

Manual Handling Policy

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Consultation Groups	Health and Safety Leads
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Services	Applicable to
Trustwide	Х
Mental Health and LD	
Community Health Services	

Version Control Summary

Version	Date	Author	Status	Comment
2.2	August 2011	Manual Handling Working Group: Glenis Roberts Anthony Edwards, Meelan Pandya James Wheelan	Final	Revised policy following outdated policy and integration of ELFT and Community Health Newham.
2.3	January 2013	Manual Handling Working Group	Final	Revised policy following recommendations from Annual Audit Report November 2012.
2.4	March 2018	Richard Harwin	Final	Review in light of organisational changes. Removal of Manual Handling Group with H&S Committee adopting the role
2.5	January 2020	CHS Manual Handling Working Group.		Review to clarify the procedures for the Service User specific Manual Handling Assessment, and the Generic Manual Handling Assessment. Enhancement of Policy to include The Generic Safe System of Work for Heavy Dressing Lower Limbs on Home Visits.(Refer to Appendices)
2.6	January 2021	Richard Harwin		Updated to reflect internal audit recommendations

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1. Introduction

- 1.1 This policy is intended to provide guidance to staff and managers in the organisation in clinical and non- clinical areas to enable the Trust to discharge its statutory obligations under The Manual Handling Operations Regulations (MHOR). The Policy applies to all East London Foundation NHS Trust staff. This policy should be adhered to by staff carrying out manual handling activities, whether handling service users (clinical), or inanimate loads (non-clinical) handling. It applies to all Trust sites both inpatient and out-patient; and to staff working in service users homes, or other community settings such as Day Centres or voluntary settings.
- 1.2 Manual handling is defined as "the transporting or supporting of a load (including the lifting, putting-down, pushing, pulling, carrying or moving thereof) by hand or bodily force" (Manual Handling Operations Regulations 1992). These various manoeuvres are collectively called 'manual handling operations' (MHOs).
- 1.3 The unsafe manual handling of patients or inanimate loads can result in pain, sickness absence, and occasionally permanent disability to staff. It can also seriously harm or injure service users and their carers. Avoiding manual handling activities is the most effective way of reducing the risk of injury and harm. However, this may be unrealistic especially in a work setting where people require care and support. Therefore, where it is not reasonably practicable to avoid handling, a risk assessment will identify the safe working systems of work, or Patient specific handling plans to carry out the handling activity safely, including any appropriate equipment.
- 1.4 East London NHS Foundation Trust is committed to ensuring that all staff carry out risk assessments for all manual handling tasks/activities, both for patients and inanimate loads; and that staff subsequently produce a safe system of work, or a Patient specific handling plan as part of the Trust's Health & Safety Policy. This is to ensure that staff, patients, and carers are not exposed to unnecessary and foreseeable risks whilst at work. The Trust stipulates that staff undertaking any manual handling tasks must use either an appropriate Generic Risk Assessment and Safe System of Work (refer to appendices); or a Patient specific Manual Handling Risk Assessment and Handling Plan (approved for use by your service area).
- 1.5 East London NHS Foundation Trust requires that all staff must attend relevant mandatory manual handling training and update their training in the required time period. This is to ensure that staff are competent and skilled to carry out manual handling risk assessments, produce Safe Systems of Work or Handling plans; and that staff only use manual handling techniques that have been demonstrated to them in mandatory training sessions.
- 1.6 Refer to Section 5 of the Policy, and Appendices for the template of the Generic Risk Assessment and Safe System of Work. This is designed to assess, reduce the risks; and produce a safe system of work for commonly identified handling risks associated with general handling activities; for example a nurse dressing a heavier lower limb.

2. Purpose

2.1 This policy sets out the Trust's approach to Manual Handling, which essentially aims to protect patients, staff and the general public from the risks arising from manual handling activities; and to comply with legislation, guidance and best practice.

3. Objectives

- 3.1 To ensure staff avoid unnecessary manual handling activities.
- 3.2 To ensure that an appropriate manual handling risk assessment is undertaken where it is not possible to avoid hazardous manual handling activities. The assessment must take into account specific factors including the load, individual, task and the environment; and that risk reduction measures are implemented such as a Safe System of Work, or a Patient specific Handling Plan.
- 3.3 To assist and support managers to assess, reduce, and control risks arising from manual handling activities/tasks in compliance with statutory requirements.
- 3.4 To ensure that staff receive appropriate mandatory training, on-site training, and induction in moving and handling, which includes the use of equipment, so they can safely apply these skills to their place of work.
- 3.5 To ensure that following assessment, suitable handling equipment is made available, and that it is used safely and correctly as per training and instruction
- 3.6 To create a safer working environment for all Trust staff, patients and carers; and to promote an ergonomic approach to risk assessment in relation to the task, the individual capability, the load factors and the workplace environment.
 (Refer to the Generic Risk Assessment and Safe System of Work (in Appendices); and the approved Patient specific Manual Handling Risk Assessments and Handling Plan for your service).
- 3.7 To encourage Patients to assist in their own transfers where possible whilst offering minimal assistance, instruction and guidance as required. This may also include the use of slide sheets and/or other small handling aids to enable transfers, encourage independence and reduce friction.
- 3.8 To ensure that handling patients manually only continues if it does not involve lifting the whole or the greater part of a patients weight. This is due to the hazardous nature of the activity, increased risk of postural and load bearing injury to the handler and patient, and because it represents poor practice.

4. Role and Responsibilities

4.1 The Executive Group

The Chief Nurse has overall responsibility for ensuring measures are in place to control manual handling risks.

