

TRUST-WIDE POLICY DOCUMENT

Moving and Handling Policy

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Lead Author(s):	Head of Health Safety Fire and Security

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2020 – Version 6

*Striving for perfect care
and a just culture*

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MOVING AND HANDLING POLICY

Further information about this document:

Document name	Moving and Handling Policy HS17
Document summary	This policy applies to all moving and handling tasks, whether involving service users or inanimate loads. The purpose of which is to prevent injury and to manage the potential risk of moving and handling tasks can present to staff and service users.
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To be read in conjunction with	SA02 Risk management policy and strategy SA03 Reporting, management and review of adverse incidents SA07 Health, Safety and Welfare HR05 Learning and Development.
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Version 1	Presented to executive committee for approval by Manual Handling Adviser	2011
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Version 6	Consultation draft, circulated to relevant safety committees for approval	January 2020
Version 6	Changed to HS17 (SA11 removed)	February 2020

SUPPORTING STATEMENTS

this document should be read in conjunction with the following statements:

SAFEGUARDING IS EVERYBODY'S BUSINESS

All Mersey Care NHS Foundation Trust employees have a statutory duty to safeguard and promote the welfare of children and adults, including:

- being alert to the possibility of child / adult abuse and neglect through their observation of abuse, or by professional judgement made as a result of information gathered about the child / adult;
- knowing how to deal with a disclosure or allegation of child /adult abuse;
- undertaking training as appropriate for their role and keeping themselves updated;
- being aware of and following the local policies and procedures they need to follow if they have a child / adult concern;
- ensuring appropriate advice and support is accessed either from managers, *Safeguarding Ambassadors* or the trust's safeguarding team;
- participating in multi-agency working to safeguard the child or adult (if appropriate to your role);
- ensuring contemporaneous records are kept at all times and record keeping is in strict adherence to Mersey Care NHS Foundation Trust policy and procedures and professional guidelines. Roles, responsibilities and accountabilities, will differ depending on the post you hold within the organisation;
- ensuring that all staff and their managers discuss and record any safeguarding issues that arise at each supervision session

EQUALITY AND HUMAN RIGHTS

Mersey Care NHS Foundation Trust recognises that some sections of society experience prejudice and discrimination. The Equality Act 2010 specifically recognises the *protected characteristics* of age, disability, sex, race, religion and belief (or lack thereof), sexual orientation, gender reassignment, pregnancy and maternity and marital and civil partnership status. The Equality Act also requires regard to socio-economic factors.

The trust is committed to promoting and advancing equality and removing and reducing discrimination and harassment and fostering good relations between people that hold a protected characteristic and those that do not both in the provision of services and in our role as a major employer. The trust believes that all people have the right to be treated with dignity and respect and is committed to the elimination of unfair and unlawful discriminatory practices.

Mersey Care NHS Foundation Trust also is aware of its legal duties under the Human Rights Act 1998. Section 6 of the Human Rights Act requires all public authorities to uphold and promote Human Rights in everything they do. It is unlawful for a public authority to perform any act which contravenes the Human Rights Act.

Mersey Care NHS Foundation Trust is committed to carrying out its functions and service delivery in line with a Human Rights based approach and the FREDAs principles of **F**airness, **R**espect, **E**quality **D**ignity, and **A**utonomy

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1. PURPOSE AND RATIONALE

- 1.1 Manual handling injuries are part of a wider group of musculoskeletal problems. In 2015 an estimated 9.5 million working days were lost to work-related musculoskeletal disorders (MSDs), this represents 40% of all days lost due to work related ill-health (Health & Safety Executive HSE 2015). In the Health Service, manual handling injuries account for 44% of absence from work through sickness (HSE) 2015).
- 1.2 The Health and Safety at Work Act 1974 (Section 2) and Management of Health and Safety at Work Regulations 1999 (Regulations 10 and 13), require employers to provide employees with health and safety information, training and instruction with updates as required. This should be supplemented as necessary, with more specific information, training and updating on manual handling injury risks and prevention. This should be part of the steps to reduce risk required by the Manual Handling Operations Regulations 1992 (as amended 2002) Regulation 4(1)(b)(ii).
- 1.3 As an NHS organisation, Mersey Care NHS Foundation Trust will comply with the above legislation to help ensure the safety of their staff, patients and others.

2. OUTCOME FOCUSED AIMS AND OBJECTIVES

- For the Trust to comply with relevant legislation.
- To ensure a suitable framework exists within the organisation, to manage risks associated with manual handling activities.
- To ensure that suitable arrangements are in place for systematic audit for all manual handling activities.
- To ensure that those with managerial responsibility have appropriate knowledge and skills to be able to identify, assess, reduce and control risks arising from manual handling activities within the Trust.
- To ensure that all staff have the relevant skills and knowledge of safe manual handling working practices, by accessing and attending appropriate training prior to commencing workplace activities.
- To ensure the safety of patients and staff is not compromised which may include the limiting/withdrawing of handling activities.
- To ensure that there is a system in place to investigate manual handling accidents, incidents, near misses, and that appropriate action is taken to prevent reoccurrence.
- To ensure that there is a system in place for staff to access advice and support from the occupational health services, in conjunction with the manual handling advisors, in the event of musculoskeletal disorders and or absence from work.
- To ensure that there is a system in place to investigate manual handling accidents, incidents and near misses and that appropriate action is taken to prevent reoccurrence.

