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**Care of Bariatric Clients Policy**

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# Introduction

A bariatric client is anyone regardless of age, who has limitations to their health and/or social care due to their weight, physical size, shape, width and/or mobility. They will usually have a Body Mass Index (BMI) of 30kg/m2 or over.

[Company Name] is aware of the complexities involved in managing and caring for bariatric clients in their home. Despite these challenges, anyone receiving care from staff at [Company Name] should receive the highest level of care, ensuring that all processes are performed with dignity and respect.

# Policy Statement

[Company Name] has a legal requirement to ensure that it has safe systems of work to reduce health and safety risks to both staff and clients, whilst ensuring that any necessary equipment and facilities are in place to support bariatric clients with their care. [Company Name] understands the additional risks involved in the moving and handling of bariatric clients.

It is also vital that staff provide optimum levels of dignity, while enabling clients, to remain as independent as possible.

# Scope

This policy and the procedures apply to all staff working at [Company Name] who support people in domiciliary care that have bariatric needs.

The policy is an important part of the overall risk management approach to caring for people in their homes.

# Procedures

**Clinical considerations**

Staff at [Company Name] should be aware that bariatric clients may be at further risk of the following medical conditions in addition to struggling with mobility (this list is not exhaustive):

* breathlessness (which may require the administration of oxygen)
* incontinence
* cardiac complications (e.g., coronary artery disease)
* hypertension
* a high risk (or history of) stroke
* diabetes
* chronic pain
* oedema
* cellulitis
* varicose veins (often painful).

[Company Name] will ensure that staff working with bariatric clients have the necessary access to appropriate clinical equipment and/or support to treat or manage any additional clinical complications within their level of training and skills.

# Risk Assessments

An overall risk assessment should be completed by the Registered Manager as part of the initial assessment when a bariatric client enters our care. The assessment should identify any moving and handling hazards in relation to the care of the client, as well as the handling techniques required to move them in a safe way. The assessment should include all handling tasks, as well as:

* lifting and supporting the client’s legs when necessary
* washing and/or bandaging of the legs
* rolling clients on their beds to inspect pressure areas
* cleaning or inspecting skin folds.

In addition, staff at [Company Name] should be trained to carry out bespoke risk assessments to determine the best course of action prior to the management or handling of bariatric clients in individual settings.

Wherever possible, staff should use the TILE acronym to cover all aspects of the risk assessment, which will consider the level of risk associated with a manual handling injury:

**T - Task**

* Consider what sort of movement the task will require. Will there be excessive pulling, pushing, lifting or twisting involved. If the answer is yes to any significant movement, then the manual handling injury risk is high.
* Staff will then consider what alternative movements or equipment should be used to decrease the risk of injury.

**I - Individual capability of the person performing the task**

* Questions to ask should include:
  + Does the person have the capabilities or strength to perform the task?
  + Does the activity require a person of a certain height?
  + Does the person performing the tasks have a health condition that could affect their ability to perform the task?
  + Has the individual been adequately trained in manual handling?
  + Does the individual know how to handle the load properly?

**L - Load**

* One of the main considerations in terms of manual handling is the weight of the load. There are, however, other considerations as follows:
  + Is the load (client) likely to be stable or unstable?
  + Does the client have additional medical conditions which are likely to pose additional hazards?
  + Will handling the client reduce visibility and if so, by how much?

**E - Environment**

* This is where the manual handling of the load/ client will take place and how much of an impact it will have on the risk for staff and client. The following questions should be considered:
  + Is the space big enough to manage the client safely?
  + Is there enough space to move the client safely?
  + Is the surface (ground) on which the manual handling will take place stable, dry and free from additional trip hazards?
  + Is the lighting in the area adequate?

Based on the risk assessment, staff should then consider whether additional resources are required to help manage the client. If so, the Registered Manager should be contacted.

# Equipment

Bariatric clients often require specialist equipment. This can include:

* wider, heavy-duty beds
* pressure relieving mattresses
* commodes
* wheelchair
* hoists and slings
* standing aids
* walking aids.

Staff at [Company Name] should ensure that clients have all the equipment they need and that there is adequate space in the client’s home to accommodate the equipment. This will have been done as part of the initial assessment.

# Training

[Company Name] will ensure that an appropriate training program is in place for its staff. This should include effective techniques in manual handling, as well as regular refresher training on the equipment used in the management of bariatric clients. Training in manual handling techniques should be part of all basic training programs for all staff.

The Registered Manager at [Company Name] should carry out regular risk assessments on manual handling tasks and associated equipment.

Training should only be given by those competent and qualified to do so.

[Company Name] recognises that appropriate measures should be put in place to provide refresher training on a regular basis, understanding that refresher training is most relevant when:

* there is any change to manual handling operations
* new equipment is introduced
* requested by staff or any individuals.

[Company Name] should also provide/arrange additional training for individual bariatric clients where a risk assessment has identified the need to do so.

# Resuscitation of Bariatric Clients

Staff at [Company Name] should be aware of the increased effort involved in doing chest compressions on the bariatric client.

The current guidelines from the Resuscitation Council (UK) should usually be followed when resuscitating bariatric clients, with the following possible adjustments:

* increasing the depth of compression from 5-6cm to a third of the depth of the chest
* consider the use of alternative equipment to provide adequate airway ventilation. For example, if traditional bag valve masks are not providing an adequate seal, consider a pocket mask instead
* if a bariatric client is choking and abdominal thrusts are not possible due to girth, then chest thrusts should be performed.

Staff should refer to the Resuscitation (Adult) Policy for further information.

# Emergency Evacuation

Where the client has given consent, individual client details will be shared with the relevant local emergency services (Ambulance and Fire & Rescue services). This is to help ensure that specialist equipment, personnel and transport are provided without delay to the client’s home should an emergency situation arise.

# Consent

As with any client interaction, it is essential to inform the client before undertaking any procedure and to obtain consent. If the client is unable to provide consent and a decision is made in their best interests, this should be guided by the Mental Capacity Act 2005 and clearly documented in the client’s records. See the Mental Capacity Act and DoLS policy for further information on best interest decisions.

# Environment

All care should be carried out in a location and manner that maintains client privacy and dignity.

# Monitoring

The Registered Manager will monitor compliance with this policy through routine auditing. Any client or staff complaints or feedback, as well as incident reporting, will also be used to inform the effectiveness of this policy.

# Related Policies

* Infection Prevention and Control Policy
* Resuscitation (Adult) Policy
* Mental Capacity Act & DoLS Policy
* Moving and Handling Policy
* Consent (Adult) Policy
* Consent (Child) Policy
* Training and Induction Policy

# Legislation and Guidance

**Relevant Legislation**

* Health and Safety at Work Act (HSWA) 1974
* Manual Handling Operations Regulations 1992 (amended 2004)
* Mental Capacity Act 2005 (<https://www.legislation.gov.uk/ukpga/2005/9/contents>)
* Health and Safety Executive

**Guidance**

* National Institute for Health and Care Excellence (Obesity: identification, assessment and management) (<https://www.nice.org.uk/guidance/cg189/chapter/1-Recommendations#:~:text=1%20Bariatric%20surgery%20is%20a,improved%20if%20they%20lost%20weight>)
* Resuscitation Council UK

# Summary of Review

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