



# Manual Handling and People Handling Policy 2018



Building a  
Better Health  
Service

Seirbhís Sláinte  
Níos Fearr  
á Forbairt



## Manual Handling and People Handling Policy, 2018

<b>Document reference number</b>	HSP:008:00	<b>Document developed by</b>	National Health & Safety Function
<b>Revision number</b>	02	<b>Document approved by</b>	Health and Safety Management Advisory Committee (HSMAC)
<b>Consultation with the trade unions completed</b>	23 <sup>rd</sup> January 2018	<b>Presented to National Joint Council</b>	23 <sup>rd</sup> January 2018
<b>Approval date</b>	April 2018	<b>Responsibility for implementation</b>	All Health Sector Managers and Employees
<b>Revision date</b>	April 2021	<b>Responsibility for review and audit</b>	National Health & Safety Function



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## 1.0 Policy Statement

It is the policy of the HSE to reduce, so far as is reasonably practicable, the risks associated with manual handling and people handling activities in line with legislative requirements and best practice.

The HSE operates a “Minimal Handling Policy”.

The HSE acknowledges the range and diversity of the services it provides. Where the manual handling of loads i.e. people and inanimate loads (all loads excluding people) cannot be avoided, the HSE will take appropriate organisational measures or employ appropriate means to satisfactorily reduce any associated risks through risk assessment. In the case of people handling, the assessment will include the manual handling needs of the service user and the safest way of undertaking these tasks. This is achieved through good planning, consultation and the systematic management of risks by providing a safe working environment; safe systems of work; adequate information, instruction, training and supervision and suitable aids and equipment. The principles of ergonomics will be applied in the design and refurbishment of workplaces and when purchasing equipment and furniture.

Where employees are required to work in uncontrolled environments (such as Ambulance Services, services delivered in peoples’ homes by Healthcare Professionals, Care Assistants and others) a suitable and sufficient hazard identification and risk assessment exercise must be conducted to enable the development and implementation of appropriate control measures (such as training and the procurement and use of equipment) to satisfactorily manage the risks to which employees are exposed.

The HSE will continuously monitor and review service arrangements for manual handling and people handling to ensure that appropriate resources are available to implement the Policy.

## 2.0 Purpose

The HSE aims to promote a safe manual handling and people handling culture to reflect current best practice and legislation. The purpose of this policy is to provide guidance to employees and managers:

1. To avoid or reduce, so far as is reasonably practicable, the risks associated with manual handling and people handling activities.
2. Provide the highest quality of care to service users.
3. To ensure compliance with relevant statutory requirements and standards and guidelines such as those published by the Health and Safety Authority (HSA) and Health Information and Quality Authority (HIQA).

Individual services must develop local Guidelines and/or Standard Operation Procedures to support implementation and ongoing monitoring of this policy

## 3.0 Scope

This policy is applicable across all services within the HSE including but not limited to its hospitals and community settings, and covers all manual handling and people handling activities undertaken by employees during the course of their work. This Policy supersedes the HSE Manual and People Handling Policy, 2012.

This Policy applies to all HSE employees, fixed term employees, temporary employees and students. It also applies to agency workers, contractors or any other persons who carry out manual handling and people handling activities as part of their work for the HSE.

#### 4.0 Legislation/Other Related Policies

- The Safety, Health and Welfare at Work Act, 2005
- The Safety, Health and Welfare at Work (General Application) Regulations, 2007:
  - Part 2, Chapter 4 - Manual Handling of Loads
  - Chapter 2 of Part 2 Use of Work Equipment
  - Part 6 - Sensitive Risk Groups
    - Protection of Children and Young People
    - Protection of Pregnant, Post Natal and Breastfeeding Employees.
    - Night Work and Shift Work
- Employment Equality Act, 1998
- Human Rights Commission Act, 2005
- Disability Act, 2005
- Qualifications and Quality Assurance (Education and Training) Act, 2012

#### 4.0 Glossary of Terms and Definitions

<b>Audit</b>	Used to seek independent assurance that an appropriate and effective system of managing occupational safety, health and welfare is in place and that the necessary levels of controls and monitoring are being implemented. <i>(Ref: Auditing a Safety and Health Management System. A Safety and Health Audit Tool for the Healthcare Sector 2006)</i>
<b>Bariatric</b>	There is no universally agreed definition of bariatrics. The term 'bariatric' is used to describe the field of medicine that focuses on the causes, prevention, treatment and management of obesity and its associated diseases (Mosby's Medical Dictionary, 2006) The National Institute of Clinical Excellence (NICE) recommends the use of Body Mass Index (BMI) in conjunction with waist circumference as the means for measuring overweight and obesity and determining health risks i.e. <ul style="list-style-type: none"> <li>• Body Mass Index (BMI) greater than 35 kg/m<sup>2</sup> plus co-morbidities or over 40kg/m<sup>2</sup> (NICE 2006) National Obesity Observatory 2010) and</li> <li>• Waist circumference greater than 88cm for women and 102cm for men (NICE, 2014)</li> </ul> <i>(Ref: NICE (2014) Obesity: identification, assessment and management, Clinical Guidance (CG189)</i>
<b>Competent Person</b>	(a) For the purposes of the relevant statutory provisions, a person is deemed to be a competent person where, having regard to the task he or she is required to perform and taking account of the size or hazards (or both of them) of the undertaking or establishment in which he or she undertakes work, the person

	<p>possesses sufficient training, experience and knowledge appropriate to the nature of the work to be undertaken</p> <p>(b) Account shall be taken, as appropriate, for the purpose of <i>paragraph (a)</i> of the framework of qualifications referred to in the Qualifications (Education and Training) Act 1999</p> <p><i>(Ref: Safety Health and Welfare at Work Act, 2005)</i></p>
<b>Contractor</b>	<p>A person or firm who contracts to supply materials (any machinery, appliance, apparatus, tool or installation) for use at work as defined by the Safety, Health and Welfare at Work (General Application) Regulations 2007 as amended) or labour (Collins Dictionary 2000) (Para's 4.1, 4.12 and 4.13 refer).</p> <p>In this document the term "contractor" is used broadly and is intended to cover Contractors, Agencies and Temporary Employment Businesses.</p> <p><i>(Ref: HSE Policy on Statutory Occupational Safety and Health Training, 2016)</i></p>
<b>Control Measure</b>	<p>A mechanism, process, procedure or action which can be verified which seeks to reduce the likelihood and/or consequence of a risk. Controls include any process, policy, device, practice or other actions which modify risk. They can be required as additional in order to further mitigate the risk.</p> <p><i>(Ref: HSE Integrated Risk Management Policy, 2017)</i></p>
<b>Employee</b>	<p>Means any person who has entered into or works under (or, where the employment has ceased, entered into or worked under) a contract of employment and includes a fixed-term employee and a temporary employee and references, in relation to an employer, to an employee shall be construed as references to an employee employed by that employer.</p> <p><i>(Ref: Safety, Health &amp; Welfare at Work Act, 2005)</i></p>
<b>Employer</b>	<p>In relation to an employee:</p> <p>(a) Means the person or persons with whom the employee has entered into or for whom the employee works under (or, where the employment has ceased, entered into or worked under) a contract of employment,</p> <p>(b) Includes a person (other than an employee of that person) under whose control and direction an employee works, and includes where appropriate the successor of the employer or an associated employer of the employer.</p> <p><i>(Ref: Safety, Health &amp; Welfare at Work Act, 2005)</i></p>
<b>Ergonomics</b>	<p>The science of fitting the job to the worker. Also, Ergonomics applies information about human behavior, abilities and limitations and other characteristics to the design of tools, machines, tasks, jobs and environments for productive, safe, comfortable and effective human use.</p> <p><i>(Ref: HSA Guidance on the Management of Manual Handling in the Workplace 2005)</i></p>
<b>Fixed Term Employee</b>	<p>means an employee whose employment is governed by a contract of employment for a fixed-term or for a specified purpose, being a purpose of a kind that the duration of the contract was limited but was, at the time of its making,</p>

