

## Hoverjack – Quick Guide



### Safe Working Load 544kgs (up to 86 stone in weight)

The Hoverjack is designed to lift a person from lying on the floor, onto a bed or trolley or couch keeping them in a flat lying position. It is used to move a fallen person:

- with suspected long bone or neck of femur fracture
- with a suspected spinal injury in conjunction with a scoop stretcher
- unintentionally on the floor (post collapse/arrest or a bariatric patient).

One Hoverjack and scoop is available on the main acute sites – UHW and UHL. A power point presentation is available on the intranet.

**Remember!** Never leave a patient unattended on an inflated Hoverjack  
 Always place the patient's feet at the end with the valves  
 Always place the patient centrally on the Hoverjack  
 Make sure the red deflation valves are screwed in firmly before inflation

Following the decision made to use the Hoverjack

<b>1</b>	<p>Call porters to request the Hoverjack and scoop stretcher from site practitioners' room:</p> <p>In UHW Portertrack will show the ward/area request and the return of the Hoverjack to the Office so that tracking of the Hoverjack can be made</p>
<b>2</b>	<p><b>Prior to use check the following</b></p> <ul style="list-style-type: none"> <li>• That the area around the patient is clear and there is adequate space to move the patient onto the Hoverjack and to bring in the receiving surface (bed/trolley).</li> <li>• All deflation valves are fitted with the red caps and the caps are intact</li> <li>• Inflation valves are self sealing and no evidence of leakage</li> <li>• No obvious punctures or tears in Hoverjack</li> </ul>

3	Place the Hoverjack on the floor beside the fallen person with Valves positioned at patient's feet <b>Valve #1 on the floor and Valve #4 on top</b>
4	<p><b>Lateral transfer as taught on Manual Handling Training:</b></p> <ul style="list-style-type: none"> <li>• Obtain Patslide and wide flat glide sheet (140cm x 100cm)</li> <li>• Insert glide sheet under patient by rolling patient or using scrolling method</li> <li>• Place deflated Hoverjack beside patient on floor noting head end</li> <li>• Position Patslide under glide sheet half under patient and half over Hoverjack</li> <li>• Staff position themselves on the other side of the Hoverjack and grasp the spare side of glide sheet (numbers of staff will vary following assessment)</li> <li>• On command: staff move from high to low kneeling whilst holding the edge of the glide sheet to bring patient onto Hoverjack. (Staff on opposite side may gently push the patient if appropriate and not causing pain)</li> <li>• Position patient centrally on top of the Hoverjack and remove glide sheet</li> </ul> <p><b>Remember!</b> The Hoverjack is potentially slippery. Staff must remain at side of Hoverjack to prevent the patient rolling off.</p>
5	<p>For suspected spinal injury, the Ferno split scoop and adjustable rigid C spine collar must be used. It is the responsibility of each Clinical Board to have hard collars, Ferno head blocks (or rolled towels)</p> <p><b>This procedure is only undertaken by trained and competent staff. The ward may be required to assist.</b></p> <p>Patient is immobilised on the scoop and has collar in situ prior to moving</p> <ul style="list-style-type: none"> <li>• Carefully follow lateral transfer detailed above</li> </ul>
6	Attach safety straps loosely across patient and reassure patient as inflation is noisy
7	<p>Plug Hoverjack air supply into electric socket – be aware of any trailing cables that may cause a trip hazard</p> <ul style="list-style-type: none"> <li>• Insert air supply hose into Valve#1 and hold in place</li> <li>• Press Hoverjack 39-50 button until chamber is fully inflated (Valve will automatically close when chamber full)</li> <li>• Press Standby button to stop air supply</li> <li>• Remove hose and using same process inflate chambers via Valve#2, Valve#3, Valve#4 in correct numerical order</li> </ul> <p>Dependant on height of receiving surface it may not be necessary</p>

	to inflate all the chambers
8	Unplug air supply from electric socket and store cable
9	Bring receiving surface parallel to Hoverjack. If the Hoverjack position needs to be adjusted slightly, use the attached handles. The patient safety straps must not be pulled.
10	Transfer from Hoverjack to bed/trolley using lateral transfer and log-roll to remove scoop and triple immobilise patient again if suspected spinal injury
11	It is easier to clean the Hoverjack while it is still inflated. Use wipes (eg Tuffie wipes) if there are no contaminants from bodily fluids.
12	If Hoverjack is grossly contaminated with bodily fluids from a <b>high</b> risk patient, clean with Tuffie wipes and then clean with a chlorine releasing agent - Haz tabs or Actichlor plus. For both chlorine products it is <b>10 tablet per litre of COLD water</b> in a very well ventilated room
13	Deflate Hoverjack by releasing air from <b>Valve #4 first</b> . It takes a little while for air to be expelled
14	Ensure equipment is dry before folding both sides into the middle and then rolling up from the head end to expel any remaining air from the valve (foot) end. It is very important to roll up carefully (like a jam roll) with all the straps inside the mattress. Then place mattress in the trolley with the valve end face down. No straps or valves should be trailing loose that might catch while it is being wheeled around and tear the fabric. Place air supply back into trolley
15	Report any faults to Health and Safety Department
16	Call porters to return to storage

**Commented [r1]:** Does it need to be a high risk pt or should all bodily fluids be cleaned with this does of chlorine?