



Manual Handling Policy

This procedural document supersedes: CORP/HSFS 4 v.7 - Manual Handling Policy



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Amendment Form

Please record brief details of the changes made alongside the next version number. If the procedural document has been reviewed **without change**, this information will still need to be recorded although the version number will remain the same.

Version	Date Issued	Brief Summary of Changes	Author
Version 8	February 2022	Reviewed with changes: <ul style="list-style-type: none"> • Duties and Responsibilities revised in relation to manual handling equipment • Team/individual titles updated • Update to process for manual handling risk assessments • Changes to training and monitoring of compliance 	Nicola Vickers Amanda Day
Version 7	June 2018	Reviewed with changes: <ul style="list-style-type: none"> • Condensed to avoid duplication of information in different sections • Team/individual titles updated in line with trust structures • Update to process for manual handling risk assessment • Equipment section added • Changes to training and monitoring of compliance • Updated associated trust procedural documents 	Nicola Vickers Amanda Day
Version 6	October 2015	Reviewed with minor changes: <ul style="list-style-type: none"> • Associated documents updated • Added Equality Impact Assessment form as appendix 3 • References updated • Monitoring and Compliance updated 	Janet Scott

Version 5	April 2012	<ul style="list-style-type: none">• Updated in line with the NHS Litigation Authority guidance.• Duties and Responsibilities revised and updated.• Added a section on Definitions.• Re-wording throughout for better clarity.• Training/Support updated with time frames added.• Monitoring and Compliance updated• Manual Handling Guidelines now available on the Intranet.	Janet Scott
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1 INTRODUCTION

The Manual Handling Operations Regulations (MHOR) came into force in 1993. In 2004 the Health and Safety Executive produced updated guidance to support these regulations which promote the need for an ergonomic approach in assessing all hazardous manual handling operations to determine the risk of injury. These assessments should in turn point the way to correct and safe manual handling. The Regulations also identify specific responsibilities of both employer and employee including the provision of:

- systems of work that are safe and without risk to health
- a safe working environment
- safe equipment
- Information, training and supervision of staff.

2 PURPOSE

To ensure the safety and welfare of its employees, and members of the public, the Trust is committed to ensuring that the requirements of the Manual Handling Operations Regulations (MHOR) are implemented and will:

- avoid hazardous manual handling so far as is reasonably practicable.
- assess hazardous manual handling operations which cannot be avoided.
- take action to remove or reduce any risk of injury as a result of manual handling so far as is reasonably practicable.
- identify the weight of the load and/or the weight distribution of the load where it is reasonably practicable to do so.

3 DUTIES AND RESPONSIBILITIES

3.1 Chief Executive

The Chief Executive has overall responsibility for ensuring the implementation of the policy and will delegate responsibility to ensure that the Trust meets its statutory obligations.

3.2 Executive Directors, Divisional Directors, Divisional Directors of Operations and Matrons

Responsible for ensuring provision of resources and skilled staff to implement the policy within the wards and departments under their control and where 'high/extreme' risk Manual Handling has been identified; work with the Manual Handling Services team to develop appropriate action plans.

3.3 Ward/Department Managers

Responsible to their Director for the implementation of the Manual Handling Policy within their area of responsibility and, should ensure:

- All employees are made aware of the requirements of the Manual Handling Operations Regulations, and their duties within the Trust's Manual Handling Policy and the Care of the Larger Person Policy - CORP/HSFS 23.
- Safe systems of work are established and maintained.
- Training and Education is informed of any new starter and a date for induction training is arranged. In addition to ensure all existing staff undertake regular updates in line with the Core Skills Training Framework recommendations. (See Training and Support).
- Manual handling risks are assessed and subsequent action plans are developed and action taken to eliminate or reduce any risks identified (See 4.2 Risk Assessment).
- All Manual Handling related incidents/injuries are reported in accordance with Trust incident reporting procedures.
- Managers inform Manual Handling if any training required in new equipment.

