

Warranty

As part of its commitment to clients for life, Shonaquip will make every attempt to support its products throughout the life of the product given normal use and reasonable wear and tear. Warranty is provided on all products for varying periods (from 6 months for batteries to 3 years for Buggies, Posture and Active Wheelchairs). Please contact client services for further details.

Date of receipt of the standing frame:

____/____/____ (yyyy/mm/dd)

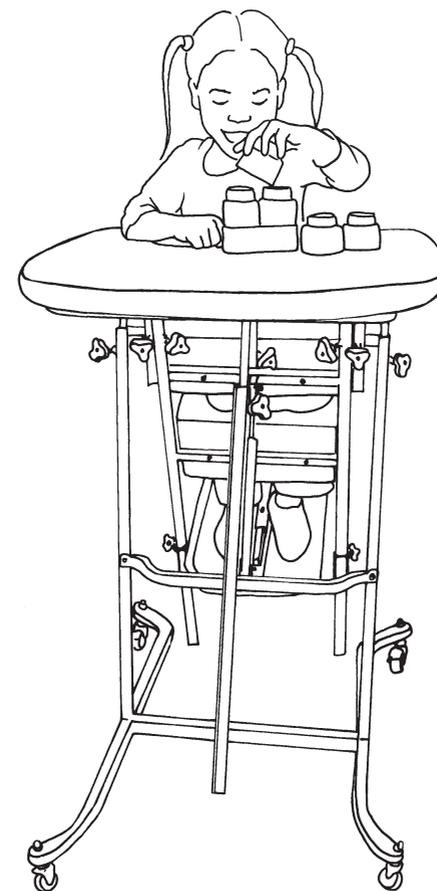
	Tick	User or carer	Therapist
I have noted the manual with information about how to care for my device	<input type="checkbox"/>	Name (printed): Signature:	Name (printed): Signature:
I have been shown all the working parts of the device	<input type="checkbox"/>	Name (printed): Signature:	Name (printed): Signature:
I have seen the warranty information for my device	<input type="checkbox"/>	Name (printed): Signature:	Name (printed): Signature:

This booklet was designed by The Shonaquip Social Enterprise for use in training. The use of modified text or illustrations is not permitted under any circumstances. Please contact info@ShonaquipSE.org.za with any queries or feedback regarding the booklet or its use.
 Date of first publication: June 2012
 Latest update: August 2022



**SHONAQUIP
 SOCIAL ENTERPRISE**
Enabling inclusion

Know your Standing Frame



Your guide to handling and care

Contents

Contact us	1
Parts of your standing frame	2
How do I move the standing frame?	4
Why is it good to use a standing frame?	4
What can be adjusted on the standing frame?	5
How do I choose which position to use for the user in the standing frame?	8
How do I transfer the user onto the standing frame?	9
How to care for my back by safe lifting	10
How do I place the user in the standing frame:	11
- In prone (on tummy)?	11
- In supine (on back)?	14
How do I clean the standing frame?	16
How should the standing frame be used during daily activities?	17
Health and safety for the user	18
How and when do I service the standing frame?	19
Follow up records	20
Warranty	back page

