proficiency observations will be performed 5 days a week on random staff and residents who require a Gait Belt Mechanical Lift for transfers as determined by the care plan. These proficiencies will be coordinated and monitored by the Director of Nursing)designee. 		

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	<p>mobility and transfers.</p> <p>During an observation on 8/4/2022 at 9:20 a.m., CNA 1 and NA 2 were observed transferring Resident E using a mechanical lift from the bed to the wheelchair. The staff members did not expand the legs for stabilization of the lift while lifting the resident from the bed. The staff members indicated they would expand the legs of the lift once they had the resident positioned over the wheelchair.</p> <p>Review of a skilled check list provided by the DON on 8/4/2022 at 1:33 p.m., indicated the mechanical lift legs were to be placed in the widest position and the breaks set before placing the resident in the sling.</p> <p>No further information was provided prior to exit.</p> <p>This Federal tag relates to Complaint IN00387005.</p> <p>3.1-45(a)(2)</p>				<p>The proficiencies will be reviewed in the QAPI meeting monthly for 6 months. Completed 8/24/22</p> <p>Resident</p> <p>Care Level</p> <p>Primary Payer ed</p> <p>Status Confirmed</p> <p>102</p> <p>-D</p> <p>Empty</p> <p>102 -w Empty</p> <p>103 -D Kellams, Karen</p> <p>(23) LTC Medicaid</p> <p>Occupied</p> <p>103 -w Phillips, Robin</p> <p>W7) Medicaid Occupied</p> <p>104 -D Bogdan, Steven</p> <p>(53) Medicaid Occupied</p> <p>104 -w Empty</p> <p>105 -D Allen, Jill (26)</p> <p>LTC Medicaid Occupied</p> <p>105 -w</p> <p>106 -D Empty</p> <p>106 -w Warden, David</p> <p>(12) LTC Medicaid</p> <p>Occupied</p> <p>107 -D</p> <p>107 -w Thorpe, Scott (24)</p> <p>LTC Medicaid Occupied 108</p> <p>-D Wright, Lori (68) LTC</p> <p>Medicaid Occupied</p> <p>Unit: HALL A, HALL B. HALL E</p> <p>Floor: 1 Date: 8/12/21 J22</p> <p>108</p> <p>w Dishman, Roberta (50)</p> <p>I-TC Medicaid Occupied</p>		

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			<p>Erdle,</p> <p>Jack</p> <p>(2)</p> <p>LTC</p> <p>Medicaid</p> <p>Occupied</p> <p>109 -w Hall, Frederick é4)</p> <p>LTC Medicaid Occupied</p> <p>Empty</p> <p>110 -w Empty</p> <p>Hupp,</p> <p>Ronda (62)</p> <p>I-TC</p> <p>Medicaid</p> <p>Occupied</p> <p>III-W</p> <p>AMSDEN, DOROTHY</p> <p>(94) UNKOO</p> <p>Medicare</p> <p>A</p> <p>Occupied</p> <p>Empty</p> <p>112 -w</p> <p>Hold-Paid</p> <p>Unit Totals</p> <p>Occupied</p> <p>13</p> <p>Empty</p> <p>10</p> <p>1</p> <p>Unpa.d</p> <p>Mason, Nila (6)</p> <p>*13-w Hovis,</p> <p>Mildred (36)</p> <p>114 -D Wise.</p> <p>June (18)</p>		

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			LTC LTC LTC LTC LTC LTC Medicaid Medicaid Medicaid Medicaid Medicaid Hospice Medicaid Medicaid Medicaid Empty Occupied Occupied Empty Occupied Occupied Empty Empty Empty Occupied Empty Occupied Occupied Occupied Unit Totals Occupied 14 301 -D Empty 301 -w Empty 302 -D Empty 302 - w Frank,		

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			<p>Harry (? ITC Medicaid Occupied 303 -D Empty 303 - w BANTER, DAVID (82) LTC Medicaid Occupied 304 - D Empty 304 - w Hold-Unpaid 305 -D Moerbe, Tamborah (60) LTC Medicaid Occupied 305 - w Empty 306 -D MILLS, ELAINE (81) STD Private Pay Occupied 306 -w</p> <p>Empty</p> <p>Occupied</p> <p>10 Empty 11 Hold I Facility Totals Unit: HALL A, HALL B, HALL E Floor: Date: 812312022</p> <p>Room-Bed Resident Care Level Primary Payer Bed Status Confirmed Unit - HALL E</p>		