	<p>incapable of precise ascertainment.</p> <p><i>Whilst these employees are commonly known as “Temporary”, care should be taken not to confuse this term with “Temporary Employee” (Para. 4.12 refers) as given in the Act 2005 and used throughout this policy document.</i></p> <p><i>(Ref: HSE Policy on Statutory Occupational Safety and Health Training, 2016)</i></p>
<b>Full Body Lifts</b>	The manual lifting of the full body weight of a person (please refer to Guideline lifting and lowering weights by work zone – Appendix II
<b>Hazard</b>	<p>A potential source of harm or adverse health effect on a person or persons.</p> <p><i>(Ref: HSE Integrated Risk Management Policy, 2017)</i></p>
<b>Hazard Identification</b>	<p>The process of recognising that a hazard exists and defining its characteristics</p> <p><i>(Ref: BS OSHAS 18001-2007)</i></p>
<b>Incident</b>	<p>An event or circumstance which could have, or did lead to unintended and/or unnecessary harm. Incidents include adverse events which result in harm; near-misses which could have resulted in harm, but did not cause harm, either by chance or timely intervention; and staff or service user complaints which are associated with harm. Incidents can be clinical or non-clinical and include Incidents associated with harm to:</p> <ul style="list-style-type: none"> <li>• patients, servicers users, staff and visitors</li> <li>• the attainment of HSE objectives</li> <li>• ICT systems</li> <li>• data security e.g. data protection breaches</li> <li>• the environment</li> </ul> <p><i>(Ref: HSE Incident Management Framework, 2018)</i></p>
<b>Load</b>	<p>Any object, person ..... that must be moved</p> <p>Inanimate Load – all loads excluding people</p> <p><i>(Ref: HSE Manual Handling and People Handling Policy, 2012)</i></p>
<b>Manual Handling</b>	<p>This involves: Any transporting or supporting of a load by one or more employees, and includes lifting, putting down, pushing, pulling, carrying or moving a load, which, by reason of its characteristics or of unfavorable ergonomic conditions, involves risk, particularly of back injury to employees</p> <p>People Handling – This includes, the manual handling / moving and handling of people</p> <p><i>(Ref: Guide to the Safety, Health and Welfare at Work (General Application) Regulations 2007. Part 2, Chapter 4: Manual Handling of Loads)</i></p>
<b>Minimal Handling</b>	<p>In the context of this policy, minimal handling means all hazardous manual handling tasks must be risk assessed and appropriate ergonomic and organization control measures must be put in place to reduce the risk as far as is reasonably practicable.</p> <p><i>(Ref: Adapted from the Minimal Manual Handling Policy (2014), Cardiff and Vale University Health Board).</i></p>

<b>Operational Plan</b>	A plan prepared that clearly defines actions to support implementation of a policy
<b>Reasonably Practicable</b>	An employer has exercised all due care by putting in place the necessary protective and preventive measures, having identified the hazards and assessed the risks to safety and health likely to result in accidents or injury to health at the place of work concerned and where the putting in place of any further measures is grossly disproportionate having regard to unusual, unforeseeable and exceptional nature of any circumstances or occurrence that may result in an accident at work or injury to health at that place of work. <i>(Ref Safety, Health &amp; Welfare at Work Act, 2005)</i>
<b>Risk</b>	Risk is the uncertainty of objectives. In terms of occupational health and safety risk it is the combination of the likelihood of occurrence of a work related hazardous event or exposure(s) and the impact of the injury or ill-health that can be caused by the event or exposure. <i>(Ref: adapted from the HSE Integrated Risk Management Policy, 2017)</i>
<b>Risk Assessment</b>	The overall process of risk identification, risk analysis and risk evaluation. <i>(Ref: HSE Integrated Risk Management Policy, 2017)</i>  The manual handling risk assessment considers the task, individual capability, the load and the environment (TILE)
<b>Sensitive Risk Groups</b>	Young workers, pregnant, post natal and breastfeeding employees; People with reduced mobility New or inexperienced workers, person's with particular serious problems, night workers and shift workers, children and young persons. <i>(Ref: The Safety Health and Welfare at Work (General Application) Regulations, 2007 Part 6, Chapters 1-3)</i>
<b>Temporary Employee</b>	An employee who is assigned by a Temporary Employment Business to work for and under the control of another undertaking availing of the employee's services (SHWW Act 2005). These employees are generally known as Agency Staff. <i>(Ref: HSE Policy on Statutory Occupational Safety and Health Training, 2016)</i>
<b>TILE</b>	Task, Individual Capability, Load and Environment (Other factors and the interaction between these components).
<b>Training Needs Assessment</b>	A training needs assessment is the process of gathering, assessing and analysing information to determine the training needs of an employee. It is underpinned by the Risk Assessment process.

**Note:** The term 'service user' is applied to anyone who accesses the services provided by the HSE i.e. hospital patient or client / resident in a community setting.

## **6.0 Roles and Responsibilities.**

### **6.1 Responsibilities of Director General (DG)**

- 6.1.1 The DG has overall responsibility to ensure so far as is reasonably practicable, the safety, health and welfare at work of all employees and others affected by the activities of the HSE
- 6.1.2 The DG delegates accountability for co-ordinating and monitoring implementation of this Policy and any associated procedures to National Directors, Assistant National Directors, Hospital Group Chief Executive Officers, Chief Officers Community Health Organisations

### **6.2 Responsibilities of National Directors**

- 6.2.1 Ensure arrangements are in place for identifying, evaluating, managing, monitoring and auditing the risks associated with manual and people handling
- 6.2.2 Ensure the necessary resources are provided for the implementation of this Policy

### **6.3 Responsibilities of Senior Managers e.g. Assistant National Directors, Hospital Group Chief Executive Officers , Chief Officers Community Health Organisations**

- 6.3.1 Ensure there are adequate and appropriate arrangements in place for the successful implementation, monitoring, evaluation, audit and review of this Policy throughout their respective areas of responsibility
- 6.3.2 Ensure necessary resources are allocated and are available for the implementation of this Policy
- 6.3.3 Integrate performance indicators in relation to manual and people handling
- 6.3.4 In order to help minimise the potential for manual handling related injuries utilise a pro active risk assessment and adopt an ergonomic approach when planning refurbishments or the construction of buildings by consulting with a wide group of professionals/employees at the planning and implementation stages
- 6.3.5 Where 6.3.4 above relates to the structures within which people work, a similar principle would apply to any equipment/furniture used. Ensure the following in connection with the procurement of equipment/furniture:
  - a. Establish a Multidisciplinary team to include end users
  - b. Apply ergonomic principles
- 6.3.6 Seek the advice of a competent person (e.g. Manual and People Handling Co-ordinator / Advisor / Instructor or equivalent, Health and Safety Advisor, Quality and Safety Manager,) when appropriate
- 6.3.7 Ensure all undergraduates have received a minimal acceptable standard of education and training to safely carry out their manual and people handling tasks within a HSE facility
- 6.3.8 Take cognizance of any other relevant HSE policies and guidelines.