4.2 Ward/Departmental/Team Managers

Managers have a fundamental role to play in managing potential risks associated with moving and handling activities and thus ensuring compliance with the policy.

These responsibilities include:

- 4.2.1 To ensure that staff avoid handling activities which involve significant risk or injury. Where these are unavoidable managers must:
- 4.2.2 Ensure that an appropriate risk assessment (Refer to Generic Risk Assessment and Safe System of Work (refer to appendices), or a Patient specific Manual Handling Risk Assessment and Handling Plan approved by your service) is carried out to determine measures to reduce risk of injury to staff, carers or patients. This includes considerations for new and expectant mothers and young persons (Refer to New and Expectant Mothers Risk Assessment Form Template on Intranet). Managers must ensure all their staff have easy access to any relevant Generic Risk Assessments and Safe Systems of Work or patient related Handling Plans in a local folder/manual; and that all new staff including Bank and Agency Staff, and students are fully inducted in their correct use.
- 4.2.2 Ensure that manual handling is minimised in the workplace, carried out safely; and with the use of appropriate handling aids where necessary.
- 4.2.3 Record and monitor manual handling incidents in accordance with Trust Incident Reporting Policy (Available on Trust Intranet), The Trust's DATIX guidance, and Reporting of injuries, diseases and dangerous occurrences regulations¹ (RIDDOR). Ensure staff are referred to occupational health where necessary.
- 4.2.4 Ensure that any recommendations and actions arising from an incident are put in place in the service area and reviewed regularly as part of that service areas overall risk assessment and management plan. Managers must also ensure that any recommendations to improve safe practice are incorporated into any review of a relevant Patient specific Handling Plans or Safe Systems of Work.
- 4.2.5 Seek Occupational Health support as necessary regarding any medical condition that may have manual handling implications for the staff in question.
- 4.2.6 Ensure that all staff are competent to carry out the full range of manual handling tasks they are required to undertake. This to be ensured through staff receiving adequate instructions/safe systems of work, training: and local induction (refer to Local Staff Induction Proforma-available on Trust Intranet). As part of the Trust's appraisal and supervision system managers must monitor, discuss and regularly review staff competence, and their compliance with regard to attendance at the appropriate mandatory manual handling training sessions.
- 4.2.7 <u>Liaise with the Health and Safety Committee with respect to the purchasing of load handling equipment/manual handling equipment.</u>
- 4.2.8 Ensure that equipment provided is suitable and sufficient; and is maintained and serviced in accordance with relevant legislation (Provision and Use of Equipment Regulations PUWER and Lifting Operations and Lifting and Equipment Regulations LOLER).

¹ RIDDOR: This refers to occupational incidents of which any significant MH ones must be reported externally to the Health and Safety Executive. This role is undertaken by the **Assurance Department**.

- 4.2.9 Undertake an annual manual handling audit of their service areas for all types of manual handling activities/tasks carried out. (Refer to Manual Handling Self Audit pro-forma in appendices).
- 4.2.10 Act as their service area's nominated manual handling risk assessor for identifying with their staff any manual handling tasks that require the production and/or review of Generic Risk Assessments and Safe Systems of Work.

4.3 Employees

Employee must:

- 4.3.1 Maintain their competence and skills in manual handling by attending relevant mandatory training sessions and updates; and only implement/carry out manoeuvres/techniques as instructed in training sessions, and as stipulated in relevant Generic Risk Assessments/Safe Systems of Work, or Patient specific Handling Plans.
- 4.3.2 Comply with any relevant Generic Risk Assessments and Safe Systems of Work or Patient specific Risk Assessments and Handling Plans.
- 4.3.3 Report any damaged/defective moving and handling equipment to their line manager or Estates as relevant, ensuring that unsafe equipment is appropriately labelled and/or taken out of use.
- 4.3.4 Report pregnancy (refer to New and Expectant Mothers Risk Assess Form on Trust Intranet); and any other medical conditions, which may affect their ability to handle loads safely to their manager, or which will affect their ability to participate safely in any mandatory or on-site training sessions.
- 4.3.5 Report any change in working conditions (including the environment), personnel involved in manual handling tasks; or a significant change in the nature of the task or the load, which may necessitate a review of the Generic Manual Handling Risk Assessment and Safe System of Work or Patient specific Handling Plan.
- 4.3.6 Report and record any injury, unsafe practice or faulty equipment on the incident reporting system; and also inform their departmental manager.
- 4.3.7 Wear clothing and footwear that is suitably protective, and that enables free movement, comfortable posture and a stable and balanced stance.
- 4.3.8 Ensure that any manual handling activities specific to their work not covered in training sessions, induction or in a Generic Risk Assessment and Safe System of Work or Patient specific Handling Risk Assessment and Handling Plan is reported to their manager. This is to ensure that only a documented Safe System of Work or Patient specific Handling Plan is followed; and that further advice, guidance and training is obtained if required.

4.4 The Governance and Risk Team

- 4.4.1 To report all notifiable incidents reported on the incident management system to the Health and Safety Executive.
- 4.4.2 To monitor and analyse injuries and report the findings to the Health and Safety Committee and other relevant parties.

4.5 The Occupational Health Service

- 4.5.1 To assess and monitor the health and fitness of staff in relation to their specific job and work activity.
- 4.5.2 To assess individual staff referred to them following musculoskeletal injury or related symptoms affecting their work, including referral to other agencies such as Physiotherapy; and to advise managers accordingly.
- 4.5.3 To advise managers following the return of staff from a period of sickness absence of their fitness and rehabilitation; and any restrictions in order to enable a swift return to the work environment.