3.4 Ward/Department Staff

The Manual Handling Operations Regulations (MHOR) requires all employees to 'follow safe systems of work as laid down by their employer' and in addition ensure they are:

- Aware of & comply with the requirements of the Manual Handling Operations Regulations, and their duties within the Trust's Manual Handling Policy and the Care of the Larger Person Policy - CORP/HSFS 23.
- Are aware of the manual handling risk assessments completed for their ward or department and the action to be taken to reduce or eliminate risks (See 4.2 Risk Assessment).
- Report any change in circumstances which may require a manual handling assessment to be revised.
- Undertake and comply with all Manual Handling training including adhering to the Health and Safety Policy – CORP/HSFS 1 and the Dress Code and Uniform Policy - CORP/EMP 20.
- Ensure they are physically able to carry out manual handling activities and report any ill health, injury, pregnancy, or anything that might affect their ability to handle people or loads safely.
- Report faulty equipment, hazardous situations and any manual handling incidents/injuries in accordance with Trust incident reporting procedures.
- Only to use equipment that they are competent/trained to use and to request training/additional training if required.

3.5 Manual Handling Workplace Assessors

Responsible for providing manual handling advice, support and supervision in the workplace. Support the Manual Handling Services to ensure techniques are carried out in clinical areas as they are delivered in training to contribute to incident reduction.

3.6 Clinical Education Manager, Manual Handling Advisor & Manual Handling Trainers

Responsible for providing a specialist source of advice and support on all manual handling issues including national guidance and recommendations leading to development of local policies and procedures, completion of risk assessments and purchase of appropriate equipment. Ensure the provision of a comprehensive training programme to meet the needs of all staff groups in line with individual training needs analysis.

4 PROCEDURE

The movement and handling of either people or inanimate loads should always be carried out in accordance with training and best practice. Full details of other relevant guidance documents can be found on the Manual Handling Services intranet pages.

PATIENTS LACKING CAPACITY

Sometimes it will be necessary to provide care and treatment to patients who lack the capacity to make decisions related to the content of this policy. In these instances staff must treat the patient in accordance with the Mental Capacity Act 2005 (MCA 2005).

- A person lacking capacity should not be treated in a manner which can be seen as discriminatory.
- Any act done for, or any decision made on behalf of a patient who lacks capacity must be done, or made, in the persons Best Interest.
- Further information can be found in the MCA policy, and the Code of Practice, both available on the Extranet.

There is no single definition of Best Interest. *Best Interest is determined on an individual basis. All factors relevant to the decision must be taken into account, family and friends should be consulted, and the decision should be in the best interest of the individual. Please see S5 of the MCA code of practice for further information.*

4.1 Risk Assessment

All staff within the organisation must follow risk assessments in place for manual handling tasks both people and loads. Formal Risk Assessments should be completed using the Trusts

Manual Handling risk assessment guidance & templates. (Please see Manual Handling intranet pages). Employees carrying out formal manual handling risk assessments must receive appropriate training and all completed risk assessments must be accessible to all employees (and where applicable volunteers). In addition to following formal risk assessments staff are required to perform informal or dynamic (on the job) risk assessments, to ensure their safety and that of other service users. Where a risk is identified that requires formal assessment this should be identified to the ward/department manager

Detailed load handling and generic risk assessment forms should be stored at a location accessible to all appropriate staff with a Summary of all Manual Handling Activities – Loads (inclusive of low-risk activities). For each activity identified, a risk rating score should be generated. Any activity with a risk rating of 4 (moderate risk) or above must include a more detailed assessment with action plan (Please see full guidance in Risk Identification, Assessment and Management Policy – CORP/RISK 30).

All designated staff must review their areas risk assessments and summary sheets on an annual basis and share any changes with staff. The ward/department manager is responsible for gathering signatory evidence of this. Some assessments may need to be reviewed or added more frequently between the annual reviews in the event of an incident or change in circumstances.

Individual people handling assessments should be carried out within 24 hours of admission and reviewed if new information becomes available; there is a change in condition or weekly. In exceptional circumstances, where a patient has a prolonged admission and their manual handling requirements are not expected to change, the assessment review period may be increased provided there is sufficient documentation in the medical/nursing records to support this.

4.2 Equipment

The trust will ensure that all staff are provided with adequate information, training and supervision as appropriate; so that they may safely use any manual handling equipment relevant to their role.

Equipment for safe manual handling must be available and in good working order and employees are responsible for reporting faulty equipment. To comply with safe systems of work which includes use of equipment, staff are encouraged to check manual handling equipment before and after use to ensure safety, replenish supplies and recharge batteries.