3. SCOPE

- 3.1 The scope of this policy is to cover all employees or other persons who may have occasion to visit or receive care on within all Trust premises, or who may be affected by the actions of Trust employees whilst carrying out their duties.
- 3.2 The Trust recognises that the handling of patients and inanimate loads presents a risk of injury to staff, service users and other people, and that The Manual Handling Operation Regulations 1992 (amended 2002) places a statutory duty on the Trust to control risks associated with the handling of loads, and where the risks are deemed significant to reduce

or eliminate those risks to employees. In complying with relevant manual handling regulations the Trust considers the total elimination of patient handling to be impracticable. A balance will be sought between the needs and ability of the patients and the safety of staff. Patients must, wherever practicable, be encouraged to assist in handling activities.

- 3.3 The Trust is committed to developing a minimal manual handling/lifting approach. It will do this in all respects to comply with manual handling legislation, and its effects, in a reasonable manner having regard to all circumstances.
- 3.4 Risk assessment and planning can eliminate or reduce identified manual handling hazards. However, where assessments indicate there is absolutely no alternative but to lift animate or inanimate loads manually, a more detailed assessment of risk and methods must be undertaken and recorded.
- 3.5 Animate loads – the manual lifting of a patient is eliminated in all but exceptional or life threatening situations. Patients are encouraged to assist in their own transfers and handling aids should be used whenever they can, in order to help to reduce risks.

Guidance concerning complex handling situations (e.g.: bariatric, pediatric, treatment handling etc) can be provided by the Manual Handling Advisor.

- 3.6 Where employees work in environments not directly controlled by this Trust (e.g. staff providing services in the community), or in a varied number of locations (e.g. Estates staff), there is an added emphasis on these persons to take special care of their own health and safety, and for that of others.

4. DEFINITIONS

Manual Handling Operations Regulations as amended (1998)	The MHOR regulations place a requirement on the employer to: <ul style="list-style-type: none"> • Avoid – the need for hazardous manual handling, so far as is reasonably practicable. • Assess – the risk to staff and clients/loads, where manual handling operation cannot be avoided. • Reduce – take appropriate steps to reduce the risk of injury to the lowest level reasonably practicable. Develop and implement safe systems of work. • Review – to take place on an annual basis, or if there has been significant changes or it is no longer valid.
PUWER	Provision and Use of Work Equipment Regulations 1998
LOLER	Lifting Operations and Lifting Equipment Regulations 1998
Manual Handling	“Manual Handling” is defined as the transporting or supporting of a load (including lifting, putting down, pushing, pulling, carrying or moving) by hand or by bodily force.
Key Worker	A member of staff who has completed a Manual Handling Key Workers course run

	by the Learning & Development (Moving & Handling) trainers approved by the Specialist Moving and Handling Advisor and has become the ward / department lead person for manual handling
RIDDOR	Reporting of injuries, Diseases and Dangerous Occurrences Regulations 2013

5. DUTIES

5.1 The Chief Executive

The Chief Executive maintains overall accountability for all matters relating to health and safety throughout the Trust. In conjunction with Trust board will delegate responsibility for the implementation of safe Moving and Handling Practices in the Trust throughout the management of the organisation.

5.2 The Trust Board

The Trust Board will:

- Ensure appropriate structures are in place to enable the Trust to fulfil its responsibilities and obligations with regards to the Manual Handling Operations Regulations 1992.
- Ensure appropriate structures and resources are in place to effectively implement this policy, committing to those financial, managerial, technological and educational resources necessary to adequately control identified risks from Manual Handling activities.

5.3 Executive Director of Communications and Corporate Governance

Is the Executive Lead for health and safety with responsibility for manual handling. The responsibility of this post is to determine the overall effectiveness of this policy including the provision of adequate resources, taking appropriate action where deficiencies are identified and reporting areas of non compliance to the Trust Board.

5.4 Directors/ Chief Operating Officers / Heads of Service/ Clinical Leads

Directors, Chief Operating Officers, Heads of Service and Clinical Leads are responsible for all aspects of health and safety of staff, patients and others in areas where they provide a service or under their control.

5.5 This includes compliance with legislation and the following:

- The implementation of this policy to ensure the effective management of manual handling.
- The identification, assessment and control of manual handling risk, in line with the Trust Risk Management Policies.
- Ensuring that equipment, premises and systems of work are safe.
- The provision of training and information to staff and others, as appropriate.
- The investigation of accidents and incidents, taking appropriate corrective action to prevent a recurrence and reporting details promptly.
- Monitoring and review of manual handling performance.

5.6 **Associate Director of Estates**

The Director of Estates is responsible for:

- Ensuring that all patient and non-patient lifting and handling equipment is adequately serviced, maintained and inspected in accordance with the Lifting Operations and Lifting Equipment Regulations.
- Maintaining accurate and appropriate records of all inspection, maintenance and service of lifting and handling equipment, ensuring that they are available for inspection as required.
- Ensuring that all personnel undertaking maintenance work on lifting equipment are trained, experienced and supervised appropriately achieve competency in the tasks that they are expected to undertake.

5.7 **Ward / Department/ Facility Managers**

All Ward and Department Managers / leads will:

- Ensure that suitable and sufficient Manual Handling Risk Assessments including 'Task' based assessments: are completed within their area of responsibility and will complete action plans, and review and maintained on a regular basis.
- Ensure where appropriate, all relevant moving and handling mobility risk assessments are completed and documented in the patient's Care plan / Action plan.
- Hold responsibility for ensuring that appropriate steps are taken to managing all moving and handling related hazards and risks within their sphere of responsibility.
- Provide staff with the necessary information, instruction and training relating to Manual Handling and provide adequate supervision to enable them to work safely.
- Ensuring that all of their staff members receive appropriate training and competency assessment in the manual handling tasks that they are reasonably foreseeably likely to undertake.
- Investigate all manual handling incidents, occurring within their area of control or reported by their staff, in accordance with the Trust's Incident reporting arrangements. The investigation will identify root causes and put measures in place to prevent a recurrence.
- Review risk assessments regularly and share the updates / changes with all staff undertaking the activities. Ensure that risk assessments and safe operating procedures are readily available for all staff to access, including any changes that have been made.
- Ensure that risk assessments are reviewed and updated accordingly following any incidents occurring.
- Notify the Head of Health and Safety and Estates, at the earliest opportunity, of any incident involving the failure of any lifting or moving and handling equipment.
- Identify and support staff willing to undertake the Key worker role, advising the Moving and Handling Advisor.