4.6 Health and Safety Committee

- 4.6.1 To monitor manual handling incidents, identifying trends and any areas of risk within the Trust; and to review any investigations, providing feedback and intervention as appropriate.
- 4.6.2 To ensure that commissioned training is suitable and appropriate for the needs of the organisation.
- 4.6.3 To provide specialist advice to service staff and managers on the selection of manual handling equipment; and on the production of Generic Risk Assessments and Safe Systems of Work.

5 Risk Assessments

5.1 A manual handling risk assessment will be carried out prior to any patient or inanimate load manual handling task where the activity poses a risk of injury using the appropriate proforma. Staff <u>must not</u> under any circumstance carry out any manual handling task or activity without the completing or following either of the two following pro-forma:

- Generic Risk Assessment and Safe System of Work
- A <u>Patient specific-Manual Handling Risk Assessment</u> and Handling Plan (approved for use in your service).
- 5.2 If there are no existing suitable Generic Risk Assessments and Safe Systems of Work, then they should be created for that service. Formal approval, via the Trust's **Health and Safety Committee** should be secured before they are used.
- 5.3 A Generic Risk Assessment and Safe System of Work will be completed or followed for all non-clinical² handling tasks. In the first instance staff and managers should request that heavier or large inanimate loads such as office furniture, equipment and files be moved by the Estates Department.
- 5.4 A Patient specific Handling Risk Assessment and Handling Plan (approved for use in your service) will be completed for all patients requiring assistance with any transfer and manual handling need. These will be clearly recorded in the patient's clinical records and care plan for relevant staff and carers to access and follow. This Assessment and Handling Plan will give direction to the type of transfer or manoeuvre required, the appropriate equipment or small handling aid to be used; and the number of staff required for the transfer or activity.

² Non-clinical handling, relates to activities that do not involve people handling, for example lifting files, boxes, cleaning equipment, pushing trolleys and waste disposal.

Staff must ensure that they equip themselves with this information prior to the manual handling activity/task commencing. This Handling Plan must be reviewed/re-assessed, updated and shared with relevant staff and carers when there are any changes to the patient's condition and functional status, the environment; and to the ability/health of carers.

- 5.5 Only competent and trained clinical staff will carry out Patient specific Manual Handling Risk Assessments and Handling Plans.
- 5.6 The assessment should include the patient's ability to participate, and should be mindful of the patient's behaviour, cognitive ability, or communication issues.
- 5.7 Patient Manual Handling Risk Assessments and Handling Plans will stored/uploaded in the patient's electronic patient records/progress notes. It is the role of the team management structure to ensure risk assessments are appropriately documented and stored. This may be through spot checks, local audit, and through regular staff supervision.
- 5.8 Both Patient specific, and Generic Risk Assessments and Patient Handling Plans and Safe Systems of Work will be reviewed whenever there is a significant change in the circumstances, such as task, load, environment or equipment. The local assessor or relevant clinician will be responsible for taking this action.
- 5.9 Action plans arising from risk assessments must be monitored by the respective manager/s. Any outstanding significant risks should be discussed with the team / service manager and considered for escalation to the Trust Risk Registers including local team risk registers, directorate level risk registers and where necessary escalation to the Corporate Risk Register dependent on the level of risk.
- 5.10 Falls intervention is an issue that potentially poses a high risk of injury to both staff, patients and carers. Please refer to the Slips, Trips and Falls (Patient) Policy and procedures on the Intranet. Under no circumstances must staff or carers manually lift a patient from the floor.

6. Mechanical Aids

- 6.1 The selection of mechanical aids will be determined by the relevant Manual Handling Risk Assessment to comply with The Provision and Use of Workplace Equipment Regulations 1998 (PUWER) and Lifting Operations and Lifting Equipment Regulations 1998 (LOLER).
- 6.2 Staff will be trained in the use of the mechanical aids before they are asked to use these. Under no circumstances should staff use a lifting device or associated equipment for which they have not been trained in the safe use of, and where there is no relevant Safe System of Work or Patient specific Handling Plan.
- 6.4 Equipment inspections and maintenance will be carried out regularly in line with manufactures instructions and records kept. <u>In addition loaned and borrowed equipment must be registered with the Estates and Facilities Department.</u>
- 6.5 Equipment must be compatible with each other, for example patient hoists and slings.
- 6.6 Control of Infection all mechanical aids must be cleaned appropriately as per the Trust's Infection Prevention and Control Policy Manual and associated procedures. In the case of patient hoists and fabric slings, these should be single patient use in in-patient areas. Equipment contaminated with body fluids should be washed as per the manufacturer's instructions.

7. Training

- 7.1 Manual handling training is mandatory for all staff both clinical and non-clinical. The Trust will provide sufficient and appropriate mandatory training for all of the staff groups appropriate to their job roles/work needs. Training requirements and frequencies are specified in the statutory/mandatory training needs analysis (available on the Intranet and on OLM).
- 7.2 Managers will be responsible for ensuring that their staff attend an appropriate initial mandatory manual handling course, and any required updates. Managers must ensure that bank and agency staff are suitably trained for manual activities prior to commencement of duties.
- 7.3 All staff including Bank, agency and students must be locally inducted using the Local Staff Induction Pro Forma (Available on the Trust Intranet).
- 7.4 Management of training will be done centrally by the Training Department including monitoring and follow-up of non-attendance with managers.
- 7.5 All staff must inform their manager, and the manual handling trainer of any health related issues including pregnancy which will affect their ability to safely engage in mandatory training sessions or local on-site training or practice sessions.