#### **6.4 Responsibilities of Local Senior Managers and Line Managers (Responsible Persons)**

It is the local senior managers and line manager's responsibility to ensure that this Policy is applied in their respective areas. Local senior managers and line managers (Responsible Persons) shall:

- 6.4.1 Ensure this Policy is brought to the attention of, and implemented by all employees and others as appropriate
- 6.4.2 In consultation with employees ensure that an operational plan is developed to support the implementation of this Manual Handling and People Handling Policy
- 6.4.3 Ensure that appropriate resources are available to support the implementation of this Policy in their area
- 6.4.4 Where manual handling and/or people handling activities cannot be avoided, ensure that appropriate written risk assessments are carried out in consultation with employees, taking account of the working environment, systems of work and any necessary control measures put in place to reduce the level of risk as far as is reasonably practicable
- 6.4.5 Ensure the findings of the written risk assessment are recorded, implemented and communicated to the employee undertaking the tasks in question and reviewed when necessary
- 6.4.6 Ensure that they possess the necessary information, training and supervision to implement the standards for safe manual handling in their area of responsibility
- 6.4.7 Ensure that where services have access to Manual and People Handling Co-ordinators / Advisors / Instructors, Quality and Safety Manager, Occupational Therapist, Physiotherapist their assistance / advice is sought where necessary. Where access is not available contact the National Health & Safety Function for further advice at [www.hse.ie/safetyandwellbeing](http://www.hse.ie/safetyandwellbeing)
- 6.4.8 Ensure that a manual handling training needs assessment, informed by the risk assessment process, has been undertaken for each employee
- 6.4.9 Ensure records of all training undertaken are maintained as per local arrangements
- 6.4.10 Ensure employees are adequately supervised in the performance of their manual and people handling tasks
- 6.4.11 Ensure that refresher / update training is provided at no greater than three yearly intervals or where there is any major change in the work involved or equipment used, or when an employee is transferred to another activity requiring different loads to be handled
- 6.4.12 Manual Handling Equipment should be purchased in consultation with key stakeholders, e.g. Physiotherapists, Occupational Therapists, Moving & Handling co-ordinators / Advisors / Instructors (where available), and any other appropriate personnel, and the needs of both service users and employees must be considered This equipment must be easily accessible, properly maintained and service records retained
- 6.4.13 Ensure that employees receive the necessary information, instruction, training and supervision on the correct use of manual handling and people handling equipment (e.g. hoists, small handling aids, self leveling trolleys). Training on the

- use of other work equipment should cover manual handling where necessary
- 6.4.14 Ensure that induction for Agency Employees covers local manual handling and people handling procedures
  - 6.4.15 Liaise with the Occupational Health Department where health issues may have a bearing on an employees' ability to undertake manual handling and/or people handling
  - 6.4.16 Report unsafe environments and systems of work to the relevant senior manager and take immediate action that may be required to reduce or minimise the risk.
  - 6.4.17 Investigate accidents, incidents and near misses in line with the HSE Incident Management Framework, 2018.
  - 6.4.18 Ensure that where risks cannot be controlled locally they are escalated to the appropriate service risk register while continuing to manage the risk in so far as is reasonable practicable.

## **6.5 Responsibilities of All HSE Employees**

- 6.5.1 Adhere to this Policy, any supporting local guidelines, operational plans, and safe system of work plans and any associated risk assessments
- 6.5.2 Take reasonable care of their own safety, health and welfare and that of others i.e. colleagues and service users when conducting manual handling and people handling activities
- 6.5.3 Co-operate in the regular review of the risk assessments and control measures to ensure that they are valid and are being effectively implemented and/or updated as required
- 6.5.4 Attend mandatory manual handling/people handling training sessions and ensure that skills taught and principles of good manual handling (Refer to appendix VII) are implemented
- 6.5.5 Be aware of the quality of their handling skills and work towards developing excellence in this area
- 6.5.6 Ensure their skills are current and inform their manager of their training needs
- 6.5.7 When undertaking team handling, use an agreed command to time procedure
- 6.5.8 Make themselves aware of the safe working loads of equipment /furniture within their area e.g. hoist
- 6.5.9 Inform their line manager of any reason (e.g. musculo-skeletal injury, illness or pregnancy), which might affect their ability to perform manual handling and people handling tasks or increase the risk presented
- 6.5.10 Work within their capabilities and limitations
- 6.5.11 Report any defects in equipment/machinery or the place of work and any unsafe systems of work to their line manager
- 6.5.12 Report accidents, incidents and any difficulties arising with regard to manual handling and people handling tasks in line with the HSE Incident Management Framework, 2018.
- 6.5.13 Ensure their clothing and footwear is appropriate for their workplace tasks
- 6.5.14 Inform their Line Manager if they experience any difficulties in the implementation of this Policy.

## 7.0 Procedure

### 7.1. Risk Assessment

Manual and people handling risk assessments and provision of controls is a key component of managing the risks associated with manual handling. Written manual and people handling risk assessments must be based on a realistic reflection of practice and conducted where the activity is occurring.

When carrying out the risk assessment take into account the acronym **T.I.L.E.** which summaries the risk factors:

- **Task** - Refers to the activity within which the handling operation is carried out. Factors such as repetition of the task, body postures and physical exertion are considered.
- **Individual Capability** – The capability of the individual carrying out the task is considered and includes health, previous injuries, fitness level, experience, training, ability to communicate and gender.
- **Load** – Important factors for consideration include (non-exhaustively) the size, weight, shape and physical properties of the load. If the load is a person, relevant consideration includes his or her ability to assist, comprehend and communicate, his or her medical history and any attachments to the person, e.g. drips, etc.
- **Environment** – This is the place where the activity will occur. Consider factors such as confines of space, furniture, floor levels, temperature, availability of adequately trained employees to undertake the activity etc.
- **Other Factors** - Staffing levels (including day/ night variations); availability of handling equipment; training in equipment use; supervision of handling activities; appropriate clothing and footwear; previous manual / people handling incidents.

**(Please refer to Appendix 1 Non exhaustive list of risk factors and Appendix 2, Guideline lifting and lowering weights by work zone).**

### 7.2 Risk Control

Appropriate measures to reduce the risk of injury to the lowest reasonably practicable level based on an ergonomic approach must be applied. All risk assessments must be readily available to relevant employees including employees from other areas. When additional resources are not immediately available the risk should be escalated onto the relevant local risk register and prioritised for action, while managing the risk as far as is reasonably practicable.

Risk Assessments should be documented on a suitable Manual Handling and/or People Handling Risk Assessment form. Many suitable forms have been developed across the HSE. These may continue to be used subject to periodic review and update. Consideration should be given to transfer of documents across all care settings.

**Note: Sample risk assessment forms can be found in Appendix IV and Appendix V and are available to download from the National Health and Safety Website. Please click [here](#).**

## 7.3 Documented Risk Assessments

### (1) Overall Generic Unit / Department Risk Assessments

This is an assessment of the general situation in the ward or department and takes account of the work environment and the work activities. This generic risk assessment will identify the range and complexity of manual handling activities occurring. It will consider the following:

- The type and frequency of moving and handling tasks
- Overall equipment needs
- Staffing
- Environment
- Training needs
- Controls in place or required.

Please refer to Appendix IV for a sample Risk Assessment Form.

### (2) Task Specific Risk Assessment

Following completion of the Generic Unit / Department Risk Assessment, where it has identified that a manual handling activity presents a risk of injury, the activity e.g.

- tasks routinely undertaken e.g. service user transfer from wheelchair to treatment table / bed; pushing / pulling catering / trolleys up a steep ramp
- Transport of certain types of equipment e.g., changing poly gallon of milk

These must be assessed in greater detail to determine what additional controls are required. Please refer to Appendix IV for a sample risk assessment form.