- Ward Managers will ensure individual patient moving and handling assessments and action plans are completed at the earliest opportunity and within a reasonable time frame on admission. Further ensuring that all staff are aware of the Moving and Handling Assessment Action Plan within the patient profile, before any such tasks are undertaken.
- Ensure equipment is regularly serviced maintained and in good working order.
- Records are kept of all Patient Handling Equipment on the ward / dept., where a need for more equipment is identified through the risk assessment process; decisions on appropriate equipment should be made in consultation with the Trust's Moving and Handling Advisor, staff and others who may be involved as part of this process.
- Ensure slings and attachments are inspected before use with a record kept for all thorough checks, and used only with originally specified or approved lifting equipment. Where there is a need for alternative slings which are not the original manufacturers but are compatible with the equipment a risk assessment should be carried out documenting the relevant details of sling type, size, which loops are being used for the desired patient position and the safe working load, in conjunction with the Moving and Handling Advisor. This information will be documented in the manual handling action plan.
- Lifting equipment, including slings and attachments must be visually examined before use, all defects and faulty equipment shall be withdrawn from service immediately, labelled and reported to Estates for prompt repair. All deficiencies in the provision of moving and handling equipment will be escalated to Service Managers in a timely manner.
- It is foreseeable that handling operations have to be carried out in an emergency situation, without the usual equipment. In such cases a further dynamic risk assessment must be completed to manage the increased risk situation and documented via Datix.
- Ensure that members of staff do not carry out any moving and handling tasks without first receiving the appropriate training. New members of staff will be supported by a competent member of staff for their local induction until they are deemed competent and safe to carry out tasks without supervision.

5.8 **Manual Handling Advisor/Trainer**

The Moving and Handling Advisor is the Trust's centre of expertise with regard to all matters relating to moving and handling and shall give advice and support to managers, Learning & Development (Moving & Handling) trainers and staff with regard to risk assessments, equipment and training.

5.9 The Moving and Handling Advisor shall:

- Regularly visit managers and staff throughout the Trust to ensure they understand their responsibilities within the remit of Moving and Handling and shall give added support and advice as needed.
- Participate in national and local forum groups, as training will be delivered in accordance with the arrangements agreed by the specialist advisors within this group.

- Provide advice about suitable training to managers and staff including Learning & Development (Moving & Handling) trainers, Procurement.
- Support local managers with investigations into reported Manual Handling incidents and provide a report; and to assist managers with investigations in reported manual handling incidents.
- Review the investigations relating to Moving and Handling Incidents, in order to provide advice to prevent recurrence and to disseminate learning across the Trust.
- To monitor moving and handling incidents including identification of RIDDOR incidents, identifying trends and any areas of risk to the organisation, reporting to the Health and Safety Committee and other meetings / groups as appropriate.
- To advise staff and ward / department managers about appropriate equipment needs and provision.
- To meet with ward managers at least once a year to audit, review with regards equipment, moving and handling risk assessments and competency assessment and offering advice and support as requested.
- Support the implementation of the Trust's Moving and Handling risk assessment procedure in accordance with current policy and assist managers, where necessary, to comply with their Moving and Handling duties.
- Deliver and oversee training given and ensure that the current course content is updated regularly in accordance with current evidence based best practice, from the HSE, National Back Exchange, Royal college of Nursing and Nursing Midwifery Council for training are implemented.
- Advise the Trust on any significant changes in legislation and guidance relative to Manual Handling.
- Work with the Trust Procurement team NHS Supplies, Medical Devices Group, Infection Control and other teams as appropriate to develop and update a list of standardised equipment for acquisition within the Trust. Where the need for non-standard equipment is identified, the Moving and Handling Advisor will be consulted for advice prior to procurement.
- Carry out regular monitoring and audits of wards and departments, Moving and Handling related risks and risk assessments.
- Maintain their competency to perform their specialist role, to ensure continued professional development.
- Support the provision of training for key workers and other staff as required

5.10 **Learning and Development**

The Head of Learning and Development is responsible for:

- Ensuring that relevant and appropriate moving and handling training for all staff in appropriate moving and handling techniques for patients and inanimate loads is provided across the Trust.

- Providing update training for all staff, supporting the Moving and Handling Advisor in providing moving and handling training courses and annual updates at suitably equipped venues.
- Maintaining accurate records of training and competency assessment and all relevant documentation and teaching plans.
- Providing regular reports to the Health and Safety Committee and other groups as required regarding attendance at training and competency status of all staff.
- Ensuring that competency assessments undertaken by moving & handling trainers are recorded in ESR.
- Ensure that all training provided is planned in conjunction with and under the guidance of the Moving and Handling Advisor.

5.11 **Health and Safety Advisors**

- Health and Safety Advisors shall provide advice, support and information on moving and handling issues to all staff in the absence of the Moving & Handling Advisor.
- On receipt of information from the Moving and Handling Advisor, ensure that, where appropriate, the relevant enforcing authorities are notified of injuries and ill health arising from manual handling activities at work.