Contact us

Cape Town Head Office

021 797 8239

Your therapist _____

Phone number _____

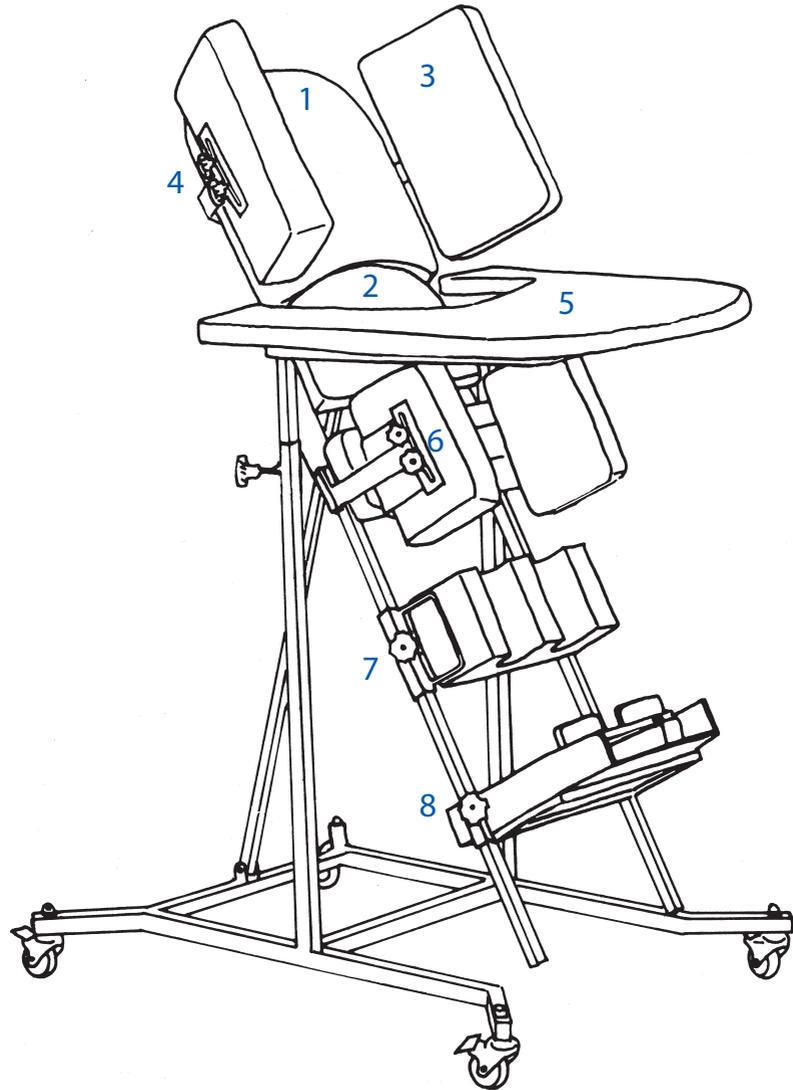
Other useful numbers

Name	How they can help?	Contact number

Parts of your standing frame

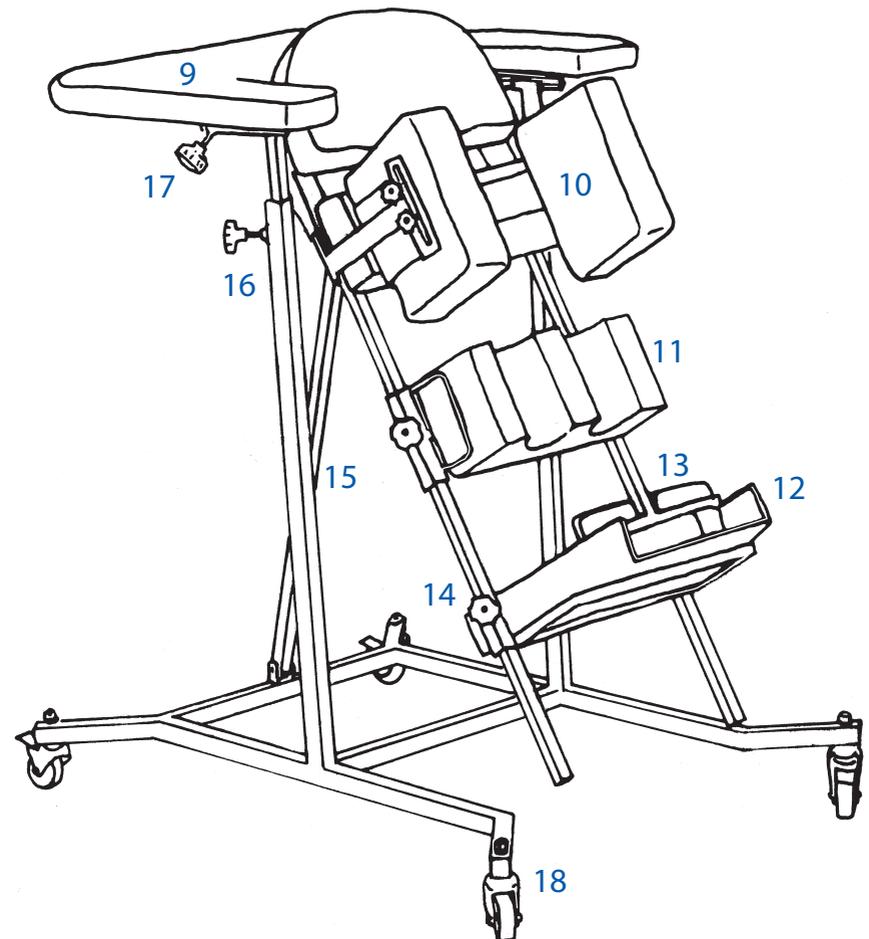
Set up for supine standing (on back)

- | | |
|---|--------------------------------------|
| 1 head support
(adjustment knob behind headrest) | 5 laptray |
| 2 trunk support | 6 knob for pelvic support adjustment |
| 3 lateral side support | 7 knob for knee support adjustment |
| 4 knob for adjustment of
height of lateral side supports | 8 knob for footrest adjustment |
- (Note the head cushion and lateral supports are used when user is on his back in the standing frame.)



Set up for prone standing (on tummy)

- | | |
|-------------------|--|
| 9 laptray | 14 knob for footrest adjustment |
| 10 pelvic support | 15 knob for tilt adjustment (hidden
(see page 5)) |
| 11 knee support | 16 laptray height adjustment knob |
| 12 footrest | 17 knob for laptray adjustment |
| 13 heel block | 18 castor and brake |



How do I move the standing frame?

The standing frame is bulky to transport as the frame cannot be folded. The laptray and body support can be dismantled, but not the mobile base. The frame can be easily moved within the home or classroom. The standing frame has a mobile base with castors that can be locked in position during use. The frame is best moved into position before the user is placed into the frame.

Why is it good for the user to stand in a standing frame?

The standing frame is suitable for children and small / lightweight adults. It provides an alternative position to sitting in a wheelchair by supporting the wheelchair user in the standing position. It is an important part of 24 hour management of posture of a child with mobility impairments who cannot stand/walk on their own. When a growing child doesn't stand, muscle and bone changes occur which can lead to health problems.