8 Incident Reporting

- 8.1 All moving and handling related incidents including near misses must be reported on the Trust incident management system/DATIX whether or not an injury occurred. Staff must cooperate with any investigation that may be carried out as a result.
- 8.2 Incidents occurring as a result of moving and handling are reported using the usual Trust Incident Reporting system. Staff must cooperate with any resulting investigation that may arise.
- 8.3 Manual handling incidents will be reviewed by the Health and Safety Committee which will identify any failure to adhere to policy and procedure, note themes and generate action plans as required.

9. Linked Documents

Linked documents

Local Staff Induction Pro Forma (Available on Trust Intranet)

Generic Risk Assessment and Safe System of Work Protocol. (Refer to Appendices)

Moving and Handling Self Audit pro-forma

New and Expectant Mothers Risk Assessment Form Template (Available on Trust Intranet)

Incident Reporting Policy (Trust Intranet)

Slips Trips and Falls (Patients) Policy (Trust Intranet)

Policy On The Use Of Physical Holding Skills (Trust Intranet)

Medical Devices Policy (Trust Intranet)

Infection Prevention and Control Policy Manual

10. Useful References

- Getting To Grips with Manual Handling: A short guide. Health and Safety Executive.
- Getting to Grips With Hoisting People (Health and Safety Executive. Health Series Information Sheet No 3. Available at www.hse.gov.uk\pubns\hsis3.pdf
- Lifting Operations and Lifting Equipment Regulations 1998 (LOLER) http://www.opsi.gov.uk/si/si1998/19982307.htm/http://www.hse.gov.uk/pubns/indg290.pdf.
- Moving and Handling\Advice Guidance\Royal college of Nursing. https://www.rcn.org.uk/get-help/rcn-advice/moving and handling
- Provision and Use of Work Equipment Regulations 1998 (PUWER)
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995.
- The Health and Safety at Work etc Act 1974: http://www.hse.gov.uk/legislation/hswa.htm
- The Management of Health and Safety at Work Regulations 1999: http://www.hse.gov.uk/legislation/hswa.htm
- The Manual Handling Operations Regulations 1992 (MHOR)
- The Workplace (Health, Safety & Welfare) Regulations 1992: http://www.hse.gov.uk/legislation/hswa.htm
- The Guide to The Handling of People. A systems approach. 6th Edition. Published by Backcare (2011)



Equality Analysis

Equality analysis is a way of considering the effect on different groups protected from discrimination by the Equality Act, such as people of different ages. There are two reasons for this:

- To consider if there are any unintended consequences for some groups
- To consider if the policy will be fully effective for all target groups

It involves using equality information, and the results of engagement with protected groups and others, to understand the actual effect or the potential effect of your functions, policies or decisions. It can help you to identify practical steps to tackle any negative effects or discrimination, to advance equality and to foster good relations.

Basic details of the analysis				
Title of policy etc. being analysed	Manual Handling Policy			
Name of person undertaking the analysis	Richard Harwin			
Title/Designation	Health, Safety and Security Manager			
Role in relation to policy being analysed	Member of Health and Safety Committee			
Directorate	Governance and Risk			
Date of analysis	06 March 2018			
Results of the analysis				
Adjusted the policy/service				
Continue the policy/service without adjustment				
☐ Stop and remove the policy/service				
Analysis quality checked and approved by:				
Name of quality checker				
Title/Designation of quality checker	·			
Date checked				

1.	Details of the analysis	
1.1	Title of the policy or service	Manual Handling
1.2	Aims of the policy or service	The policy is intended to provide clear guidance on the Trust arrangements with regard manual handling in other satisfy obligations under the Manual Handling Operations Regulations by ensuring that systems and processes are in place to eliminate or reduce associated manual handling risks.
1.3	Expected outcomes of the policy or service	To ensure safe manual handling working within the workplace at all times by ensuring that appropriate controls are implemented to protect both staff and service users.
1.4	Will the policy or service help to:	Expand on your answer in this column