5.12 **Employees, Bank/ Agency/ Volunteers and Students**

- Must ensure that they read and understand the Trust's policies regarding moving and handling, local risk assessments and safe systems of work.
- Must not undertake any moving and handling tasks unless they have undergone their induction and task specific training and assessment.
- Must not use or attempt to use any equipment that they have not received training and assessment or feel confident in the use of, but to report to their line manager, for immediate assistance and to arrange additional appropriate training.
- New staff will be supported by a 'competent' member of staff, in their local induction (in the work area), to ensure they are safe and competent in their moving and handling practice.
- Must comply with the Trust's risk management strategy and Trust policies to ensure they follow safe systems of work, by following the correct techniques, procedures, and using the appropriate equipment. If equipment is not available seek advice from the Moving and Handling Advisor.
- Must take reasonable care that they remain 'fit for work', the employee must report any illness or injury, which may make 'moving and handling' hazardous to themselves or others, to their immediate supervisor or line manager and for this information to be recorded within the Datix system.

- Attend and participate in all practical moving and handling training as detailed in the Moving and Handling Training Prospectus, relevant to their area of work. Failure to do so may result in the staff member being unable to work in the designated area or tasks until they have received the appropriate training and been assessed as competent.
- Approach all moving and handling tasks in accordance with the specific patient / task manual handling assessment. In emergency situations, carrying out an initial dynamic risk Assessment.
- Ensure patient handling mobility assessments are carried out and documented in the patients moving and handling action plan, and to review on an on-going basis and document any significant changes in patients moving and handling requirements.
- Report without delay to their immediate supervisor / manager any accident / incident / near miss relating to moving and handling, recording the incident via the Datix system.
- In the event of a staff member being referred to the Occupational Health Department in relation to harm arising from moving and handling activities or other musculoskeletal injury the staff member will attend the appointments and participate fully in the assessment process.

5.13 **Occupational Health Advisors**

Risk assessment will identify the steps needed to reduce the risk of injury, the need for staff training and the need for equipment. Moving and Handling Advisor and / or Health and Safety representatives, may provide support in carrying out the risk assessments for their ward / department.

5.14 Occupational Health Advisors shall:

- Support staff with work-related health problems and advise management on appropriate and reasonable work adjustments.
- In conjunction with Moving and Handling and Health & Safety Advisors, provide advice to managers and employees on working practices to minimise or alleviate health problems.
- Liaise with relevant other professionals and advisors to develop and monitor suitable rehabilitation programmes tailored to the employee's needs.
- Give advice to members of staff about the principles of back care and / or the care of musculoskeletal problems from which they may be suffering.
- Work in close co-operation with safety advisors, human resources staff, health and safety representatives, trainers and managers to ensure a seamless and co-ordinated approach to the prevention of moving and handling work related ill health.
- Notify the Head of Health and Safety and the Manual Handling Advisor, in a timely manner, of any incidents of occupational ill health related to, acute, chronic or degenerative, musculoskeletal injury or condition that may fall within the requirements for statutory reporting to the enforcement authorities.

6. PROCESS

6.1 Risk Assessments

6.2 It is a manager's responsibility to ensure that manual handling risk assessments are undertaken within their area of responsibility and that safe systems of work are devised, implemented and communicated to all relevant staff.

6.3 Risk assessment will identify the steps needed to reduce the risk of injury, the need for staff training and the need for equipment. Moving and Handling Advisor and / or Health and Safety representatives may provide support in carrying out the risk assessments for their ward / department.

6.4 Competent members of staff will carry out moving and handling risk assessments for individual patients, activities and tasks as appropriate. Staff from other disciplines e.g. physiotherapists and occupational therapists may also need to participate in the patient assessment process.

6.5 The risk assessments shall take into account the five key elements of the activity (TILEE / ELITE):

- Environment
- Load
- Individual Capability
- Task
- Equipment and other factors

6.6 All risks associated with non-patient moving and handling activities must be recorded and updated using the Trust risk assessment format. Refer to Appendix 1.

6.6 Assessments for patient moving and handling activities are recorded with clear and accurate information within associated care plan / documentation. Refer to Appendix 2

6.8 Where it is not possible to carry out a written risk assessment beforehand then a dynamic risk assessment must be carried out for every activity.

6.9 Action Plans and Recommendations

Following any risk assessment an action plan and recommendations must be developed by the person undertaking the risk assessment and any relevant clinical staff. This process may involve specialist advice including the Trust's Health & Safety Advisor and/or Manual Handling Lead. This action plan should be kept with the risk assessment and the author will ensure it is communicated to all those that need to be aware.

6.10 Reviewing Risk Assessments

6.11 All risk assessments will be reviewed every 12 months by the Manual Handling Advisor in consultation with Service Leads and Local Managers and updated where required. If an incident / accident occur within the period this will need to be reviewed as soon as practicable, to help reduce the risk of further incidents re-occurring.

6.12 Patient Transfers

- 6.13 The patient handling risk assessment /action plan should be transferred with the patient's notes for any interdepartmental transfers for investigations and treatments to ensure that moving handling procedures are carried out appropriately.

6.14 Human Rights (Moving and handling of people)

- 6.15 For moving and handling of people the assessment should be a balance of safe systems of work to manage the risk/s and the wishes and concerns of the service user, so that their Human Rights are protected, but also that we support them to be as independent as possible.

- 6.16 All Trust staff must use the techniques they have been taught during training as outlined below, unless specific alternative techniques have been discussed by unit staff in conjunction with moving and handling of people lead. The interventions must take into account Article 3 of the Human Rights Act.