### (3) People Handling Risk Assessment

In addition to the overall generic unit / department risk assessments / task specific risk assessment, written Individual people handling risk assessments must be completed for each service user.

The aim of this assessment is to, clarify safe methods of handling each service user, develop a handling care plan so that injury to staff maybe avoided and service user care enhanced.

The assessment should be carried out on admission or referral or as soon as is reasonably practicable and reviewed:

- Regularly and not less frequently than four monthly<sup>1</sup>
- When the initial assessment is no longer considered valid, e.g. if the service users condition changes/deteriorates or their management plan changes.

Please refer to Appendix V for a sample Individual People Handling Risk Assessment Form.

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<sup>1</sup> Health Act, 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations, 2013.

## **7.4 Undocumented Risk Assessment**

### **7.4.1 Dynamic Risk Assessment**

This is an informal on- the-spot undocumented risk assessment which is required to be undertaken by the employee/s prior to undertaking any manual or people handling task. The purpose of the dynamic risk assessment is to assist the employee in determining if the task is within their capability. Employees need to consider the service users written risk assessment and the training they have received and any information provided relating to the task.

**Note: The general principles of safe handling should be adhered to.**

## **7.5 Consultation with Service Users**

In all moving and handling activities a balanced approach will be followed which considers the wishes and safety of the service user as well as the need to protect the employee from injury.

Each service user who needs assistance will be individually assessed, taking into account their particular needs, capabilities and circumstances including their understanding of the movement and their ability to communicate and help themselves. Particular attention should be paid where English is not the primary language of the service user. The service user and, where appropriate, those acting on their behalf will be actively involved throughout the assessment and decision making process. The independence of the service user will be encouraged at all times. However, the wishes of the service user should not be to the detriment of the health and safety of the employees involved.

Where issues arise, a comprehensive multi disciplinary risk assessment process including consultation with the service user and their family should take place. All complex risk assessments should demonstrate balanced decision making, clinical reasoning and where possible should be evidence based. Where a resolution cannot be reasonably achieved at local level, this should be escalated to senior management.

## **7.6 Management of service users with bariatric needs.**

The handling of these service users presents a specific challenge, and local guidelines and or standard operation plans (SOP) are required to be in place. Where the hazardous manual handling of service users with bariatric needs cannot be avoided, the risk assessment process will identify appropriate organisational measures to satisfactorily reduce the risk as far as is reasonably practicable.

The guideline / SOP is to outline the approach that the service will take in meeting the safer handling of these service users, to ensure that the special needs of this group are addressed without compromising their dignity and safety or that of the employees involved in their care. This is achieved through good planning with stakeholders, consultation, communication and the systematic management of risks by providing a safe working environment, safe systems of work and suitable aids and equipment for manual handling.

## 7.7 Emergency Situations

Lifting all or most of a person's weight should be avoided except in exceptional or emergency situations where service users or employees are at risk of serious injury if immediate action is not taken.

However, written local procedures should be developed and incorporated in the local Emergency Response Plan.

## 7.8 Education and Training

Training must form part of the overall strategy to reduce the risks associated with manual handling activities. It must be supported by adequate supervision arrangements to ensure the skills and knowledge taught as part of the training programme are transferred into practice in the workplace.

The arrangement, management and delivery of manual handling training programmes must comply with the requirements of "HSE Policy on Statutory Occupational Safety and Health Training, 2016". The design and delivery of manual handling and people handling training programmes must comply with current legislation; HSA guidance and evidence based best practice (please see bibliography for relevant support material). All manual handling and people moving and handling instructors must be QQI Level 6 accredited. Details of manual handling training available through the National Health and Safety Function (NHSF) can be found in the NHSF Training Brochure [here](#).

Managers must ensure that a training needs assessment is carried out for all employees. Employees must be consulted as part of this process. Manual Handling training programmes must be specific to the work activities of the service and informed by the local manual handling risk assessments. Training needs to be focused on problem solving skills as well as practical handling skills (HSA, 2011). Training must also include the provision of instruction and information on the safe use of manual handling equipment/aids. Managers must record attendance and maintain and keep available for inspection appropriate training records for each employee.

Line Managers must make local arrangements for the provision of/access to training within appropriate/reasonable timescales and:

- On recruitment
- In the event of a transfer between departments/facilities, redeployment or relocation to new work location of any employee or change of task assigned to an employee
- On the introduction of new work equipment, systems of work or changes in existing work, equipment or systems of work
- On the introduction of new technology

Refresher training is available to all employees to reinforce and evaluate manual handling skills and techniques in line with best practice and should be repeated at not greater than three-yearly intervals (HSA, 2011)

## **7.9 Adverse Incidents**

All accidents, incidents, near misses must be reported, and managed in accordance with *the HSE Incident Management Framework, 2018*. Reporting of incidents should be done using the appropriate National Incident Report Form (NIRF).

## **8.0 Implementation**

### **8.1 Communication**

The HSE must make this Policy available to all staff. Electronic and other communication means can be used to maximise distribution. Copies should also be made available to external providers of services to the HSE.

Managers must ensure that personnel under their supervision have read and understand the Policy. A signature sheet is provided for this purpose.

### **8.2 Responsibilities for Implementation**

Managers (Responsible Persons) at all levels are responsible for implementing this Policy within their area (Please refer to Section 6.0 and Appendix VI & IX) and hence are required to develop an implementation plan, including identification of responsible person(s), specifying the actions to implement the PPPG and timeframes for implementation.

It is essential that changes in terms of devices and work practices etc., are implemented systematically.

## **9.0 Monitoring, Audit and Review**

- 9.1 Managers are required to monitor the implementation plan supporting this policy.
- 9.2 Managers are required to audit implementation of this policy using the audit checklist in Appendix VI.
- 9.3 Implementation of this Policy shall be audited periodically at national level.
- 9.4 This Policy shall be reviewed at national level every three years or earlier if circumstances require it.

## 10.0 Bibliography and Further Reading

- HOP 6 (2011) Guide to the Handling of People, 6<sup>th</sup> Edition, Backcare ISBN 978-0-9530582-1-1
- HSA (2005) Guidance on the Management of Manual Handling in the Workplace
- HSA (2007) Guide to the Safety, Health and Welfare at Work (General Application) Regulations 2007
- HSA (2006) Auditing a Safety and Health Management System – A Safety and Health Audit Tool for the Healthcare Sector
- HSA (2011) Guidance on the Management of Manual Handling in Healthcare
- Health and Safety Executive (2007) Risk assessment and process planning for bariatric patient handling pathways, Loughborough University
- Health and Safety Executive (2003), the Principles of Good Manual Handling: Achieving a Consensus
- HSE (2018) Incident Management Framework and Guidance
- HSE (2017) Integrated Risk Management Policy
- HSE Corporate Safety Statement
- HSE (2016) Policy on Statutory Occupational Safety and Health Training, 2016
- Safety, Health and Welfare at Work Act, 2005 (S.I. No. 10 of 2005)
- Safety, Health and Welfare at Work Act (General Application) Regulations, 2007 (S.I. No. 299 of 2007)
- Safety, Health and Welfare at Work (General Application) (Amendment) (No. 3) Regulations 2016 (S.I. No. 370 of 2016).