	a) Eliminate unlawful discrimination	
	Yes 🗌 No 🖂	
	b) Advance equality of opportunity	
	Yes □ No ⊠	
	c) Foster good relations	Establishes clear roles and responsibility for manual
	Yes ⊠ No □	handling related tasks/activities.
1.5	Who will this policy affect?	
1.5	Staff	
	Service Users	
	Carers	
	Members	
	Others	
2.	Consultation	
2.1	Have you consulted with any of the	If 'Yes' state which groups have been consulted
	groups that will be affected by the	and the results of the consultation.
	policy/service etc?	If 'No' explain your reasons for not consulting
		If 'Not yet' state your plans for consulting
	Yes ⊠ No □ Not yet □	
	res 🖂 📉 Not yet 🗀	Policy was developed by a working group of the
		Manual Handling Group (Trust specialist task group),
		incorporating relevant stakeholders from various
		disciplines, for example nursing, occupational therapy, physiotherapy etc. Future approvals for the
		policy will now be made by Health & Safety
		Committee.
3.	Evidence	
3.	Evidence	Explain your answers in this column
3. 3.1	In reviewing this policy, service etc.	A number of key national guidance which stipulates
	In reviewing this policy, service etc. what evidence was looked at? (E.g.	A number of key national guidance which stipulates organisations responsibilities with regards manual
	In reviewing this policy, service etc. what evidence was looked at? (E.g. staff surveys, service audits, count me	A number of key national guidance which stipulates organisations responsibilities with regards manual handing, such The Health & Safety Executive (HSE)
	In reviewing this policy, service etc. what evidence was looked at? (E.g.	A number of key national guidance which stipulates organisations responsibilities with regards manual handing, such The Health & Safety Executive (HSE) legislations and Nursing and Midwifery guidance
	In reviewing this policy, service etc. what evidence was looked at? (E.g. staff surveys, service audits, count me	A number of key national guidance which stipulates organisations responsibilities with regards manual handing, such The Health & Safety Executive (HSE) legislations and Nursing and Midwifery guidance were reviewed; refer to Reference section for a
	In reviewing this policy, service etc. what evidence was looked at? (E.g. staff surveys, service audits, count me	A number of key national guidance which stipulates organisations responsibilities with regards manual handing, such The Health & Safety Executive (HSE) legislations and Nursing and Midwifery guidance
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3.1	In reviewing this policy, service etc. what evidence was looked at? (E.g. staff surveys, service audits, count me in census, workforce reports etc.) Does the evidence show that some	A number of key national guidance which stipulates organisations responsibilities with regards manual handing, such The Health & Safety Executive (HSE) legislations and Nursing and Midwifery guidance were reviewed; refer to Reference section for a comprehensive list of these.
3.1	In reviewing this policy, service etc. what evidence was looked at? (E.g. staff surveys, service audits, count me in census, workforce reports etc.) Does the evidence show that some people have not fully benefited from this	A number of key national guidance which stipulates organisations responsibilities with regards manual handing, such The Health & Safety Executive (HSE) legislations and Nursing and Midwifery guidance were reviewed; refer to Reference section for a comprehensive list of these.
3.1	In reviewing this policy, service etc. what evidence was looked at? (E.g. staff surveys, service audits, count me in census, workforce reports etc.) Does the evidence show that some people have not fully benefited from this type of policy or service in the past? Yes \(\subseteq \text{No } \subseteq \)	A number of key national guidance which stipulates organisations responsibilities with regards manual handing, such The Health & Safety Executive (HSE) legislations and Nursing and Midwifery guidance were reviewed; refer to Reference section for a comprehensive list of these. No evidence was reviewed.
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3.1	In reviewing this policy, service etc. what evidence was looked at? (E.g. staff surveys, service audits, count me in census, workforce reports etc.) Does the evidence show that some people have not fully benefited from this type of policy or service in the past? Yes No Does the evidence show that there is a different take up for this type of policy or service by some people? Yes No Does the evidence show that some people have been disproportionately affected by the provision that this policy	A number of key national guidance which stipulates organisations responsibilities with regards manual handing, such The Health & Safety Executive (HSE) legislations and Nursing and Midwifery guidance were reviewed; refer to Reference section for a comprehensive list of these. No evidence was reviewed. N/A (see above)
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	Yes ☐ No ⊠	
3.6	Were any evidence gaps identified? (e.g. no available data)	NA
	Yes ☐ No ⊠	
3.7	Describe here the action that will be taken to ensure that the policy/service etc. will have a positive impact with reference to 1.4b and 1.4c	NA
3.8	Will the policy or service etc. have an impact on Safeguarding Adults?	Policy does not directly/specifically deal with safeguarding of adults, but will ensure that where
	Yes No No	manual handling operations are required; this is carried out in a safe and effective manner so as not to harm service users.
3.9	Will the policy or service etc. have an impact on Safeguarding Children?	Same as above.
	Yes 🗌 No 🗌	
3.10	Will the policy or service etc. have an impact on Domestic Violence?	
	Yes ☐ No ⊠	
3.11	Will the policy or service etc. have an impact on Human Rights?	
	Yes ☐ No ⊠	
4.	Monitoring and Review	
4.1	How will the effects of the policy or service be monitored to ensure that it addresses the needs of all groups?	Regular monitoring will be undertaken by the Health and Safety Committee through regular reports on incidents and training uptake for example. All services are expected to undertake an annual audit using the manual handling self audit pro-forma assessing key elements of the policy, such as completion/undertaking of appropriate risk assessments and implementation of actions to address risks, staff training and competency. A summary report of the outcome of these audits will be reported to the Health and Safety Committee an annual basis.
4.2	Who will be responsible for monitoring and reviewing this policy/service etc?	The effectiveness of this policy will be monitored by the Health & Safety Committee and will be subject to formal review every three years or sooner if warranted, for example in light of new legislations or changes in Trust's arrangements.
4.3	When will the policy/service etc. be reviewed next?	Formal review due in March 2021