“Everyone has the right to respect for his or her physical and mental integrity”
When using the techniques listed below or those agreed to meet the individual needs of the service user, staff have to ensure that the protected characteristics as stated in The Equality Act 2010 are being met e.g. sex or religion and belief

- 6.17 Staff must always encourage patients to remain as independent as possible and use the following agreed techniques for manual handling of patients:

- Sit to stand transfer – one / two staff with or without the use of a handling belt or other equipment
- Assisted walking – one / two staff with or without the use of a handling belt
- Sitting to sitting transfer - one / two staff with or without a transfer board, handling belt, turner, stand aid or mobile hoist
- Lying to sitting – use of a profiling bed should be considered if appropriate. Two staff with or without a slide sheet
- Repositioning in bed – two staff using a slide sheet or hoist. The slide sheet or sling is to be fitted using techniques delivered in training or on advice from Moving and Handling of Lead.
- Lateral transfer from bed to stretcher trolley – a **minimum** of 4 staff and the use of a hard transfer board (Pat Slide) and two slide sheets must be used
- Emergency handling (Falling Person) – where the service user falls towards the staff they should support the patient and lower them to the floor
- Assisting from the floor – staff must encourage the patient to get up by using the backward chaining method if they are capable and there is no clinical reason for staff to assist. If assistance is required, equipment must be used, either hoisting or emergency lifting cushion.
- Transfer with standing and raising aid (standing hoist)
- Transfer or repositioning with mobile hoist including the fitting and removing of a sling when person is lying or sitting.

- 6.18 This list is not exhaustive as additional techniques maybe required to support a service user and staff. Staff **must not** use the following transfer techniques which are considered unsafe both to the staff and the service user, unless in an emergency situation and all other approaches have been considered and only after a dynamic risk assessment has been completed by staff involved in the incident.

- Drag Lift (underarm lift)
- Orthodox Lift (Cradle lift)

- Through Arm Lift
- Australian Lift (Shoulder lift)
- Front Assisted Stand and Pivot transfer

The techniques stated above are taken from The Guide to the Handling of People 6th Edition 2011

6.19 Moving and Handling of objects

6.20 Staff must follow the advice and guidance for the handling of loads or objects:

- Loads must be handled at waist height and as close to the body wherever possible
- Use of equipment must be considered to assist with the transporting of loads, such as “sack” trolleys
- Staff must keep their head upright, spine in line (no twisting) and bend at their hips and knees when lifting a load to maintain a correct posture
- Staff must ensure they have a safe, secure grip when handling a load
- Staff must not handle loads where they have uncertainty concerning their ability.
- Staff must complete a risk assessment for manual handling of loads/objects (see Appendix 1 of this policy) where hazardous handling cannot be avoided
- All moving and handling activities that do not involve patient care should be recorded on this form
- This should identify the hazards and allow for an action plan to be formulated helping reduce the risk of injury.
- It should identify a safe system of work that staff should follow
- Once completed the form should be returned to the service manager for appropriate action
- Risk assessment documentation and safe systems of work
- should be available for all staff to see
- Risk assessments should be reviewed and updated on a regular basis and especially when circumstances change.

6.21 New and Expectant Mothers

6.22 Employees who are or who have recently been pregnant must have particular regard to their capabilities for safe manual handling operations. These staff must adhere to the New and Expectant Mothers Policy. Moreover, any concerns they may have, concerning their abilities must be reported to their Line Manager immediately. In addition employees can contact Human Resources or the Occupational Health Department in confidence.

6.23 Procedure for ordering equipment

6.24 For in-patient areas equipment should be sought from within the trust. If this is not feasible equipment will need to be rented from suppliers with an NHS purchase and supply agreement, using a non-stock requisition and an order number from procurement. In all cases the moving and handling team will need to be contacted.

Community teams requiring equipment should contact the appropriate Community Equipment Store.

Liverpool Community Equipment Service
Address: Units 4-7, Graylaws Industrial Estate, Wareing Road, Liverpool. L.9 4AU
Contact No: (0151) 295 9800

Fax No: (0151) 282 5180

Sefton Community Equipment Service
Unit 2c, Bechers Drive, Aintree Racecourse Retail Park, Liverpool, L9 5AY
Contact No. 0151 531 0969

6.25 Equipment Maintenance and Cleaning

- 6.26 In accordance with the Lifting Operations and Lifting Equipment Regulations 1998 all hoist equipment and attachments such as slings will be regularly checked and maintained.
- 6.27 Ward / department managers will maintain an accurate record of all patient handling equipment they have for their area and are responsible for ensuring their staff report any defaults in equipment, and checking that hoist service checks are in date.
- 6.28 All slings need a thorough examination of any wear or tear before each use. A simple checklist should be completed as evidence of inspection, see Appendix 5 – Hoist and Sling Checklist
- 6.29 Where a need for equipment is identified, advice should be sought from the Moving and Handling Advisor and appropriate equipment purchased. Consideration must be given to the inspection, servicing and regular maintenance of equipment, and requirements of other specialist areas including medical devices and infection control.
- 6.30 All equipment must be regularly cleansed in accordance with the manufacturers guidance and / or the Trusts Decontamination Policy and Guidelines, some equipment must be patient specific (e.g. for patient in isolation). Further advice can be sought from the Infection Control team in accordance with the infection control decontamination policy.
- 6.31 **If used** Washable slings, slide sheets, handling belts are patient specific; managers must ensure they have sufficient equipment, appropriate for their area. Small items of manual handling equipment such as transfer belts, slide sheets and slings that are reusable must be laundered and if contaminated disposed of in accordance with Infection Control Policies and Procedures.