Appendix I

**Table 1. Risk Factors – Non-Exhaustive Reference/Check List for use with Local Risk Assessment Forms.**

Risk Factor (Consider Risk Controls in Place)	
Task (T)	Over frequent
	Over prolonged
	Involves the spine
	Insufficient rest/recovery
	Excessive lifting or lowering
	Excessive carrying distances
	Fixed work rate imposed by process
	Too strenuous
	Only achieved by twisting movement of trunk
	Likely to result in sudden movement of load
	Made with body in unstable posture
Individual (I)	Physically unsuited to task in question
	Unsuitable clothing/footwear/other personal effects
	Inadequate training or knowledge
	Young, old or inexperienced employee
	Pregnant or breastfeeding employee
	Employee physically unfit
Inanimate Load (L)	Too heavy or too large
	Unwieldy/difficult to grasp
	Unstable or contents likely to shift/move unexpectedly
	Manipulated or held at distance from trunk
	Shape requires bending/twisting of trunk
	Temperature, contours, consistency, texture unsuitable
Person Load (Service User) (L)	History of falls
	Pain
	Drips/drains/catheter
	Infection
	Communication/Sensory
	Skin condition/tissue viability
	Recent surgery
	Amputation
	Muscle spasm
	Weight bearing
	Joint replacement
	Walking aids
	Physical disabilities
	Psychological/mental health
	Culture/religious considerations
	Day/night variation
Other considerations	

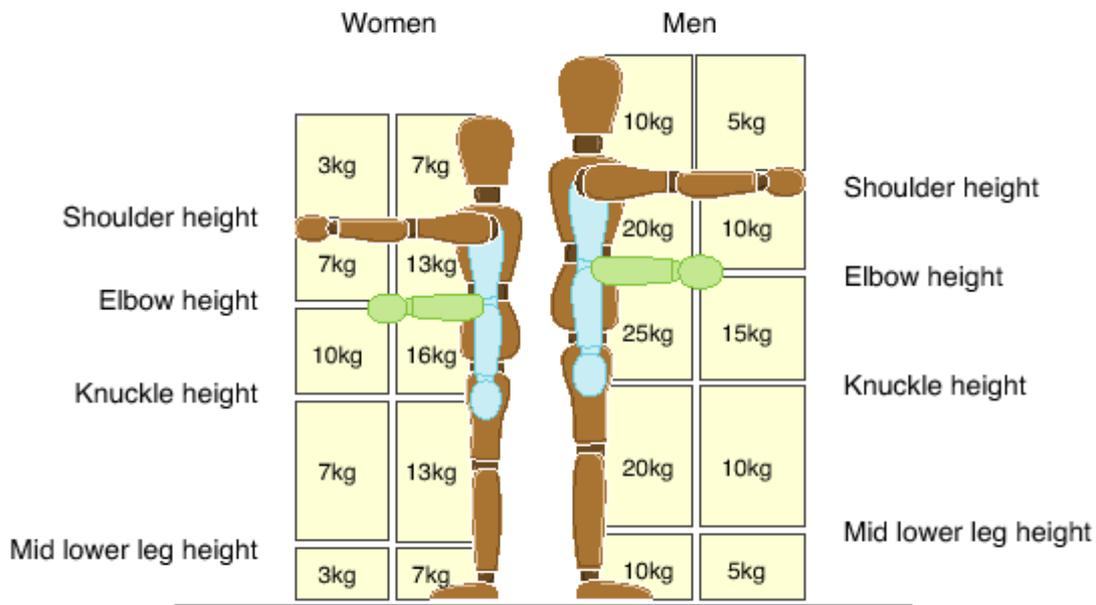
**Table 1 - Risk Factors Continued**

Environment (E)	Space or vertical/height restrictions, narrow corridors
	Floor uneven, slippery or has varying surface:
	Workplace prevents lifting/handling at safe height
	Floor/footrest unstable
	Temperature, humidity, lighting, ventilation unsuitable
	Stairs
	Trailing leads, untidy storage or other trip hazards
Other factors	<p>Is movement or posture hindered by clothing or PPE?          Is suitable PPE available and being worn?          Quantity, availability and suitability of equipment?          Staffing levels          Supervision of manual handling activities</p>

*Adapted from Schedule 3, to the Safety, Health and Welfare at Work (General Application) Regulations 2007.*

## Appendix II

### Guideline lifting and lowering weights by work zone



- *The guideline weights assume that the load is readily grasped with both hands and that the operation takes place with the lifter in a stable body position.*
- *The guideline weights are for infrequent operations up to about thirty operations per hour, where the pace of work is not forced, adequate pauses to rest or use different muscles are possible and the load is not handled by the lifter for any length of time.*

Reference: HSA (2007) *Guide to the Safety, Health and Welfare at Work (General Application) Regulations 2007*

Note: While the Safety, Health and Welfare (General Application) Regulations 2007, does not set specific requirements such as weight limits, the guidance above offers numerical guidelines which take into account weight, repetition and location of a lift as a means of identifying activities which involve risk.

### **Appendix III– Task Specific Risk Assessment**

Where the ward/department level risk assessment identifies that a manual handling activity presents a risk of injury, the activity must be assessed in greater detail to determine what controls are required. The stages in the risk assessment are as follows:

- Collect information on how the task is performed and identify the key stages of the task – describe how the task is carried out;
- Collect technical information, which may include the load weight, its size, the number of lifts required, the physical dimensions of the work area and general information about the work environment;
- Identify the problems or risk factors. Consider the risk factors listed in Appendix I and decide what risk factors are present in the particular manual handling activity;
- Identify the improvements that are required to avoid or reduce the risk from this activity. Where reasonably practicable, take measures to avoid the need for a manual handling task that has been identified as posing a risk. Where the task cannot be avoided the employer must introduce organisational measures or use mechanical means to reduce the risk. The risk assessment should be documented and should include the controls required. This information should be communicated and made available to all staff undertaking the activity;
- Review the effectiveness of the control measures or solution – the effectiveness is the degree to which the control measures have avoided or reduced the risk of injury.

*(Reference: HSA (2011) Guidance on the Management of Manual Handling in Healthcare)*

## Appendix IV

### Department Checklist and Sample Risk Assessment Form (Generic Unit / Department and Task Specific)

#### Risk assessment

- Have manual handling tasks which present a risk of injury to staff been identified?
- Are risk assessments being carried out in keeping with the organisation's manual handling policy and procedures?
- Are there procedures in place for the emergency evacuation of the department and have the manual handling needs of service users been taken into account?

#### Training, information, supervision

- Have employees received induction training?
- Have employees been given up-to-date training and information in safe manual handling techniques, including the safe use of manual handling aids?
- Are there records kept of training and information provided? Is adherence to safe working procedures supervised and corrective action taken as appropriate?
- Are there procedures in place to ensure that there is good communication during people handling activities?

#### Employees' ability/experience

- In addition to the training and information mentioned above, do the employees require any specialised training or experience, taking account of the category of service user or type of work carried out in the department?
- Are there procedures in place to ensure the safety of employees who may have health issues which affect their ability to undertake manual handling tasks?

#### Consultation and participation

- Are employees consulted on and encouraged to participate in health and safety matters? (E.g., have employees been consulted on manual handling risks?)

#### Incident reporting and investigation

- Is there a system in place for the reporting, recording and investigation of work related accidents and incidents?

#### Resources

- Have the resources required to ensure safe manual handling in the department been identified based on risk assessment?

#### Equipment

- Is the manual handling equipment available suitable for the needs of the department and maintained in proper working order?
- Are there maintenance records available?
- Is there a system in place to ensure that unsafe equipment is taken out of use and clearly marked as unsafe?