As a member of the Medical Equipment Management Group the Clinical Education Manager will work with all relevant wards/depts to ensure the availability of appropriate manual handling equipment across the trust. Equipment audits will be conducted by both the Medical Technical Services and Manual Handling Services Teams as needed and the results of these audits will be presented to the Patient Safety Review Group and Health & Safety Committee.

5 TRAINING/SUPPORT

Manual Handling support for all Trust staff is available by contacting Manual Handling Services. If support is required out of hours, please contact your line manager or the clinical site team for advice.

All new Trust employees must undertake Manual Handling training relevant to their needs within 3 months of their start date. Until this time, manual handling techniques should only be performed under suitable instruction and supervision of a member of staff who has been trained.

Both people handlers and load handlers should have a basic understanding of the relevant underpinning knowledge, which is the framework for safe back care and manual handling, and this information is contained in the Manual Handling chapter of the SET book. In addition, the Trust will provide appropriate and sufficient face to face classroom-based training in line with Core Skills Training Framework recommendations for some staff groups. Levels of training required can be identified by accessing the individual compliance matrix within Electronic Staff Records. More detailed information can be found on the trust intranet under SET or by contacting the Education Centre. Where applicable, department specific in situ training will also be offered.

Training and Education are responsible for updating individual staff records of attendance at Manual Handling on the Oracle learning management (OLM) system. The Clinical Education Manager supported by the Manual Handling Advisor will review training levels on an annual basis following feedback from workplace assessments and make recommendations/changes accordingly.

Students attending on placement from educational establishments must have received adequate manual handling training from the educational establishment to enable them to carry out tasks within the scope of the experience they require whilst in the Trust.

Please note: The training requirements of staff will be identified through a learning needs analysis (LNA). Role specific education will be co-ordinated/ delivered by the topic lead. Alternatively, training may be accessed via an approved e-learning platform where available.

6 MONITORING COMPLIANCE WITH THE PROCEDURAL DOCUMENT

What is being Monitored	Who will carry out the Monitoring	How often	How Reviewed/Where Reported to
Training attendance & non-attendance	Clinical Education Manager, Directorate Education Leads & Managers	Monthly	All training is recorded on OLM & monthly reports generated. This report is made available to all Directors and Heads of Nursing, Midwifery & Therapies.
Completion of Manual (Load) Handling Risk Assessments	Ward/Department Managers Manual Handling Team	At least Annually	Ward /dept managers to ensure all Load Manual Handling risk assessments are completed, reviewed, acted upon. Evidence staff have read them should be gathered and submitted. Audit carried out & results shared with Wards/Depts through the Health & Safety Committee.
Completion of the Patient Handling Assessment tool	Ward/Department Managers	Monthly	Ongoing review of completion of digital assessments
Manual Handling incident reviews	Manual Handling Services will monitor and where necessary contribute to all Manual Handling Incident reports	Monthly	Monitor and, where necessary contribute to, all Manual Handling incident investigations and provide a six-monthly report to the Health & Safety Committee.

7 DEFINITIONS

Formal risk assessment – when a risk assessment is written using the Trusts combined risk screening documentation for people handling and risk assessment templates provided by Manual Handling Services for Load handling.

Informal risk assessment – This is when staff will use thought processes to quickly establish whether a formal risk assessment is required.

Load - a discrete moveable object.

Manual Handling Operations - Means any transporting or supporting of a load by hand or bodily force, including the lifting, putting down, pushing, pulling, carrying or moving thereof.

People Handlers - Staff involved in the moving & handling of patients.

8 EQUALITY IMPACT ASSESSMENT

The Trust aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are disadvantaged over others. Our objectives and responsibilities relating to equality and diversity are outlined within our equality schemes. When considering the needs and assessing the impact of a procedural document any discriminatory factors must be identified.

An Equality Impact Assessment (EIA) has been conducted on this procedural document in line with the principles of the Equality Analysis Policy (CORP/EMP 27) and the Fair Treatment for All Policy (CORP/EMP 4).