6.32 Incident Reporting

- 6.33 Following a near miss, incident, or accident, a Datix Form must be completed within 24 hours and forwarded to the Line Manager and the Manual Handling Advisor who will be responsible for investigating the incident and taking the appropriate action.

6.34 Policy Updating and Review

- 6.35 The policy will be reviewed by the Moving and Handling Advisor in line with the outcome of health and safety management audits, organisational feedback, legislative change and government guidance. The review shall be at least every two years unless best practice dictates otherwise.

7. CONSULTATION

- 7.1 This document will be implemented and disseminated through the organisation immediately following ratification by the Health and Safety Committee and stored electronically on the Trusts Policy Library.
- 7.2 The Trust will ensure that all staff has access to the Trust's Policy Library, and all documents shall be accessible to all.
- 7.3 It shall be the responsibility of Directors and their Management Teams to ensure that they have robust arrangements in place both to notify staff of relevant additions to the document library and to ensure that staff appropriately follows the contents of any such additions.

8. TRAINING AND SUPPORT

- 8.1. Upon appointment to the Trust all staff will attend the Corporate Induction and will receive information about the principles of safe moving and handling practices.
- 8.2 Existing and experienced new staff will receive ongoing training and support from the Manual Handling Advisor and all practical skills will be re-assessed at intervals in line with Trusts Training Needs Analysis.
- 8.3 Staff returning from long term leave (i.e. maternity leave, sick leave of more than 2 months) or following any absence related to a moving and handling activity or musculoskeletal injury will be subject to a review by the Manual Handling Advisor.
- 8.4 It is recognised that in some departments peer assessment is not reasonably practicable (i.e. community based teams and departments with dispersed staff in these cases bespoke training will be provided as instructed by Heads of Service. Training content will be agreed between the Moving and Handling Advisor and the Service Lead.

Staff Group	Course	Delivery Method	Frequency
All Staff	Level 1	E-Learning	3 yearly
Facilities Staff e.g. FMA's, Porters, Drivers, Catering	Inanimate Object	Instructor Led	3 yearly
Complex Care in-patient Areas, BIRU and Wavertree Bungalow	Level 2 One Day	Instructor Led	On induction
South Sefton Division	Level 2 One Day	Instructor Led	On induction
Complex Care in-patient Areas, BIRU and Wavertree Bungalow	Level 2 Refresher	Instructor Led	Annually (3 hours)
South Sefton Division	Level 2 One Day	Instructor Led	Annually (3 hours)

9. MONITORING

What area of the policy will be monitored	Where referenced in policy	lead	Frequency	How evidenced	Escalated to which committee /group
Acting on action plan and recommendations	6.2	Manual Handling Advisor / Local Manager	6 monthly	Workplace inspection reports	Line managers / Divisions and Health and Safety Committee
Completion of risk assessments	6.3	Manual Handling Advisor	Annually	Annual audits and reviews	Health and Safety Committee
Moving and handling incidents and RIDDOR reporting data	6.9	Manual Handling Advisor / Local Manager	As required	Accident / incident reports	Health and Safety Committee
Hoist patient handling equipment maintenance	6.8	Health and Safety Manager / Manual Handling Advisor	6 monthly	Inspection certifications Equipment log books	Line managers / Divisions and Health and Safety Committee
Training attendance	8.0	Health and Safety Manager / Manual Handling Advisor Learning and Development	Monthly course attendance	Course bookings by service / depts	Line managers / Divisions and Health and Safety Committee

10 Equality and Human Rights Analysis

Title: Moving and Handling Policy SA17
Area covered: Trust wide

<p>What are the intended outcomes of this work?</p> <p>PURPOSE AND RATIONALE Outline the Trust requirements for safe moving and handling of patients and objects to minimise the risk to staff and patients</p> <p>Who will be affected? Staff and patients</p>
--

Evidence
<p>What evidence have you considered?</p> <p>Requirements of health and safety legislation</p>
<p>Disability (including learning disability)</p> <p>This Policy has a positive impact on any patient or staff who have a physical/Mental impairment by considering their needs regarding H&S and the subsequent policies and procedures that underpin the Health and Safety Strategy.</p>
<p>Sex See cross cutting</p>
<p>Race No issues identified within discussions</p>
<p>Age The Policy will ensure that individuals of all ages are considered in relation to Health and Safety tasks.</p>
<p>Gender reassignment (including transgender) No issues identified within discussions</p>
<p>Sexual orientation No issues identified within discussions</p>
<p>Religion or belief No issues identified within discussions</p>
<p>Pregnancy and maternity Information on safe guarding pregnancy can be found in the Policy on New AND Expectant Mothers</p>
<p>Marriage and Civil Partnership No impact.</p>
<p>Carers No impact.</p>
<p>Other identified groups Other groups have been considered however as the Policy is for staff there are no additional impacts on health inequalities.</p>
<p>Cross Cutting Seek advice from occupational health, if there is good reason to suspect that an individual's state of health might significantly increase the risk of injury from manual handling operations.</p>

Human Rights	Is there an impact? How this right could be protected?
Right to life (Article 2)	This article is not engaged
Right of freedom from inhuman and degrading treatment (Article 3)	Treatment and care based on Human Rights approach. All staff must use the techniques taught, unless specific alternative techniques have been discussed and agreed with service users due physical conditions
Right to liberty (Article 5)	This article is not engaged
Right to a fair trial (Article 6)	This article is not engaged
Right to private and family life (Article 8)	This article is not engaged
Right of freedom of religion or belief (Article 9)	This article is not engaged
Right to freedom of expression Note: this does not include insulting language such as racism (Article 10)	This article is not engaged
Right freedom from discrimination (Article 14)	This article is not engaged

Engagement and Involvement <i>detail any engagement and involvement that was completed inputting this together.</i>
The policy tabled at the Health and Safety Committee meetings. Comments and feedback made have been taken into consideration and amendments made as required

Summary of Analysis
Eliminate discrimination, harassment and victimisation N/A to this policy
Advance equality of opportunity N/A to this policy
Promote good relations between groups N/A to this policy

What is the overall impact?