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			307 -D 307 - w 308 -D 308 -w 309 -D 309 - w 310- 0 310 -w 31 4 -w Yadon, Richard ,67) Buchanan. Christopher (87) Toy. William (49) Weber, Robed (95) Sterling• . (55) Thomas. Patricia (90) LTC ITC LTC LTC LTC Medicaid Medicaid Medicaid Medicaid Medicaid Medicaid Occupied Empty Occupied Occupied Occupied Occupied Empty Occupied Empty Unit Totals		

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			<p>Occupied</p> <p>37</p> <p>Empty 27 Hold 2</p> <p>Unpad</p> <p>Actual Physical Head Count</p> <p>Physical Count Date Certified by</p> <p>for Resident with Occupied status.</p> <p>INSERVICE ATTENDANCE</p> <p>TOPIC</p> <p>DATE -AR-</p> <p>SPEAKER/TITLE TIME STARTED TIME, ENDED Atawh handou,s If provided and pre/ post test or other assessment of learning prou ided.</p>		

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			<p>FORM 0003</p> <p>I .52</p> <p>INSERVICE</p> <p>ATTENDANCE</p> <p>TOPIC</p> <p>DATE</p> <p>SPEAKER/TITLE</p> <p>CONTENT</p> <p>TIME STARTED</p> <p>TIME ENDED</p> <p>Attach han outs if provided aud pre/ post test or other assessment of learning provided.</p> <p>FORM 0003</p> <p>MECHANICAL LIFT</p> <p>STEP</p> <p>Satisfactory</p> <p>Unsatisfactory</p> <p>1. Inspect the mechanical lift before each use. Make certain brakes en a e and base can be easil widened</p> <p>2. Gather necessar) items. such</p>		

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			<p>as slings, chains or straps and wheelchair or bed. side chair is ready. If wheelchair is the destination make certain wheels are in the locked position prior to transfer.</p> <p>3. Position resident to the center of the bed. Turn resident to the side.</p> <p>4. Center sling under resident, with the lower edge of seat slightly below the resident's knees.</p> <p>5. Raise head of bed as needed.</p> <p>6. Roll the lift to bedside, raise it and place with open end of the base under the bed positioning the overhead bar directly over the resident.</p> <p>7. Widen the base of the lift.</p> <p>8. Attach the sling to the straps or chains by hooking the short, side to sling at the resident's back and the long side to the resident's thighs.</p> <p>-position resident's arms over the chest or in the lap</p>		

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			<p>10. Pump the lift handle or raise with remote until resident clears the bed. NOTE* Be sure to support resident's head neck, and</p> <p>Roll the lift slowly away from bed and toward the chair. Have your assistant guide the resident's body gently until resident is directly over chair seat. Lock mechanical lift brakes.</p> <p>12. Slowly lower resident into chair while your assistant continues to guide his/her body.</p> <p>13. Detach the chains or straps, leaving sling beneath resident.</p> <p>14. Adjust footrests, if indicated.</p> <p>TO ASSIST BACK TO BED:</p> <p>15. Roll lift to resident's chair and widen base.</p> <p>16. Attach the sling straps or chains.</p> <p>Position resident's arms over the chest or in the lap</p>		

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			<p>18. Pump the lift handle or use remote until resident clears the chair. NOTE: Be sure to support resident's head, neck, and feet.</p> <p>19. Roll lift away from the chair and back to the bed.</p> <p>20. Center resident over the bed.</p> <p>21. Lower resident onto bed</p> <p>22. Unhook sling and remove from beneath resident by turning resident from side to side.</p> <p>I verify that this procedure was taught and successfully demonstrated.</p> <p>MECHANICAL LIFT STEP Satisfactory Unsatisfactory 1. Inspect the mechanical lift before each use Make certain brakes are engaged and base can be easily widened 2. Gather necessary items, such as slings, chains or straps and wheelchair or bedside chair is ready. If wheelchair is the destination make certain wheels are in the locked position prior to transfer.</p>		