When the user stands in the standing frame for a short time regularly, it helps to:

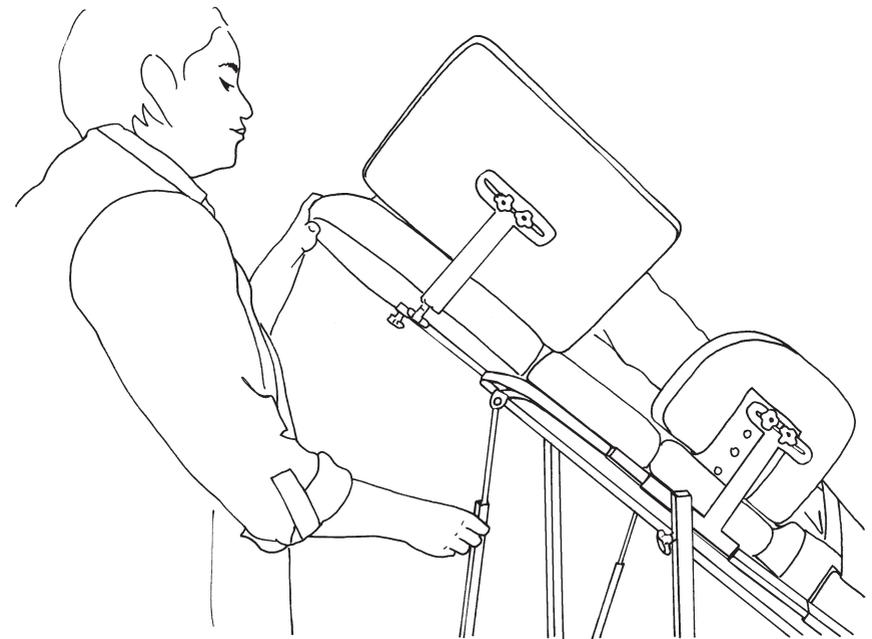
- ⊗ develop joints and muscles (e.g. Hamstrings and Achilles, which are stretched in standing)
- ⊗ reduce high muscle tone in lower limbs
- ⊗ promote better circulation and respiration
- ⊗ promote head and body (trunk/pelvis) control
- ⊗ provide a supportive position for breathing/swallowing/digestion
- ⊗ promote bowel and bladder function

In the standing frame children can participate in activities differently and they can see the world around them like others do. This can help them to feel better about themselves.

What can be adjusted on the standing frame?

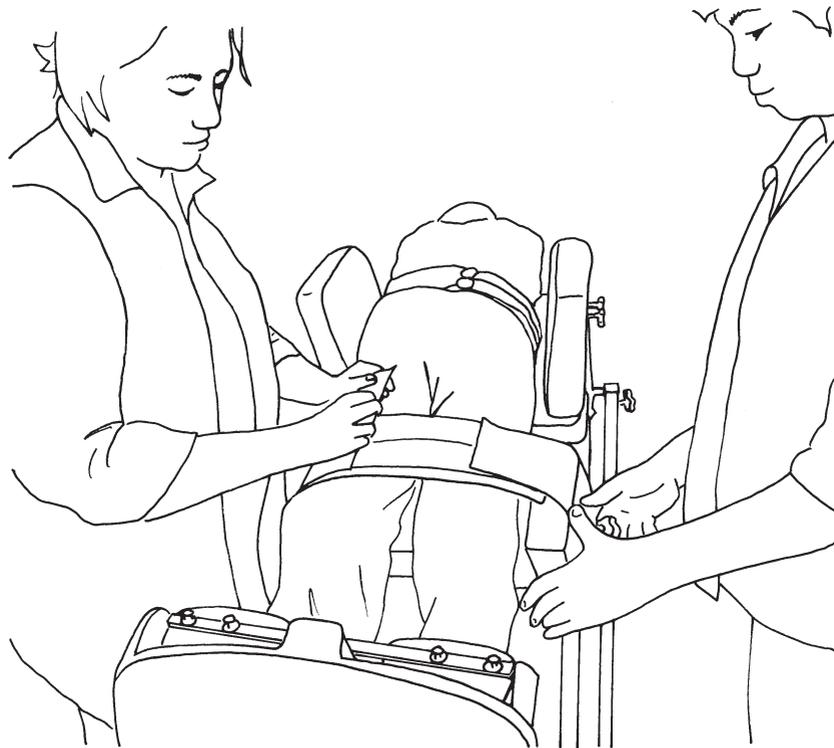
There are lots of knobs on the standing frame that can help you to adjust the frame to best suit the needs of the user. Make sure you get to know which knobs do what before you try to place a user in the frame. The following parts can be adjusted.

- ⊗ **Head support/head side lateral cushion:** this will only be needed when user is placed on his/her back in the frame. The height of the headrest and the position of lateral supports can be changed.
- ⊗ **Tilt:** The frame can be tilted in different positions between upright and lying. It can also be placed in a vertical /horizontal position but these completely upright or flat positions are seldom used.