This policy should not have any negative impact on the protected characteristics

Addressing the impact on equalities

There needs to be greater consideration re health inequalities and the impact of each individual development /change in relation to the protected characteristics and vulnerable groups

Action planning for improvement

Detail in the action plan below the challenges and opportunities you have identified.
Include here any or all of the following, based on your assessment

For the record
Name of persons who carried out this assessment:
This is a review

Carlton Brooks

Date assessment completed:
24 January 2020

Name of responsible Director:
Executive Director of Communications and Corporate Governance

Date assessment was signed:
January 2020

Appendix 1: Moving and Handling Risk Assessment – Inanimate Loads

Step1: Completed assessment form

Manual Handling Risk Assessment			
Dept:		Loc:	
Assessor:		Role:	
Describe activity being assessed			
Can the task be avoided	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Describe the load		Weight	
Is the load	Hot <input type="checkbox"/> Stable <input type="checkbox"/> Chemical <input type="checkbox"/>	Cold <input type="checkbox"/> Balanced <input type="checkbox"/> Bulky <input type="checkbox"/>	Sharp <input type="checkbox"/> Liquid <input type="checkbox"/>
Frequency of task	One off <input type="checkbox"/>	Daily <input type="checkbox"/>	Weekly <input type="checkbox"/> Other <input type="checkbox"/>
Does this involve	Lifting <input type="checkbox"/> Pulling <input type="checkbox"/> Stretching <input type="checkbox"/> Twisting <input type="checkbox"/> Handling whilst sitting <input type="checkbox"/>	Carrying <input type="checkbox"/> Lowering <input type="checkbox"/> Bending <input type="checkbox"/> Reaching <input type="checkbox"/>	Pushing <input type="checkbox"/> Stooping <input type="checkbox"/> Turning <input type="checkbox"/> Hold load away from the body <input type="checkbox"/>
Environmental Conditions	Is flooring is good condition with no visible trip hazards such as slopes/steps or change of level Yes <input type="checkbox"/> No <input type="checkbox"/>	Is lighting / temperature suitable and sufficient enough for the task to be completed safely Yes <input type="checkbox"/> No <input type="checkbox"/>	Are there any space constraints i.e. limited head room and ability Yes <input type="checkbox"/> No <input type="checkbox"/>
Person undertaking task	Trained in manual handling Yes <input type="checkbox"/> No <input type="checkbox"/>	Any existing health concerns Yes <input type="checkbox"/> No <input type="checkbox"/>	Do they need assistance Yes <input type="checkbox"/> No <input type="checkbox"/>
Persons involved			
Other factors	Is movement or posture hindered by clothing or PPE Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you have the correct PPE Yes <input type="checkbox"/> No <input type="checkbox"/>	Does the individual feel that they have been given enough training and information Yes <input type="checkbox"/> No <input type="checkbox"/>
Lifting aids required	Yes <input type="checkbox"/>	What type?	No <input type="checkbox"/>
List control measures			
Risk of injury	High <input type="checkbox"/>	Med <input type="checkbox"/>	Low <input type="checkbox"/>
Further controls required			
Sign			
Date		Review date	

Step 2: ELITE Risk Factors for Consideration

Do not change pre-set scores		Insert your scores in this column		
Environment	Score		Section total	
Outdoor – summer only	1			
Outdoors – including winter	3			
Poor flooring	2			
Steps or Stairs	1			
Poor lighting	2			
Temperature over 25oC	2			
Temperature Under 5oC	2			Total:
Load	Score			
Under 15 kg	1			
15 – 25 kg	2			
Over 25 kg	4			
Hot / cold	2			
Liquid	1			
Unbalanced load	3			
Hazardous substance	2			Total:
Individual	Score			
Pregnant	5			
Untrained	3			
History of musculoskeletal problems	2			Total:
Task	Score			
Duration less than 15 minutes	0			
15 minutes – 1 hour	2			
Over 1 hour	3			
Repetitive Handling	3			
Travel distance under 5 metres	0			
5 – 10 metres	1			
Over 10 metres	2			
Lifting to / from floor level or	3			
Lifting over shoulder height	3			
Stretching / Reaching	3			
Twisting	3			
Holding load away from body	2			
Handling whilst seated	2			
Handling above floor level (on kick stool / steps / ladder etc.)	2			Total:
Grand Total				Total:

Total score
Under 15 - Low
16 – 25 Med
Over 25 High

Appendix 2: Clinical - Patient Handling Risk Assessment

Patient Moving and Handling Assessment Form					
Section A: Patients Details					
NHS Number:		Ward / dept/other:		Weight:	Height:
Patient name:					
Address:					
DOB:					
Section B: Assessment to be completed on admission					
1	Relevant Medical History				
2	Physical Disabilities(<i>eyesight, hearing; mobility issues etc</i>)				
3	Psychological / Mental Health				
4	Pain Status				
5	Tissue Viability / Nutritional Status				
6	History of fall (s)				
7	Cultural / religious considerations				
8	Day / Night variation				
9	Attachments / Other considerations				
If the patient's condition and / or if environment / location changes the assessment needs to be reviewed					
Section C:					
Signature:					
Assessors name:					
Designation				Date	
N.B Datix to be completed if appropriate equipment not available					