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NAME OF PROVIDER OR SUPPLIER CARDINAL CARE STRATEGIES			STREET ADDRESS, CITY, STATE, ZIP COD 4600 E JACKSON ST MUNCIE, IN 47303		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCY (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE	
			<p>3. Position resident 10 the center of the bed. Turn resident to the side.</p> <p>4. Center sling under resident with the lower edge of seat slightly below the resident's knees. 5 Raise head of bed as needed.</p> <p>o. Roll the lift to bedside, raise it and place with open end of the base under the bed positioning the overhead bar directly over the resident.</p> <p>7. Widen the base of the lift.</p> <p>8. Attach the sling to the straps or chains by hooking the short side to sling at the resident's back and the long side at the resident's thighs.</p> <p>9. Position resident's arms over the chest or in the lap.</p> <p>10. Pump the lift handle or raise with remote until resident clears the bed. NOTE* Be sure to support resident's head, neck, and feet.</p> <p>11. Roll the lift slowly away from bed and toward the chair. Have your assistant guide the resident's body gently until resident is directly over chair seat. Lock mechanical lift brakes. 12. Slowly lower resident into chair while your assistant continues to guide his/her body.</p> <p>13. Detach the chains or straps, leaving sling beneath resident.</p> <p>14. Adjust footrests, if indicated.</p> <p>TO ASSIST BACK TO BED:</p>		

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			<p>1.5. Roll l ift to re-ident's chair and widen base.</p> <p>16. Attach the slin to the stra s or chains.</p> <p>17. Position resident's arms over the chest or m the la</p> <p>18. Pump the lift handle or use remote until resident clears the r•h.air NOTE: Be sure to su ort resident's head, neck, and feet,</p> <p>19. Roll lift awa from the chair and back to the bed.</p> <p>20. Center resident over tne bed.</p> <p>21. Lower resident onto bed.</p> <p>22. Unhook sling and remove from beneath resident by turning resident from side to side. 1verify that this proc ure was taught d succe fully dem strated. CNANurse MECHANICAL LIFT</p> <p>STEP Satisf•-tory Unsatisfactor•</p> <p>1 . Inspect the mechanical lift before each use. Make certain brakes en a e and base can be easil widened</p> <p>2. Gather necessary' Items. such as slings, chains or straps and wheelchair or bedside chair is ready. If wheelchair is the destination make certain wheels are in the locked position prior to transfer</p>		

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					<p>n . Position resident 10 the center oftne bed. 'lum resident to the side.</p> <p>4. Center sling under resident with the lower edge of seat slightly below the resident's knees.</p> <p>5. Raise head of bed as needed.</p> <p>6. Roll the lift to bedside, raise it and place with open end of the base under the bed positioning the overhead bar directly over the resident</p> <p>Widen the base of the lift.</p> <p>8. Attacn the sling to the straps or chains by hooking the short side to sling at the rcsident's back and the long side the resident's thi hs.</p> <p>9. Position resident's arms over the chest or in the la .</p> <p>10. Pump the liri handle or rarse with remote until resident clears the bed. NOTE* Be sure to support resident's head neck and feet.</p>		

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			<p>11. Roll the lift slowly away from bed and toward the chair. Have your assistant guide the resident's body gently until resident is directly over chair seat. Lock mechanical lift brakes.</p> <p>12. Slowly lower resident into chair while your assistant continues to hold his/her body.</p> <p>13. Detach the chains or straps, leaving sling beneath resident.</p> <p>Adjust footrests, if indicated.</p> <p>TO ASSIST BACK TO BED</p> <p>15. Roll lift to resident's chair and widen base.</p> <p>16. Attach the sling to the straps or chains.</p> <p>17. Position resident's arms over the chest or in the lap.</p> <p>18. Place the lift handle or use remote until resident clears the chair. NOTE: Be sure to support resident's head,</p>		