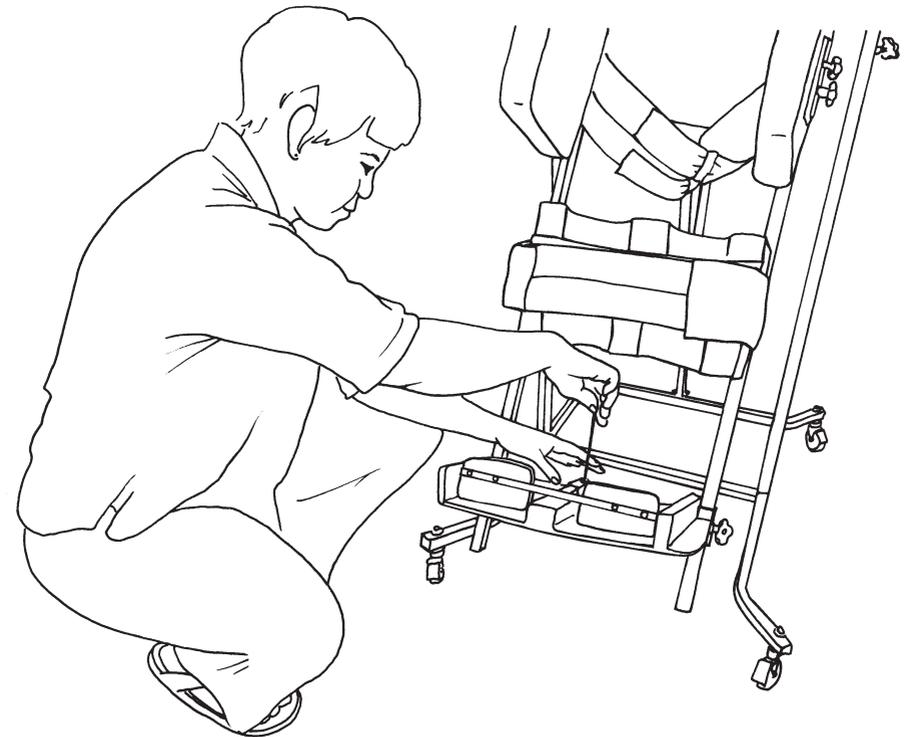
Therapist adjusts tilt position.

- ⊗ **Laptray:** The laptray has arms which can face forwards/backwards (depending if user is on back/tummy). This allows for the laptray to be used as a work/play surface and for support. The height of the laptray can be changed. The tray always needs to be in front of the user giving support to his/her arms and in a good position for activities. (see cover and page 2 - 3)
- ⊗ **Pelvic supports:** position can be adjusted by changing pelvic side supports and/or adjusting length of pelvic strap.
- ⊗ **Knee supports:** position can be adjusted up and down the frame by adjusting the knee support strap length.



Therapist adjusts knee and pelvic support straps.

- ⊗ **Footrest:** the height of the footrest can be changed; the heel block can be turned around so that it can prevent the feet slipping off the footrest (user on back) and kicking back when the user is on his/her tummy in the standing frame. The heel block can also be moved forwards and backwards to fit the client's foot size. Ensure that the knob is tightened again after adjusting.



Therapist changes the heel block on the footrest.
Use a no.4 allen key to change position.

Important

Always make sure that you practice how to adjust everything **before** you try to place the user in the frame. This will make it safer and faster to place the user in the frame.

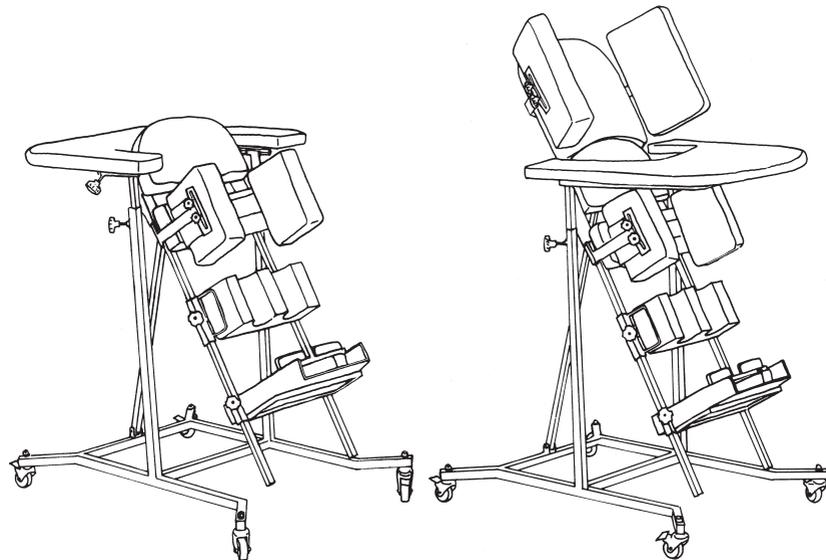
Remember to tighten knobs firmly after adjusting the user's position.

How do I choose which position to use for the user in the standing frame position the user?

The standing frame is seldom used in a completely upright position. The frame can be tilted between 90 and 180 degrees. During the fitting your therapist will help you to decide which position will suit the user best. **Only use the correct size frame for the user.**

A prone position (on tummy) leans children forward in different positions. This is for users who have strong head and neck control. In prone the user usually has good head control.