The purpose of the EIA is to minimise and if possible remove any disproportionate impact on employees on the grounds of race, sex, disability, age, sexual orientation or religious belief. No detriment was identified. **(See Appendix 1).**

9 ASSOCIATED TRUST PROCEDURAL DOCUMENTS

This policy should be read in conjunction with the Trust's:

Risk Identification, Assessment and Management Policy - CORP/RISK 30

Statutory and Essential Training (SET) Policy - CORP/EMP 29

Dress Code and Uniform Policy - CORP/EMP 20

Health and Safety Policy - CORP/HSFS 1

Incident Management Policy - CORP/RISK 33

Care of the Larger Person Policy - CORP/HSFS 23
 Medical Equipment Training for Trust Staff - CORP/RISK 2
 Fire Safety Policy - CORP/HSFS 14
 Hand Hygiene Policy - PAT/IC 5
 Pressure Ulcer Policy - PAT/T 3
 Mental Capacity Act 2005 Policy and Procedure, including Deprivation of Liberty Safeguards (DoLS) - PAT/PA 19
 Privacy and Dignity Policy - PAT/PA 28
 Fair Treatment for All Policy - CORP/EMP 4
 Equality Analysis Policy - CORP/EMP 27

10 DATA PROTECTION

Any personal data processing associated with this policy will be carried out under 'Current data protection legislation' as in the Data Protection Act 2018 and the UK General Data Protection Regulation (GDPR) 2021.

For further information on data processing carried out by the trust, please refer to our Privacy Notices and other information which you can find on the trust website:
<https://www.dbth.nhs.uk/about-us/our-publications/information-governance/>

11 REFERENCES

HSE (1974) Health and Safety at Work etc. Act 1974 HMSO

HSE (2000) Management of Health and Safety at Work. Management of Health *and Safety at Work Regulations 1999 Approved Code of Practice L21 revised 2000*. HSE Books

HSE (2004) Manual Handling. Manual Handling Operations Regulations 1992 (as amended) Guidance on Regulations L23 3rd ed. 2004. HSE Books

Guidance for safer handling during resuscitation in healthcare settings. Working group of the Resuscitation council (UK) November 2009.

Department of Constitutional Affairs Mental Capacity Act (2005): Code of Practice, 2007
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/497253/Mental-capacity-act-code-of-practice.pdf

APPENDIX 1 – EQUALITY IMPACT ASSESSMENT PART 1 INITIAL SCREENING

Service/Function/Policy/ Project/Strategy	CSU/Executive Directorate and Department	Assessor (s)	New or Existing Service or Policy?	Date of Assessment
Manual Handling Policy - CORP/HSFS 4 v.8	Manual Handling Services, Training and Education, Education & Research	Nicola Vickers	Existing Policy review	February 2022
Who is responsible for this policy? Manual Handling Services, Training & Education, Education & Research				
Describe the purpose of the service / function / policy / project/ strategy? To ensure the safety of staff & patients				
Are there any associated objectives? Manual Handling Operations Regulations (1992) are implemented				
What factors contribute or detract from achieving intended outcomes? – Staff Compliance & Availability of Equipment				
Does the policy have an impact in terms of age, race, disability, gender, gender reassignment, sexual orientation, marriage/civil partnership, maternity/pregnancy and religion/belief? NO				
If yes, please describe current or planned activities to address the impact [e.g. Monitoring, consultation] –				
Is there any scope for new measures which would promote equality? Monitor implementation of Policy in line with Equality Legislation e.g. Monitor Incidents/Complaints				
Are any of the following groups adversely affected by the policy?				
Protected Characteristics	Affected?	Impact		
Age	NO			
Disability	NO			
Gender	NO			
Gender Reassignment	NO			
Marriage/Civil Partnership	NO			
Maternity/Pregnancy	NO			
Race	NO			
Religion/Belief	NO			
Sexual Orientation	NO			
Provide the Equality Rating of the service / function /policy / project / strategy – tick outcome box				
Outcome 1 ✓	Outcome 2	Outcome 3	Outcome 4	
<i>*If you have rated the policy as having an outcome of 2, 3 or 4, it is necessary to carry out a detailed assessment and complete a Detailed Equality Analysis form in Appendix 4</i>				
Date for next review: February 2025				
Checked by: Sean Tyler		Date: 1 February 2022		