**Environment**

- Is the physical environment conducive to safe manual handling activities?
- Can the manual handling equipment provided be used safely in the work environment?
- Are floor surfaces in good condition and are changes in floor level clearly marked?
- Is the lighting adequate and the temperature comfortable?

**Performance monitoring and review**

- Have key performance indicators been identified and progress reviewed?
- Key performance indicators may include:
  - The number of reported manual handling related accidents and incidents;
  - The number of additional controls identified following risk assessment and the percentage of these that have been put in place
  - Percentage of all staff requiring training whose training is up to date.
- Have matters which cannot be dealt with locally been brought to the attention of more senior management in line with local procedures?

This is not an exhaustive list.

Reference: HSA (2011) Guidance on the Management of Manual Handling in Healthcare

## Health and Safety General Risk Assessment Form

<b>Division:</b>			<b>Source of Risk:</b>			
<b>HG/CHO/NAS/Function:</b>			<b>Primary Impact Category:</b>			
<b>Hospital Site/Service:</b>			<b>Risk Type:</b>			
<b>Dept/Service Site:</b>			<b>Name of Risk Owner (BLOCKS):</b>			
<b>Date of Assessment:</b>			<b>Signature of Risk Owner:</b>			
<b>Unique ID No:</b>			<b>Risk Co-Ordinator</b>			
			<b>Risk Assessor (s):</b>			
HAZARD & RISK DESCRIPTION	EXISTING CONTROL MEASURES	ADDITIONAL CONTROLS REQUIRED	ACTION OWNER	DUE DATE		
INITIAL RISK			Risk Status			
Likelihood	Impact	Initial Risk Rating	Open	Monitor	Closed	

## Appendix V

### Sample – People Handling Risk Assessment Form

1. Is the service user able to mobilise independently?  No  Yes If yes please date and sign the form *here*.

Date:

Signature :

Ward:

If **NO** please proceed with the assessment and sign below

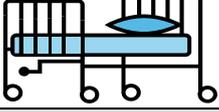
<p><b>2. Weight kgs</b> _____  <i>Specialist equipment may be required if the service users weight exceeds the safe working load of any equipment. Please detail</i></p>	<p><b>2. Medication:</b> is medication relevant to moving and handling e.g. sedation/pain/anti spasmodic medication  <input type="checkbox"/> No <input type="checkbox"/> Yes  <i>If yes refer to Drug Kardex</i></p>	
<p><b>4. Comprehension/Communication/Behaviour:</b>          Can the service user understand &amp; participate in simple instructions? <input type="checkbox"/> Yes <input type="checkbox"/> No _____          Will behaviour affect cooperation with moving and handling?  <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>5. History of Falls</b> <input type="checkbox"/> No <input type="checkbox"/> Yes  <i>If yes complete falls risk assessment</i></p>	
<p><b>6. Environmental constraints;</b> are confined space/non-adjustable equipment/floors/ramps/ service users attachments an issue <input type="checkbox"/> No <input type="checkbox"/> Yes  <i>If yes please detail</i></p>	<p><b>7. Carers Ability / Experience:</b>          Does handling this service user require any additional specialised training/instructions?  <input type="checkbox"/> No <input type="checkbox"/> Yes ( <i>if yes report to Line Manager</i>)</p>	
<p><b>8. Current Mobility</b>          Is assistance required to mobilize <input type="checkbox"/> No <input type="checkbox"/> Yes If yes how many carers are required? _____          Are mobility aids currently used? <input type="checkbox"/> No <input type="checkbox"/> Yes <i>please detail</i> _____          Have these been brought with the service user? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>		
<p><b>9. List main physical limitations</b> – surgery, sedation, impaired sight or hearing, loss of use of limbs, general physical condition, stature, stroke, skin condition, bone density, pain,</p>		
<p><b>10. Is further assistance required to complete this assessment?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes  <b>Refer to:</b> e.g. Line Manager, Physiotherapist, Manual Handling Instructor</p>		
<p><b>People Handling Risk Level</b></p> <p><input type="checkbox"/> <b>High</b> – completely dependent, unpredictable, minimum of 2 carers &amp; equipment required. More carers may be required for heavier service users  <input type="checkbox"/> <b>Medium</b>– requires some assistance usually 1 carer &amp; equipment, 2 carers may be needed for some activities.  <input type="checkbox"/> <b>Low</b>–requires no hands on assistance. May require verbal guidance/ equipment</p> <ul style="list-style-type: none"> <li>• <b>If the service users condition changes the moving and handling risk assessment will need to be reviewed.</b></li> </ul> <p style="text-align: center;"><i>The Handling Care Plan overleaf should now be completed</i></p>		
Date:	Assessor/s:	Signature:
<p><u>Assessment update/comments</u></p> <p>Date: _____ Signature: _____ Ward: _____</p>		
<p><u>Assessment update / comments</u></p> <p>Date: _____ Signature: _____ Ward: _____</p>		

**Handling Plan**

People Handling Risk Level  High  Medium  Low *as per the handling risk assessment*

Are there any special considerations about this service user?  No  Yes

*If yes please detail briefly*

Activity	Date	No of Carers / Equipment / service user action/ comments	Initials
<b>Re-positioning</b> 			
Consider use of		• hoist • sliding sheets • monkey pole	
<b>Sitting forwards</b> 			
Consider use of		• electric bed • hoist • rope ladder	
<b>Sitting to standing</b> 			
Consider use of		• hoist • standing hoist • handling belt	
<b>Walking / Stairs</b> 			
Consider use of		• rollator • zimmer frame • crutches • stick	
<b>Toileting</b> 			
Consider use of		• standing hoist • commode • toilet riser	
<b>Bath/Shower</b> 			
Consider use of		• hoist • shower chair	
<b>Transport and Other Activities</b>			
Advice Re use of		• wheelchair • rollerboard • transfer board	
<b>Hoist</b>	<b>Name:</b>	<b>Type:</b>	
<b>Sling Types:</b> <b>Size</b>			
<b>Date:</b>	<b>Name/s :</b>	<b>Signature/s :</b>	
<b>Reason for updating the handling plan:</b>			
<b>Date:</b>	<b>Name/s :</b>	<b>Signature/s :</b>	

## Guidance on use of the People Handling Risk Assessment Template

The aim of the people handling risk assessment and handling plan is to clarify safe methods of handling each service user, develop a handling care plan so that injury to staff may be avoided and service user care be enhanced. The assessment should be completed by the staff member “admitting” the service user.

**Addressograph** Simply attach sticker or fill in details.

### 1) Independent

If the service user is independent in all tasks please date and sign the form here. No further information is required. Please bear in mind that the need to complete the assessment may change during the admission as independent service users may become dependent due to surgery, deterioration etc. If the service user is not independent please proceed with the assessment.

### 2) Weight

Record the service users weight in kgs, body mass index (BMI) if known. Where the service users weight exceeds the safe working load (SWL) of equipment or furniture, it may be necessary to organise equipment/furniture with increased weight capacity prior to admission on to the ward.

### 3) Medication

Is the service user is on any medication which affects their ability to move e.g. Parkinson’s drugs, sedatives, anti-spasmodic drugs. Does movement of the service user need to coincide with their medication? If yes refer to the service user Drug Kardex.

### 4) Comprehension / Communication / Behaviour

Is the service user able to understand simple verbal instructions from carers? Is there a language difficulty? Will the carer understand the service user? Is the service user intermittently confused? Will the service users behaviour affect their ability to co-operate with moving and handling?

### 5) Falls Risk Identification

Please note if the service user has a recognised history of falls or seizures as a falls risk assessment may be required.