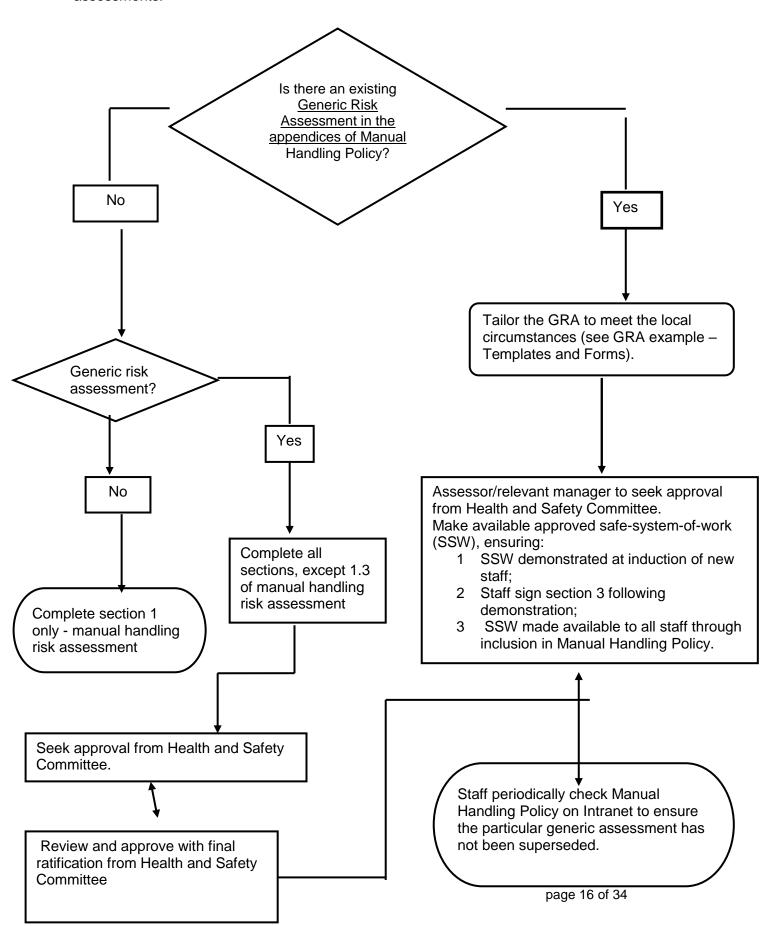
5.	. The findings of the analysis (tick appropriate check box)			
	Findings from the analysis	Explanation	Notes	
	No major change Tick this box if you do not intend to make any changes to the policy or service etc.	Your analysis demonstrates that the policy or service plans are robust and there is no evidence for discrimination.	If this conclusion is reached, remember to document the reasons for this and the information you used to make this decision. It is also useful to have your analysis quality checked, by a member of the equality team.	
	The policy/service is to be amended Tick this box if you have identified some changes that need to be made or have been made to the policy or service.	This involves taking steps to remove barriers or to better advance equality. It can mean introducing measures to mitigate the potential effect such as 'Positive Action'.	Remember that it is lawful under the Equality Act to treat people differently in some circumstances.	
	Continue the policy or service Tick this box if you do not intend to make any changes because any potential discrimination can be lawfully justified.	This means adopting your proposals, despite any adverse effect or missed opportunities to advance equality, provided you have satisfied yourself that it does not unlawfully discriminate.	It is objectively justified, it is particularly important that you record what the objective justification is for continuing this policy, and how you reached this decision.	
	Stop and remove the policy or planned service Tick this box if it has been found that the policy/service will be unlawful if it goes ahead.	If a policy or service shows unlawful discrimination it must be removed or changed.	For guidance on what is unlawful discrimination, refer to the Equality and Human Rights Commissions guidance and Codes of Practice on the employment, goods and services and equal pay elements of the Equality Act.	



NHS Foundation Trust

Appendix A

The flow diagram below should be followed for producing general/generic manual risk assessments.





Appendix B. Template of Generic/General (Manual Handling Risk Assessment and Safe System of Work

Generic/General Manual Handling Risk Assessment and Safe System of Work

The purpose of a generic risk assessment is to define the parameters within which an activity can be safely carried out.

Title			

Contents

Section 1

- 1.1 Description of task and personnel involved
- 1.2 Assessment of risks when undertaking the task
- 1.3 Action plan summary (general risk assessment only)

Section 2

2.1 Safe system of work (SSW) (generic risk assessment only)

Section 3

- 3.1 Document revision record
- 3.2 Staff signature record sheet

Section 1

1.1 Description of task and personnel involved

Description of task (Record the precise details of the task for which the assessment applies (e.g. moving people, heavy equipment, office supplies etc.):

Personnel involved: (Identify and list all staff group likely to be involved in the task (remember to consider students and others e.g. porters, store-personnel, etc):

1.2 Assessment of risks when undertaking the task

Indicate by noting Yes or No as applicable to highlight whether or not the particular activity is required in the MH activity.

Record the specific risks and measures to manage identified issues in columns three and four respectively.

Factor	Yes/No	Identify any problems	Possible Solutions		
Does the <u>T</u> ask involve					
Stooping?					
Excessive pulling/pushing?					
Overreaching?					
Repetitive handling?					
Large vertical movements from the floor?					
Large carrying distances?					
Reaching upwards?					
Holding the load away from trunk?					
Twisting?					

Factor	Yes/No	Identify any problems	Possible Solutions		
Individual capabilities: Does the task:					
Require co-operation between					
more than one individual?					
Result in					
pain/fatigue/weakness?					
Result in					
pain/fatigue/weakness that is					
variable during the day?					
Require unusual capabilities					
(strength, height, age etc.)?					
Constitute a hazard to those					
with health problem?					
Constitute a problem to those					
who are pregnant?					
Requires special information					
and or training?					
Require personal protective					
equipment?					
Have implications for cultural					
beliefs?					
Have implications for those					
with behavioural difficulties?					

Factor	Yes/No	Identify any problems	Possible Solutions
		Is the <u>L</u> oad…?	
Heavy?			
Bulky/unwieldy?			
Difficult to grasp? (e.g. no conventional hand holds)			
Unsteady and or unpredictable?			
Harmful? (e.g. sharp, hot, contaminated, patient behaviour)			

Factor	Yes/No	Ident	ity any proble	ems	Possibl	e Solutions
	<u>E</u> nvironme	ent or	Equipment:	Are ther	e	
Any obstructions?						
Variations in working lev	els?					
Poor lighting?						
Inadequate equipment?						
Inadequate attachments	?					
Inadequate knowledge of equipment?	of					
Constraints or posture (i restricted space, low wo surface etc.)?						
Strong air movements?						
Hot, Cold or humid conditions?						
	Action				By Whom	By When
Name of assessor:			Designation:			
Signature: Review Date:			Date: Dept./Ward/S	\		
Treview Bate.			Dopt./ Wara/C	or vico.		
Additional comments/as staff member is reasonabl						area, such as
						_

Section 2 2.1 Safe system of work

Task:

This section will document the conditions/parameters based on the findings of the risk assessment under which it is reasonably safe to undertake the task/activity.