A supine position (on back) leans children backwards at different positions. This works well for users who have little or no head control.



Prone Position

Supine Position

How do I transfer the user?

The user may be placed either on his/her back or on his/her tummy in the standing frame. Very young children can be fairly easily placed onto the standing frame. It is more difficult to position older or heavier children and extra help will be needed for lifting them from their wheelchair to the standing frame.

* Choose your position before beginning the transfer to avoid unnecessary changing of position. Check with your therapist if you are unsure about what position to use.

1. Before transfer: eg. onto tummy

- ⊗ Remove the laptray and the headrest if it is on the standing frame.
- ⊗ Remove lateral side support on side user is transferring from. Keep buggy/wheelchair close to frame.
- ⊗ Tilt the frame so that it is parallel with the floor and easy for you to move the child towards.
- ⊗ Make sure that the heel block is behind the user's heels.

2. During transfer to frame

- ⊗ Explain to the user what you will be doing.
- ⊗ 2 helpers lift user onto tummy (face down) onto frame.
- ⊗ Always instruct the user about what you are planning to do. Transfer the user on a count 1..2..3. As the user is lifted the helpers turn him/her onto tummy, making sure the feet are placed flat on footrest.
- ⊗ Replace lateral support that was removed.

How to care for my back by safe lifting

It can be hard to lift and move a person to and from the wheelchair / buggy onto the standing frame. However the benefits of standing for the user make it worth your effort. Always remember to look after your back when you are lifting or moving



Standing frame tips

Make sure the standing frame is on a flat surface.

Keep the castor brakes on to lift user.

Always lift onto a horizontal frame, adjust the tilt later.

1. Plan your lift

Where are you going?
Where will you put the person down again?

Get as close as possible to surface you are moving user towards.

2. Check the weight

before you lift alone.

Do you need help?

3. Keep your feet apart, stand closer to the user.

Wear solid shoes.

4. Keep your knees bent.

Take the weight through your leg muscles as you straighten up again.

5. Don't twist your body when turning to one side.

Move your feet instead.

6. Keep your back straight and your chin tucked in.

7. Tell the user

what you will be doing during the lift

When lifting with helper, count 1..2..3...lift.

Decide who will lead the lift.

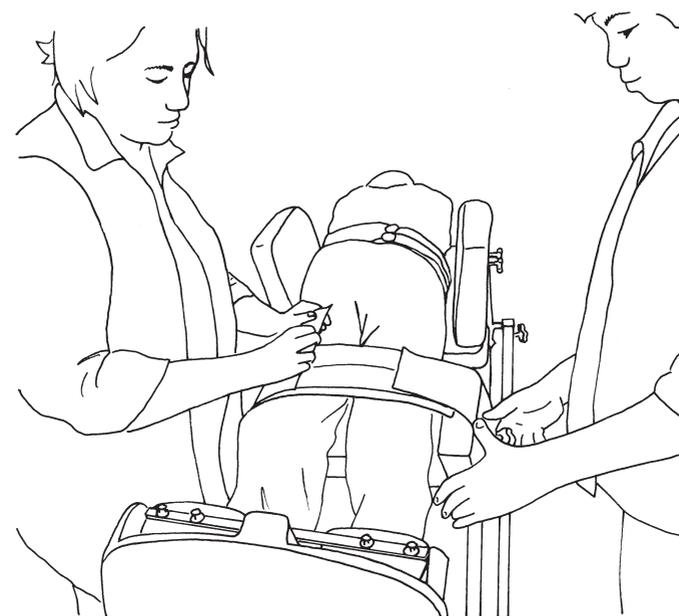
How do I place the user in the frame?

Check that you know the parts of the standing frame and practice adjusting the parts of the standing frame before placing your child in it.

Prone positioning (user on tummy)

1. Adjust position of user on frame

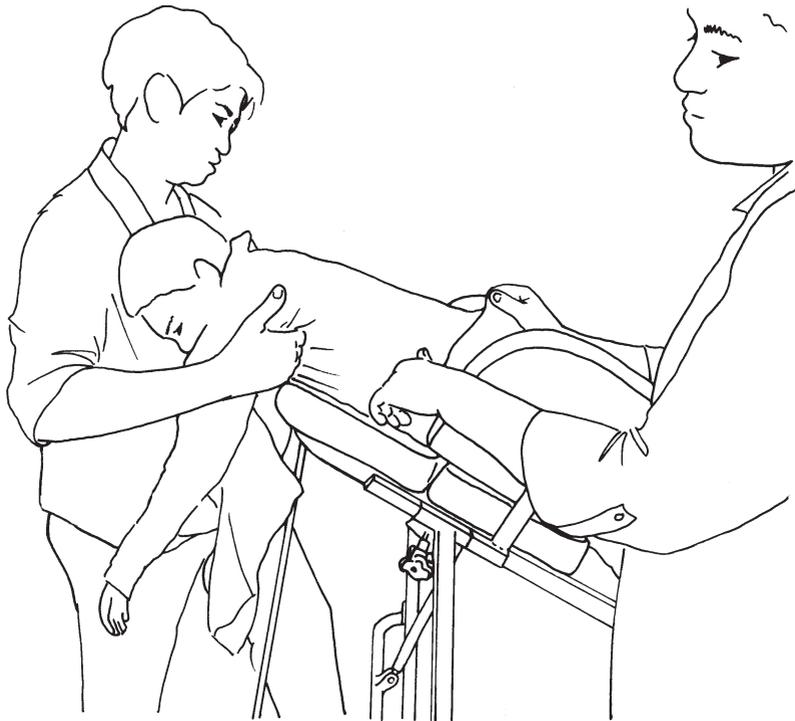
Check for the right position of the person and the supports before fastening straps: pelvis; knees; feet. The supports can be slid up and down and the straps lengthened /shortened for firm fit.