SECTION D: SAFER HANDLING PLAN							
Name:		Initial Assessment			Document when change in patient condition		
Task		No of staff	Method / Equipment Required	Date and Sign	No of staff	Method / Equipment Required	Date and Sign
1	Repositioning in bed						
2	Transfer bed to trolley						
3	Transfer bed to chair / Chair to bed						
4	Chair to chair Chair to commode						
5	Standing						
6	Walking ability						
7	Toileting						
8	Bathing						
9	Hoist transfer						
10	Other						

SECTION D: SAFER HANDLING PLAN –continuation sheet							
Name:		Initial Assessment			Document when change in patient condition		
Task		No of staff	Method / Equipment Required	Date and Sign	No of staff	Method / Equipment Required	Date and Sign
1	Repositioning in bed						
2	Transfer bed to trolley						
3	Transfer bed to chair / Chair to bed						
4	Chair to chair Chair to commode						
5	Standing						
6	Walking ability						
7	Toileting						
8	Bathing						
9	Hoist transfer						
10	Other						

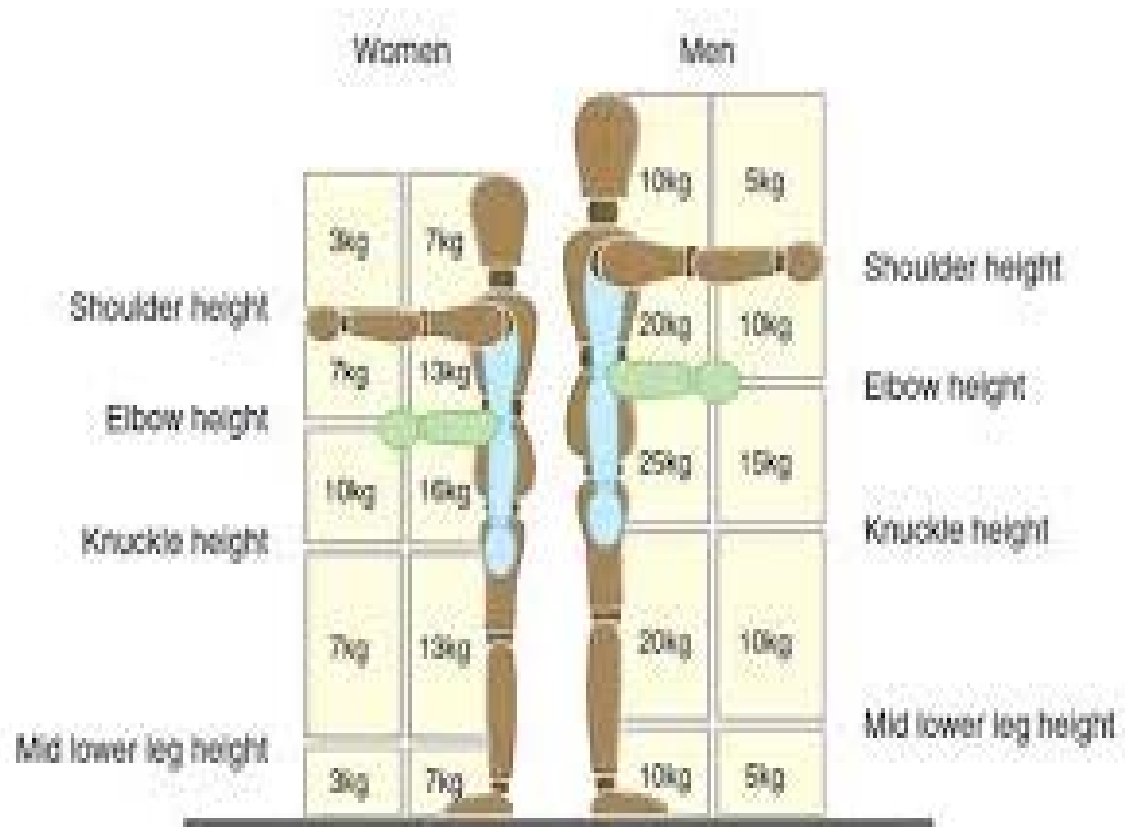
Appendix 3: Community Assessment Form

SECTION E: USE IN COMMUNITY ONLY IN EXCEPTIONAL CIRCUMSTANCES			
Environmental considerations	Hazards identified	Actions taken	Review
Access eg bed/bath/WC/ passageways			
Steps/stairs/access			
Flooring			
Slip/trip hazards			
Furniture chair height/ moveable/condition			
Bed – double/low			
Temperature/humidity/ lighting			
Equipment/power supply			
Pets/children etc			
Other			
Equipment issued by Other agency involved			
Initial assessment date and sign			
Review date and sign			

Appendix 4

Guideline Weights for Lifting and Lowering

These weights are not set as a limit or those that are approved for lifting.



Appendix 5 –Hoist and Sling Checklist

This check list must be completed by the user prior to each hoist use:

Sling
Ensure the correct size sling is used (see manufacturer guidelines)
Check:
▪ Sling is clean
▪ Safe Working Load (SWL) will not be exceeded
▪ Compatibility of sling with the hoist being used
▪ General wear and tear of sling
▪ Label is clear and easy to read
▪ Stitching is intact
▪ LOLER tag is present and in date.
Hoist: Check:
▪ Hoist is clean
▪ Safe Working Load (SWL)
▪ LOLER inspection label is in date
▪ Wheels move freely and are not loose
▪ Legs open and close fully
▪ Frame is without cracks
▪ Mast is stable
▪ Spreader bar is free moving and loop holders are intact
▪ Battery is charged
▪ Boom goes all the way up and all the way down
▪ Emergency stop system
▪ Emergency lowering system