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					<p>neck, and feet.</p> <p>19. Roll lift awa from the chair and back to the bed.</p> <p>20. Center resident over the bed.</p> <p>21. Lower resident onto bed.</p> <p>22. I-Jrû100k sling and remove from beneath resident by turning resident from side to side.</p> <p>MECHANICAL Lift</p> <p>STEP</p> <p>Satisfactory U</p> <p>nsatisfactory</p> <p>1. Inspect the mechanical lift before each use. Make certain brakes em. a e and base can be easil widened</p> <p>2. Gather necessary items. such as slings, chains or straps and wheelchair or bedside chair is ready. If wheelchair is the destination, make certain wheels are in thc locked position prior to tran e fer.</p> <p>3. Position resiaent to the center ofthe bea. Turn resident to the side.</p> <p>4. Center sling under resident with the loweredge of sea, slightly below the resident's</p>		

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			<p>knees.</p> <p>5. Raise head of bed as needed.</p> <p>6. Roll the lift to bedside, raise it and place with open end of the base under the bed positioning the overhead bar directly over the resident.</p> <p>7. Widen the base of the lift.</p> <p>8. Attach the sling to the straps or chains by hooking the short side to sling at the resident's back and the long side at the resident's thighs.</p> <p>9. Position resident's arms over the chest or in the lap.</p> <p>10. Pump the lift handle or raise with remote until resident clears the bed. NOTE* Be sure to support resident's head, neck, and feet.</p> <p>11. Roll the lift slowly away from bed and toward the chair. Have your assistant guide the resident's body gently until resident is directly over chair seat. Lock mechanical lift brakes.</p> <p>12. Slowly lower resident into chair while your assistant continues to guide his/her body.</p> <p>13. Detach the chains or straps, leaving sling beneath resident.</p> <p>14. Adjust footrests, if indicated.</p> <p>TO ASSIST BACK TO BED:</p> <p>15. Roll lift to resident's chair and widen base.</p> <p>16. Attach the sling to the straps or chains.</p> <p>17. Position resident's arms over</p>		

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			<p>the chest or on the left</p> <p>18. Pump the lift handle or use remote until resident clears the chair. NOTE: Be sure to support resident's head, neck, and feet.</p> <p>19. Roll lift away from the chair and back to the bed.</p> <p>20. Center resident over the bed.</p> <p>21. Lower resident onto bed. Instruct and remove from beneath resident by turning resident from left side</p> <p>I verified this procedure was taught and successfully demonstrated.</p> <p>MECHANICAL LIFT</p> <p>Satisfactory Unsatisfactory</p> <p>1. Inspect the mechanical lift before each use. Make certain brakes engage and base can be easily widened</p> <p>2. Gather necessary items, such as slings, chains or straps and wheelchair or bedside chair in ready. If wheelchair is the destination, make certain wheels are in the locked position prior to transfer.</p> <p>3. Position resident to the center of the bed. Turn resident to the side.</p>		

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			<p>4. Center sling under resident with the lower edge of seat slightly below the resident's knees.</p> <p>5. Raise head of bed as needed.</p> <p>6. Roll the lift to bedside, raise it and place with open end of the base under the bed positioning the overhead bar directly over the resident</p> <p>7. Widen the base of the lift.</p> <p>8. Attach the sling to the straps or chains by hooking the short side to sling at the resident's back and the long side at the resident's thighs</p> <p>9. Position resident's arms over the chest or in the</p> <p>10. Pump the lift handle or raise with remote until resident clears the bed. NOTE* Be sure to support resident's head, neck, and feet.</p> <p>11. Roll the lift slowly away from</p>		

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			<p>bed and toward the chair. Have ycnr assistant guide the resident's body gently until resident is directl over chair seat. Lock mechanical lift brakes.</p> <p>12. Slowly lower resident into chair while your assistant continue to hold his/her body</p> <p>13. Attach the chains or straps, leaving sling beneath resident</p> <p>14. Adjust footrests, if indicated.</p> <p>TO ASSIST BACK TO BED:</p> <p>Roll lift to resident's chair and widen base.</p> <p>16. Attach the sling to the straps or chains.</p> <p>17. Position resident's arms over the chest or in the lap</p> <p>18. Pump the lift handle or use remote until resident clears the chair. NOTE: Be sure to support resident's head, neck, and feet.</p>		

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				10 Roll lift awa from the charr and back to the bed. 20. Center resident over the bed. 21. Lower resident onto bed. 22. Unhook sling and remove from beneath residen, by turning resident from side to side. MECHANICAL LIFT STEP			