- ⊗ Keep user's pelvis flat against the support cushion. The straps should not slide down the bottom. They should be placed across the hips and fastened firmly.
- ⊗ Move the knee support (undo knobs, slide both sides together) to provide support under the knee cap on the shin and lower leg. Fasten knee straps.
- ⊗ Check that the heel block is in the correct position behind the user's heels. Use the allen key to swap it around if necessary.
- ⊗ For children under 6, allow legs and feet to point slightly sideways. Allow same hip and knee flex.

2. Check laptray height and position for support and use

- ⊗ Laptray arms must face in the right direction for laptray, the long arms need to support the tray.
- ⊗ The laptray should be high enough to give some support to the user's weight/arms. Check that arms can move freely before adjusting laptray brackets.
- ⊗ Slide laptray into position and tighten knobs.
- ⊗ It is very important that the user's head remains in a good neutral position, and is not pushed backwards or hanging forwards.
- ⊗ The tray should always be high enough to help the user to support his/her body weight comfortably and so that activities can be done comfortably.



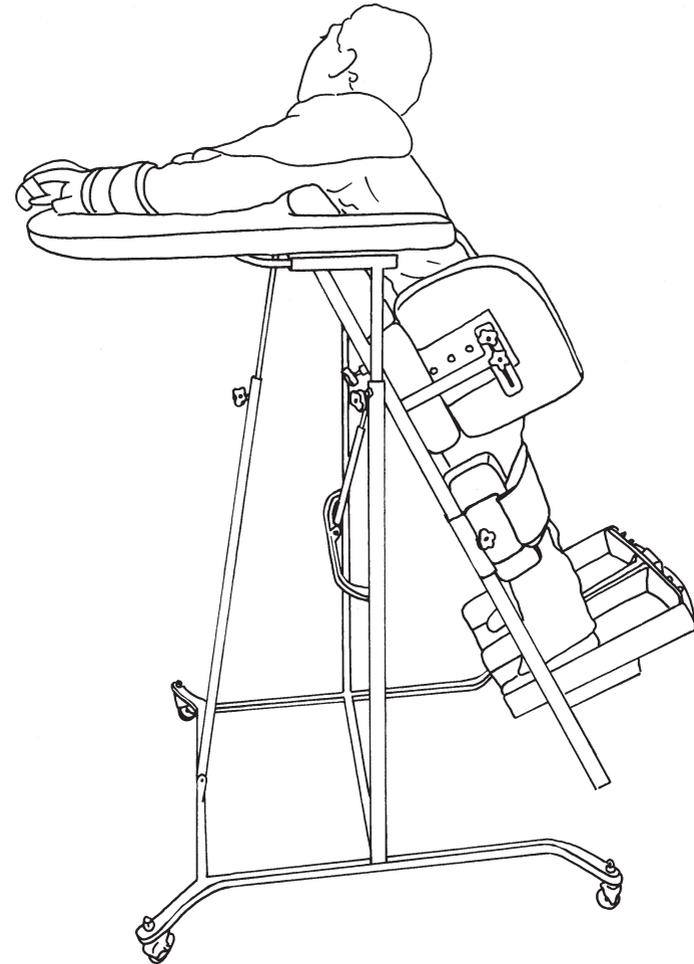
Check that the child's arms can move freely.

3. Adjust the standing frame tilt if necessary

Slowly adjust the tilt position into a more upright position so that user can take more weight if desired. (see page 5 for adjusting tilt)

Important

If the user's head is pulling backwards or hanging forwards, consider placing him/her on his back on the standing frame instead.