This risk assessment and safe system of work is fit for purpose when the following conditions are met: Examples:

Examp	65.
1	The staff member is wearing appropriate clothes, shoes e.g. no trailing sleeves, scarves etc., that could become entangled in the equipment and has flat, supportive shoes with non-slip soles and has no long fingernails
2	The staff member is reasonably fit and has no health issues (e.g. back problems)
3	A pregnant staff member has carried out a New and Expectant Mother Risk Assessment
4	Adequate number of staff are present to carry out the transfer
5	Staff participating have had appropriate training
6	Child and parent/carer have given consent
7	That the hoist is not being used to transport over a significant distance
8	Hoists and slings are suitable for the task, appropriately cleaned between clients to infection control requirements, properly maintained and free of defects or missing parts
9	The tone of the child has been normalised or stretching done before the child is positioned.
10	Any therapy recommendations for sensory difficulties or tone abnormalities are addressed/carried out before positioning the child.
11	This safe system of work covers generic risks only and an additional specific risk assessment may be required if the environment or child present additional risks
12	Full assessment has been carried out using the MDT Seating Assessment Form, or Education Manual Handling Risk Assessment Form, to include: ▶ child's weight and height ▶ child's communication ▶ child's ability to cooperate, follow instructions, behaviour during transfers ▶ physical considerations e.g. increased tone, difficulty to position, involuntary movements based on this and the Manual Handling Operations Regulations (1992), the manual handling of children weighing over 10 Kg (for men) and approximately 7 Kg (for women) presents some risk. Few fit, well-trained people can lift weights greater than these even when all conditions are ideal. Therefore any child who weighs more than these limits, or who weighs less but is assessed to have specific risks, should be transferred using a hoist



If the conditions are not all met or the staff member has any concerns regarding the task, the individual, the load or the environment s/he must contact her/his supervisor before undertaking the task.

F	Preparation - Plan the	e move	
	Movement		_
	Movement		
Safe system of work approved b	NV	Date	
Daie System of Work approved b	, y	Date	

Section 3

3.1 Document revision record

Version Number	Description of change(s)	Reason for change	Author	Date

Services that do not have existing systems to ensure that staff are aware of and adhere to this Generic Risk Assessment and Safe System of Work should use this section, a copy of which should be kept or displayed in the most appropriate place for that service.

3.2	Staff signature record sheet
	read the generic manual handling risk assessment and safe system of work regarding I understand and am able to carry out the specified instructions.

Version number	Staff name	Signature	Date

Please initial and date following any changes or revisions to the document.



NHS Foundation Trust

Moving and Handling Self Audit Tool for Services

Service:	Service/ward Manager:
Directorate:	Director:
Date:	Auditor:

All 'Nos/NAs (not applicable)' must have a corresponding action/comment to explain the NA or address the deficit, recorded in the last column.

		Yes	No	Proposed Actions/Comments		
1.	Policies and procedures					
1.1	Staff aware of and know how to access the Manual Handling policy.					
1.2	Staff have easy access to relevant safe system of work (SSW) e.g. in a folder.					
1.3	Staff aware of and have easy access to all relevant generic risk assessments (GRAs).					
2	Manual hand	lling ris	k ass	essments		
2.1	Risk assessment completed where there is risk of injury.					
2.2	Appropriate action plan completed for risk assessment					
2.3	Risk assessments and action plans are reviewed periodically					
3.	Manual handling related in	cident	repor	ts during last 12 months		
3.1	Staff aware of the procedure for reporting incidents.					
3.2	Incidents are fully investigated within the given timeframe					
3.3	Evidence of feedback given to staff					
3.4	Relevant team e.g. OH/Datix/Health and Safety Committee contacted for further advice					
4	Dotiont he	ndling	2000	coment		
4. 4.1	MH plan completed for all clients with		a558	Sometic		
	moving and handling needs.					
4.2	Handling methods, staff numbers and					
	equipment to be used are documented in the care plan					
⊿ 3	MH assessment is undated as required					

5.	Equipment		
5.1	Equipment is suitable for the task		
5.2	Sufficient equipment available		
5.3	Information available on the availability and safe use of equipment		
5.4	Staff trained in the use and operation of equipment		
5.5	Regular maintenance and inspection of equipment		
5.6	Defective equipment clearly marked and taken out of operation		

6.	Training						
	Training Type	Total staff to be trained	Total staff trained in year	% trained	Proposed action		
6.1	Staff competent to undertake relevant non-clinical manual handling tasks						
6.2	Staff competent to undertake relevant clinical MH tasks.						
6.3	Staff locally inducted (MH induction checklist (completed and signed form).						