### 6) Environmental Constraints

Note any environmental issues that may interfere with the ability to move and handle safely e.g. Is there enough room to move a hoist? Is furniture easy to move? Is equipment adjustable in height? Are floor surfaces likely to be uneven or slippery? Are the service user’s attachments likely to constrain movement?

### 7) Carer’s ability / experience

Does handling this service user require any additional specialized training or experience beyond standard moving and handling training? E.g. spinal rolls, abnormal muscle tone / movement patterns. Does handling this service user present a risk to carers with underlying health issues, restricted mobility or pregnant carers? If so report to the line manager.

### 8) Current Mobility

Is the service user able to mobilise independently, do they require assistance and if so how many carers? Please detail mobility aids used if any. Please detail any handling equipment used prior to admission.

### 9) Physical limitations

Please list the main physical limitations to the service users mobility e.g. impaired sight or hearing, surgery, pain, loss of use of limbs, pain, etc.

### 10) Further assistance

If following your assessment, you feel you are unable to complete the people handling assessment and handling plan, or for complex moving and handling assessments, please tick yes and refer to the appropriate personnel e.g. line manager, physiotherapist, occupational therapist, manual handling instructor.

### Now complete the Person Moving and Handling Risk Rating Level

Tick in the appropriate box whether the service user has been classified as a **High, Medium or Low** risk as determined by your assessment. Date and sign your name and ward.

### The Handling Care Plan should now be completed.

Please bear in mind that the need to complete the assessment may change during the admission as independent service users may become dependent due to surgery, deterioration etc.

## Guidance on the use of the Handling Plan

The Handling Plan gives guidance as to the most appropriate method of moving a service user. The methods chosen should reflect what is taught in people handling training and should be safe for staff who are most vulnerable during handling tasks e.g. those with less experience or strength, those with restricted mobility or other underlying health issues. In certain situations the techniques may need to be modified to reflect the individual handling capability of staff or for service users who require specialized training / instructions

### People Handling Risk Level

Tick in the appropriate box whether the service user has been classed as low, medium or high risk, as determined by the moving and handling assessment.

### Special Considerations

If there are any special considerations which staff should be aware of about the service user e.g. poor eyesight or hearing, please tick 'Yes' and detail briefly.

### Activities

The most common handling activities are

- turning in bed, moving up the bed,
- lying to sitting
- transferring from bed to chair, sitting to standing
- walking, stairs
- toileting , bathing / showering
- bed to bed transfers, ward to ward transfers

**There are 3 lines per activity which allows one line for the initial assessment and two lines for 2 further reviews. The handling plan should be updated if the service user status changes. Please date and initial each entry.**

### No of Carers

Please tick whether the service user is independent or not in that particular task. If the service user is not independent, indicate how many carers are required to assist with the task. *If the task is not applicable to the service user please note by entering N/A in the comment section.*

### Equipment

Write a brief description of type of equipment required e.g. hoist, sliding sheet,

### Service User Action

Can the service user complete the task with equipment? E.g. walk with a walking frame etc

### Use of hoist

If a **service user** requires the use of a hoist for safe transfers, the name & type of hoist to be used must be documented (e.g. Arjo sit to stand hoist), the sling type (e.g. Toileting sling) and sling size (e.g. Small, medium, large, extra large) should also be noted.

**NB: All slings should be inspected before use to ensure they are intact and in good working order**

### Transport other activities

Nursing staff should be consulted as to the most appropriate method of transport of the service user off the ward, or where lateral transfers are required. This should be communicated at handover.

### Where to place the form

The people moving & handling assessment and handling plan should be stored according to local policy. No sensitive diagnoses or other details should be recorded on this form. Finally - Print **your name, department or community area, and sign and date the form.**

### Updating the Handling Plan

If the service user condition changes the handling plan may also change. Please briefly indicate why e.g. post surgery, condition deteriorated etc, and **ensure the change in the service users condition is documented in the nursing note**

**Appendix VI Audit Tool**

	<b>Audit on the Implementation of the HSE Manual and People Handling Policy, 2018</b>	<b>Yes</b>	<b>No</b>	<b>NA</b>	<b>Comment</b>
1	Does each department have the HSE Manual and People Handling Policy, 2018?				
2	Are there local guidelines / standard operating procedures in place to support implementation of this Policy?				
3	Is there a system in place for the appropriate circulation/communication of this policy to all employees?				
4	Have risk assessments been completed on the appropriate Risk Assessment Forms?				
5	Have the control measures identified through the risk assessment process been implemented?				
6	Has appropriate information, instruction, supervision and training been provided based on risk assessment?				
7	Is there a procedure in place for reporting all accidents/incidents/near misses?				
8	Is there a system in place to monitor compliance with this Policy?				

## VII The Principles of good Manual Handling

	<b>11 Principles<sup>2</sup></b>		<b>8 Principles<sup>3</sup></b>
	<b>Principles of good manual handling</b>		<b>Principles of Safer Handling</b>
1	Think before you lift.		Assess TILE – Know your capabilities
2	Keep the load close to your waist.	1	Load close to the body
3	Adopt a stable position.	2	Broad stable base
4	Ensure a good hold on the load.	3	Good hold, elbows tucked in
5	At the start of the lift, moderate flexion (slight bending) of the back, hips and knees is preferable to fully flexing the back (stooping) or the hips and knees (squatting).	4	Bend the knees
		5	Use your legs or weight transference
6	Don't flex your spine any further as you lift.	6	Back in neutral
7	Avoid twisting the trunk or leaning sideways, especially while the back is bent.	7	Avoid combined bending and twisting when lifting
8	Keep your head up while handling.	8	Move smoothly, if possible lead with the head
9	Move smoothly.		
10	Don't lift more than you can easily manage.		Assess Tile – Know your capabilities
11	Put down, then adjust [if necessary].		

<sup>2</sup> Health and Safety Executive (2003) The Principles of Good Manual Handling: Achieving a Consensus.

<sup>3</sup> Dublin Hospital Group Risk Management Forum (2010) Patient Handling 2

## Appendix VIII

### Step-by Step Procedure for Policy Implementation

<b>Director of HR in relation to Occupational Safety and Health</b>	<b>Reference</b>
<ul style="list-style-type: none"> <li>Ensure this policy is reviewed and updated as appropriate</li> </ul>	HSE Corporate Safety Statement Section 2.5

<b>National Health and Safety Function</b>	<b>Reference</b>
<ul style="list-style-type: none"> <li>Review and revise this Policy three yearly or following any significant change in the matters to which it relates, whichever is the soonest</li> <li>Provide Occupational Safety and Health support</li> </ul>	HSE Corporate Safety Statement Section 2.9

<b>National Directors</b>	<b>Reference</b>
<ul style="list-style-type: none"> <li>Ensure arrangements are in place for identifying, evaluating, monitoring and auditing the risks associated with manual and people handling</li> </ul>	6.2.1
<ul style="list-style-type: none"> <li>Ensure the necessary resources are provided for implementation of this policy</li> </ul>	6.2.2