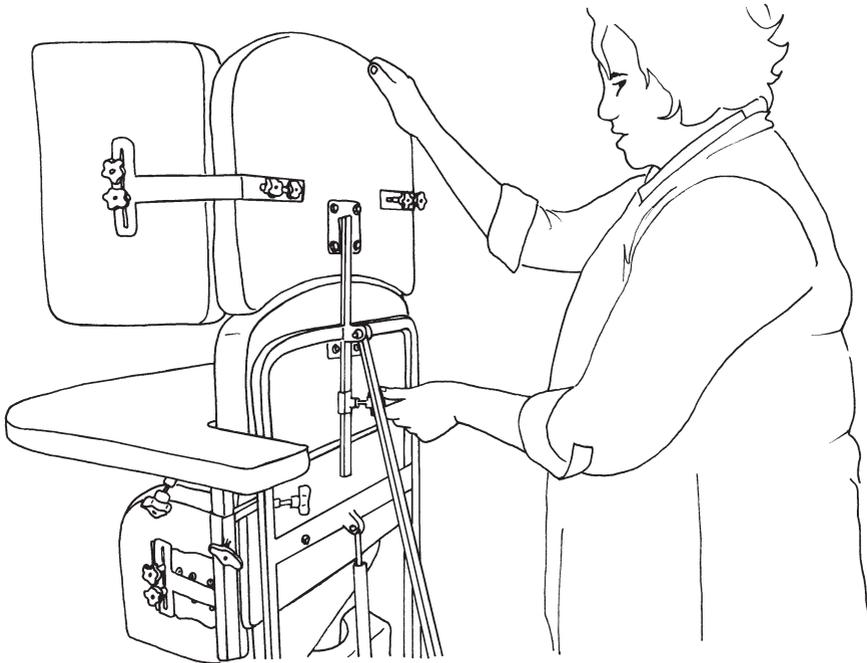
Child's head is pulling back in this position.
Consider placing him on his back in the frame or lowering the laptray height.

Supine Positioning (on back)

- in this position the user has more head support

1. Before transfer

- ⊗ The headrest needs to be added to the frame before the transfer. Remove tray for transfer and head side supports.



Attaching the headrest of the standing frame.

- ⊗ The tray arms will need to be turned around to support the tray in front of the user.
- ⊗ Place heel block so that it blocks heels from sliding off footrest. It can also be adjusted for the foot size. Turn it (if necessary) around using allen key (see page 7).
- ⊗ Tilt the frame so that it is parallel to floor.

2. During transfer to frame

- ⊗ Explain to the user what you will be doing.
- ⊗ Remove the lateral side closest to user; keep buggy/wheelchair close to frame.
- ⊗ Lift on count 1..2..3/ with a helper.
- ⊗ Place user face up on the standing frame.
- ⊗ Fasten pelvic strap firmly across hips.

3. Adjust the position of the user

- ⊗ Check for the right position of the user in the frame before fastening straps: pelvis; knees; feet.
- ⊗ The supports can all be slid up and down and the straps lengthened /shortened for firm fit.
- ⊗ Check that the lateral head supports are at the correct height. They can be moved in and out and up/down by turning the black knobs.
- ⊗ Keep user's pelvis flat against the support cushion. The straps should be placed across the hips and fastened firmly. Change the position of the supports and adjust the straps to fit firmly by turning knobs.
- ⊗ Ensure knee support is placed under user's knees. Change the position of support and length of straps if necessary by turning knob.
- ⊗ Ensure the heel block is blocking the heels and that the foot is firmly supported on the footrest.
- ⊗ For children under 6, see page 11.

4. Adjust the tilt if necessary

Slowly tilt the frame down again until the user is comfortable. Tighten the knob. You may like to mark the position of tilt which works well for the user with tippex.

5. Check laptray

- ⊗ Replace the tray and tighten the knob.
- ⊗ The long arms need to be supporting the tray and must be swapped around if facing the wrong way.
- ⊗ Check that the laptray is at the correct height for the support of the user's arms and for activity.

Important checks for after the user is placed into the standing frame

Are the brakes on?

Does the user feel safe and secure in the standing frame?

Is there any sign that the user is not happy in the frame?

Is he/she restless, crying, dizzy, frightened?

Is the user supported in a good posture and not falling to one side?

Check the position of the head - it should be upright and looking straight ahead.

Are all the parts of the frame securely tightened?

How do I clean the standing frame?

Vinyl covers and laptray: These should be cleaned with gentle soapy warm water and wiped with a sponge or soft bristle brush.

Rinse to remove soap residue and dry thoroughly.

It is easy for dirt to get caught in the stitching so be sure to brush over stitching regularly. The standing frame should be stored indoors.

How should the standing frame be used during daily activities?

Some tips for the new user:

The standing frame can be tilted at different positions to increase or decrease the weight through the legs gradually. When the user is standing upright in the frame, he is taking more weight through his legs than when lying.

Adults can spend longer periods standing but children should change position more frequently. Over time the user can stand more upright for longer periods.

How often should the user be placed into the frame?

This will differ for each user and will depend on age and comfort/enjoyment of the position.

When first standing in the frame, the user should stand for only a few minutes and gradually build up length of time in standing.

If the child is young, make sure you do an activity that he/she enjoys while standing. Observe which special activities the user likes to do in the standing frame. These may include homework, helping with food preparation; socializing; joining in fun or a game or creative activity that he enjoys. It is always better to use the new position when the user wants to do activity and is not over-tired or distressed.

NB

The following signs may mean that the user needs to change position or come out of the standing frame for a while: feels dizzy or faint; user's head hangs; he/she starts fidgeting or complaining about being tired or looks distressed; loses interest in activity.

Once the user becomes used to the standing position, it is possible to stand for 45 -90 minutes.

However standing for shorter periods, even 2 or 3 x per week can still be of great benefit to the user's health.

Health and safety for the user

Both children (from as young as two years) and small/light adults can benefit from use of a standing frame. However there are weight limitations which should be followed for each size of standing frame.