7. <u>Action plan</u>

Action required	By Whom	Implementation Date

RISK ASSESSMENT TITLE:	Lifting limbs when apply	ifting limbs when applying or changing dressings in the community						
NAME & TITLE OF PERSON COMPLETING ASSESSMENT:	Wendy Attew, Senior Movi and Handling Consultant a Sharon Wood, Director of Safety Services	DIRECTORATE:	Community Health Newham.					
WARD/ UNIT/TEAM:	District Nursing Service	ASSESSMENT APPROVED BY :						
SERVICE:	Community	SERVICE DIRECTOR APPROVAL:						
DATE OF ASSESSMENT:	14 June 2019	If relevant, name of person being assessed:						
CURRENT PO	SITION	GOING FORWARD						
Identify who may be affected What cu controls	s are in o mitigate	FURTHER ACTION REQUIRED • What additional controls / measures can be introduced? • What actions will be taken to further mitigate the risk?	FOR REVIEW DATE ETING FOLLOWING HER FURTHER ACTION Score remains as in the Current Pisk Pating					

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Taking equipment to	Staff follow	3	3	9	Provide trolley bags				
patient's homes.	existing policies				for transporting				
1.	and procedures.				equipment, clinical				
Staff may suffer	Safe System of				waste etc.				
musculoskeletal injury									
or exacerbate an	for 'Taking out								
existing health	Small Equipment								
condition from carryin									
equipment from car to									
the patient's home.	for 'Manual								
Parking is not always	Handling'.								
nearby. Some may	riarianing .								
have to use public	Staff are given								
transport.	moving and								
Potential for multiple	handling training								
patients to be seen in	(with annual								
one day.	refreshers).								
one day.	Torrositors).								
	Some equipment								
	is delivered								
	directly to the								
	patient's home.								
	pationt o nomo.								
	Staff park as								
	near to the								
	patients home as								
	possible.								
	poddibio.								
	Occupational								
	Health and / or								
	General								
	Practitioner								
	advise on pre-								
	existing								
	conditions (back								
	problems, knee								
	problems								
MH Policy V 2.4 March	2018 pregnancy etc.).								28
	programoy oto.).								
			1			I .	l .	1	

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		_						
Lifting the limb for	Staff follow existing	3	3	9	Provide specific postural			
dressing.	policies and				training for staff who dress			
	procedures.				limbs.			
Staff may have to lift limb								
into position which could	Staff are given							
involve stooping, bending,	moving and							
reaching, twisting,	handling training							
pushing and pulling.	(with annual							
	refreshers).							
Staff may sustain a	,							
musculoskeletal injury or	Staff use							
exacerbate an existing	appropriate							
health condition. Potential	equipment e.g. two							
for multiple patients to be	footstools,							
seen in one day.	1001010010,							
occir iii ciic day.	Patient is							
Infection control issues if	encouraged to							
limbs are weeping,	move							
infected etc.	independently.							
illiected etc.	independently.							
	Help is sought from							
	carers, family, other							
	healthcare							
	professionals if they							
	are present.							
	are present.							
	Occupational							
	Health and / or							
	General Practitioner							
	advise on pre-							
	existing conditions							
	(back problems,							
	knee problems,							
	pregnancy etc.).							
	programoy oto.j.							
	Glove and aprons							
	used. Surfaces							
MH Policy V 2.4 March 2018	wiped as							30
	appropriate. Clinical							
	waste disposed of							
	safely.							

Applying / removing the dressing.	Two footstools used per patient (one for leg and one for staff to sit on). If patient has a profiling bed it is raised to the appropriate height either to dress limb while standing or seated. If patient has a domestic bed, the height of the footstool or chair that staff are seated on is adjusted appropriately. Limb raised on additional support (block/s or pillows) if required. If patient has a reclining chair, height of leg rest may be adjusted and use additional support if required. Staff adjust their footstool as required.	3	3	Φ	Ensure staff are aware of procedure for ordering extra footstools if required (two allowed per patient, quick turnaround - usually within 48 hours). Order blocks if required. If a profiling bed is available, consider elevating the leg section of the bed to raise the limb so that the knee is bent at a right angle (to aid easy access).				
MH Policy V 2.4 March 2018	If patient has a non- reclining/non- adjustable chair, limb placed on one footstool and staff adjust their footstool or chair. Use additional							31	

Review Date	Assessment Approved by: (Name and post held)	Date:	
Review Date	Assessment Approved by: (Name and post held)	Date:	
Review Date	Assessment Approved by: (Name and post held)	Date:	
Review Date	Assessment Approved by: (Name and post held)	Date:	
Review Date	Assessment Approved by: (Name and post held)	Date:	
Review Date	Assessment Approved by: (Name and post held)	Date:	

SAFE SYSTEM OF WORK FOR LIFTING LIMBS WHEN APPLYING OR CHANGING DRESSINGS IN THE COMMUNITY

This risk assessment and safe system of work is fit for purpose when the following conditions are met:

1	Staff are trained in the practice of moving limbs safely, safe working postures and the correct use of equipment. Staff are aware of the appropriate manual handling policies and protocols.
2	The staff member is reasonably fit and has no health issues.
3	A pregnant staff member has carried out a New and Expectant Mother Risk Assessment.
4	Adequate number of staff are present to carry out the transfer (CQC requirement).
5	This safe system of work covers generic risks only and an additional specific risk assessment may be required if the environment or patient present additional risks (see note).
6	The staff member is wearing appropriate clothes, shoes e.g. no trailing sleeves, scarves etc, that could become entangled in the equipment and has flat, supportive shoes with non-slip soles and has no long fingernails.
7	Patient/Carer have given consent.
8	Appropriate equipment is available and used – e.g. adjustable-height equipment (kneeling stool), limb lifter/limb support (wedges or

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	pillows), Hoist with limb support (limb sling), sliding sheets and lifting cushions.
9	Patient is treated in a bed or on a chair.

Note: If the conditions are not all met, or the staff member has any concerns regarding the task, the individual, the load or the environment s/he must contact her/his supervisor before undertaking the task. Where staff have undertaken a manual handling assessment that identifies problems that are complex, and beyond their experience or expertise or where they encounter problems in procuring essential equipment, the Health and Safety Committee should be alerted.

Safe System of Work approved by:

Date:

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