<b>Assistant National Directors, Hospital Group Chief Executive Officers, Chief Officers Community Health Organisations</b>	<b>Reference</b>
<ul style="list-style-type: none"> <li>Ensure there are adequate and appropriate arrangements in place for the successful implementation, monitoring, evaluation, audit and review of this Policy throughout their respective areas of responsibility</li> </ul>	6.3.1
<ul style="list-style-type: none"> <li>Ensure necessary resources are allocated and are available for the implementation of this Policy</li> </ul>	6.3.2
<ul style="list-style-type: none"> <li>Integrate performance indicators in relation to manual and people handling</li> </ul>	6.3.3
<ul style="list-style-type: none"> <li>In order to help minimise the potential for manual handling related injuries, utilise a pro active risk assessment and adopt an ergonomic approach when planning refurbishments or the construction of buildings by consulting with a wide group of professionals/employees at the planning and implementation stages.</li> </ul>	6.3.4
<ul style="list-style-type: none"> <li>Where 6.3.4 above relates to the structures within which people work, a similar principle would apply to any equipment/furniture used. Ensure the following in connection with the procurement of equipment/furniture:               <ol style="list-style-type: none"> <li>Establish a Multidisciplinary team to include end users.</li> <li>Apply ergonomic principles.</li> </ol> </li> </ul>	6.3.5
<ul style="list-style-type: none"> <li>Seek the advice of a competent person (e.g. Manual and People Handling Co-ordinator / Advisor/Instructor or equivalent, Health and Safety Advisor, Quality and Safety Manager) when appropriate.</li> </ul>	6.3.6
<ul style="list-style-type: none"> <li>Ensure all undergraduates have received a minimal acceptable standard of education and training to safely carry out their manual and people handling tasks within a HSE facility</li> </ul>	6.3.7

Local Senior Managers and Line Managers	Reference
<ul style="list-style-type: none"> <li>Ensure this Policy is brought to the attention of, and implemented by all employees and others as appropriate</li> </ul>	6.4.1
<ul style="list-style-type: none"> <li>In consultation with employee ensure that an operational plan is developed to support the implementation of this Manual Handling and People Handling Policy</li> </ul>	6.4.2
<ul style="list-style-type: none"> <li>Ensure that appropriate resources are available to support the implementation of this policy in their area</li> </ul>	6.4.3
<ul style="list-style-type: none"> <li>Where manual handling and/or people handling activities cannot be avoided, ensure that appropriate written risk assessments are carried out in consultation with employees, taking account of the working environment, systems of work and any necessary control measures put in place to reduce the level of risk as far as is reasonably practicable</li> </ul>	6.4.4
<ul style="list-style-type: none"> <li>Ensure the findings of the written risk assessment are recorded, implemented and communicated to the employee undertaking the tasks in question and reviewed when necessary</li> </ul>	6.4.5
<ul style="list-style-type: none"> <li>Ensure that the posses the necessary information, training and supervision to implement the standards for safe manual handling in their area of responsibility Ensure that where services have access to Manual and People Handling Co-ordinators/Advisors/Instructors, Quality and Safety Manager, Occupational Therapist, Physiotherapist their assistance/advice is sought where necessary. Where services require access to appropriate assistance/advice requests can be made through the National Health &amp; Safety Function at <a href="http://www.hse.ie/safetyandwellbeing">www.hse.ie/safetyandwellbeing</a></li> </ul>	6.4.6 6.4.7
<ul style="list-style-type: none"> <li>Ensure that a manual handling training needs assessment, informed by the risk assessment process, has been undertaken for each employee.</li> </ul>	6.4.8
<ul style="list-style-type: none"> <li>Ensure records of all training undertaken are maintained as per local arrangements</li> </ul>	6.4.9
<ul style="list-style-type: none"> <li>Ensure that refresher / update training is provided at no greater than three yearly intervals or where there is any major change in the work involved or equipment used, or when an employee is transferred to another activity requiring different loads to be handled.</li> </ul>	6.4.11
<ul style="list-style-type: none"> <li>Ensure employees are adequately supervised in the performance of their manual and people handling tasks.</li> </ul>	6.4.10
<p>Ensure Manual Handling Equipment is purchased in consultation with key stakeholders, e.g. Physiotherapists, Occupational Therapists, Moving &amp; Handling co-ordinators / Advisors / Instructors (where available), and any other appropriate personnel, and the needs of both service users and employees must be considered.</p> <p>This equipment must be easily accessible, properly maintained and service records retained.</p>	6.4.12
<ul style="list-style-type: none"> <li>Ensure that employees receive the necessary information, instruction, training and supervision on the correct use of manual handling and people handling equipment (e.g. hoists, small handling aids, self leveling trolleys). Training on the use of other work equipment should cover manual handling where necessary.</li> </ul>	6.4.13
<ul style="list-style-type: none"> <li>Ensure that induction for Agency Employee covers local Manual Handling</li> </ul>	6.4.14

and People Handling procedures.	
<ul style="list-style-type: none"> <li>• Liaise with the Occupational Health Department where health issues may have a bearing on an employees' ability to undertake manual handling and/or people handling</li> </ul>	6.4.15
<ul style="list-style-type: none"> <li>• Report unsafe environments and systems of work to the relevant senior manager and take immediate action that may be required to reduce or minimise the risk</li> </ul>	6.4.16
<ul style="list-style-type: none"> <li>• Investigate accidents, incidents and near misses in line with the HSE Safety Incident Management Policy, 2014</li> </ul>	6.4.17
<ul style="list-style-type: none"> <li>• Ensure that where risks cannot be controlled locally they are escalated to the appropriate service risk register.</li> </ul>	6.4.18

Employee	Reference
<ul style="list-style-type: none"> <li>• Adhere to and apply this Policy, any supporting local guidelines, operational plans and safe systems of work and any associated risk assessments and</li> </ul>	6.5.1
<ul style="list-style-type: none"> <li>• Take reasonable care of their own safety, health and welfare and that of others i.e. colleagues and service users when conducting manual handling and people handling activities</li> </ul>	6.5.2
<ul style="list-style-type: none"> <li>• Co-operate in the regular review of risk assessments and control measures to ensure that they are valid and are being effectively implemented and/or updated as required</li> </ul>	6.5.3
<ul style="list-style-type: none"> <li>• Attend mandatory manual handling / people handling training sessions and ensure skills taught are implemented</li> </ul>	6.5.4
<ul style="list-style-type: none"> <li>• Ensure their skills are current and inform their Manager of their training needs</li> </ul>	6.5.6
<ul style="list-style-type: none"> <li>• Be aware of the quality of their handling skills and work towards developing excellence in this area</li> </ul>	6.5.5
<ul style="list-style-type: none"> <li>• When undertaking team handling, use an agreed command to time procedure</li> </ul>	6.5.7
<ul style="list-style-type: none"> <li>• Make themselves aware of the safe working loads of equipment/furniture within their area</li> </ul>	6.5.8
<ul style="list-style-type: none"> <li>• Inform their line manager of any reason (e.g. musculo-skeletal injury, illness or pregnancy), which might affect their ability to perform manual handling and people handling tasks or increase the risk presented</li> </ul>	6.5.9
<ul style="list-style-type: none"> <li>• Work within their capabilities and limitations to ensure they are competent in using manual handling equipment in their area</li> </ul>	6.5.10
<ul style="list-style-type: none"> <li>• Report any defects in equipment/machinery or the place of work and any unsafe systems of work to their line manager</li> </ul>	6.5.11
<ul style="list-style-type: none"> <li>• Reporting accidents, incidents and any difficulties in the implementation of this policy</li> </ul>	6.5.12
<ul style="list-style-type: none"> <li>• Ensure their clothing and footwear is appropriate for their work</li> </ul>	6.5.13
<ul style="list-style-type: none"> <li>• Inform their Line Manager if they experience any difficulties in the implementation of this policy</li> </ul>	6.5.14

### HSE Manual and People Handling Implementation Plan

Implementation of this Policy forms an integral part of the Safety Management System and is underpinned by effective consultation, communication, supervision, monitoring, audit and review. The following flowchart illustrates the day to day implementation steps.