Baby standing frame: 10-20kg max

Small : 20-35kg max

Large: 35-50kg max

A child will need a larger standing frame as he grows taller/heavier.

 Use of the standing frame has many benefits for the growing child who is unable to stand alone.

It helps normal development of the hip. Sitting all the time puts children at risk for developing stiff joints due to weakened muscles.

Supported standing straightens joints, improves range of motion and helps limit deformities

It helps users who need to reduce muscle tone in the lower limbs

The standing position is also good to promote healthy digestion, good circulation and bowel and bladder functioning.

Important

Taking pressure off the bottom prevents pressure sores. You will still need to check any areas of the body which are in contact with parts of the frame. If you notice any redness, take the child out of the standing frame until the mark has cleared completely.

Precautions for use of a standing frame

- ⊗ Don't move a standing frame while the child is standing in it.
- ⊗ Make sure the frame is on a flat surface.
- ⊗ Keep castor brakes on when lifting the user.
- ⊗ Always lift user onto a horizontal frame, adjust the tilt later once the user is safely strapped into position.

- ⊗ Make sure all the knobs are tight and that the straps are supporting the user securely.
- ⊗ Avoid poor positioning in the frame which can cause further problems.
- ⊗ Don't place user in a standing frame that is not the correct size for his/her weight.
- ⊗ Don't leave a young child unsupervised in the frame.
- ⊗ If the user cannot hold his/her head up adequately, consider changing from prone to supine position in the frame or change the tilt angle.

Warning!

Standing on very bent knees or hips can cause more damage. Users with heart complications and constant low blood pressure should not be using a standing frame/require close supervision.

How and when do I service the standing frame?

- ⊗ Looking after your standing frame well will increase its lifespan and ensure the safety of the user.
- ⊗ Check regularly that all the castor brakes are working on the standing frame.
- ⊗ Tighten all knobs as soon as you see they are loose to stop them getting lost.
- ⊗ Repair/replace broken or lost parts as soon as possible to avoid more serious damage.
- ⊗ Tears to support padding may be repaired by a seamstress or by the Shonaquip workshop.
- ⊗ Ensure Velcro straps are sticking, have them replaced whenever necessary.

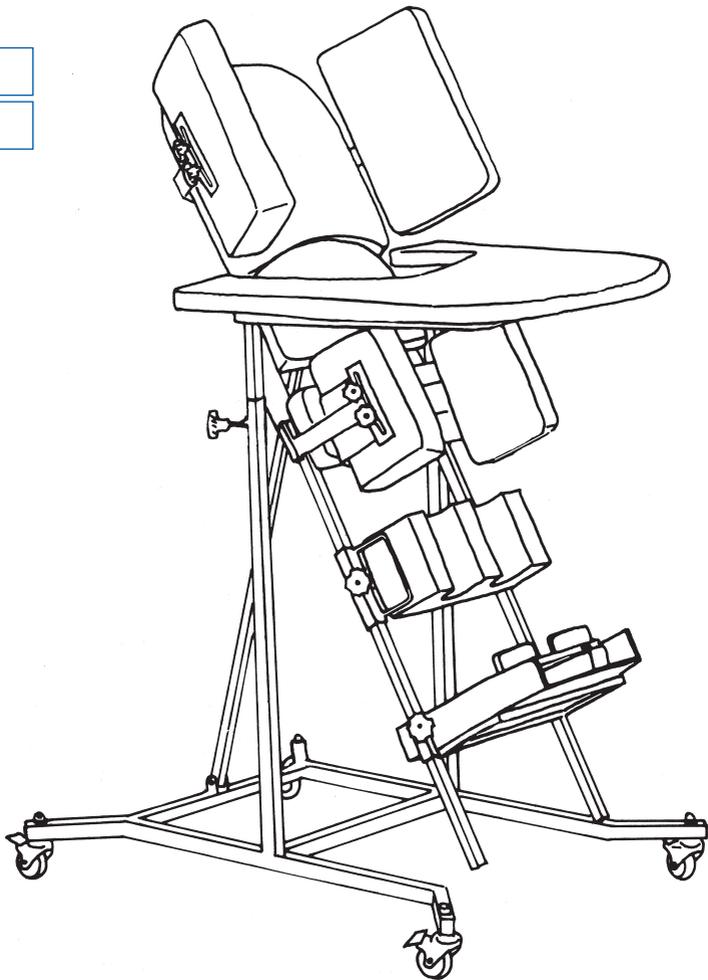
Footrest:

- ⊗ Make sure all bolts are kept tight. Padding may be replaced when it becomes worn. Brush out all dirt from the footbox regularly.

Has your standing frame been changed in any way?

Yes

No



Changes or extras are marked on this drawing.

Therapist's name _____

Signature _____

User/carer's name _____

Signature _____

Date seen: ____/____/____ Therapist: _____

Phone number: _____

Standing frame adjustments	
Special recommendations for user/carer	
Additional carer training	
Your next appointment is with:	<p>_____ (therapist)</p> <p>Date: ____/____/____</p> <p>Time: _____</p> <p>Place: _____</p>