

Policy	Approved By:	Owner:	Author:
Title: Manual Handling	Health and Safety Group	Head of People	Physiotherapist

1. Policy Statement

This policy has been drawn up with reference to the Manual Handling Operations Regulations 1992 (as amended in 2002). It is underpinned by the statutory requirement to carry out an assessment of risk to the health and safety of employees and others at work as required by the Management of Health and Safety At Work Regulations 1999.

Highland Hospice recognise its responsibility to ensure that all reasonable precautions are taken to provide and maintain working conditions that are safe, healthy and compliant with all statutory requirements, guidance and codes of practice. Although an organisation-wide approach has been established, detailed arrangements for controlling moving and handling risks remain the responsibility of Directors, Heads of Service and Operational Managers.

The Highland Hospice acknowledges that manual handling operations have a potential to cause personal injury, and as such require a robust risk assessment approach to the manual handling of loads to reduce the risks that are within its area of responsibility so far as reasonably practicable.

2. Scope

This policy applies to all Highland Hospice employees including students, those on work experience and to contractors and volunteers involved in manual handling activities in connection with their duties at Highland Hospice.

This Policy applies to all “workplaces” which include: all premises where Highland Hospice staff, volunteers and contractors (including bank staff) work and, which are the management responsibility and/or are in the ownership of other organisations or individuals (shared premises).

This policy should be read in conjunction with Moving and Handling of Patients DOC02045 which covers the specific responsibilities required to ensure safe manual handling of patients.

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3. Definitions

3.1 Manual handling

“Manual Handling” means any transportation or support of a load by direct or indirect human effort. This includes lifting, lowering, pushing, pulling, holding or moving a load by hand or bodily force. (The application of human effort for a purpose other than transporting or supporting a load is not a manual handling operation).

3.2 Load

A “load” is defined as a separate moveable object. This can be a person, animal or inanimate object, but not an implement, tool or machine whilst being used for its intended purpose.

3.3 Ergonomics

The means by which the working environment and working practices are altered to more suitably match the individual thus reducing a risk of injury.

3.4 Reasonably Practical

Balancing the level of risk against the potential resource input required to complete the activity in order to reduce or remove the risk.

4. References

- 4.1 [Health & Safety at Work etc. Act \(1974\)](#)
- 4.2 [Manual Handling Operations Regulations 1992](#) as amended by the Health and Safety (Miscellaneous Amendments) Regulations 2002
- 4.3 Management of Health and Safety at Work Regulations 1999

5. Associated Documents / Guidance

- 5.1 Health and Safety Policy DOC01020
- 5.2 [Moving and Handling of Patients DOC02045](#)
- 5.3 [Bariatric Policy DOC02066](#)
- 5.4 [Bedrails – Safety and Use of SOP02046](#)
- 5.5 [Falls Management SOP02014](#)
- 5.6 [Reporting Procedures for non-clinical accidents, incidents and near misses SOP01021](#)

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5.7 [RCN Moving and Handling Guidance](#)

5.8 Risk Assessment (G Drive)

6. Roles & Responsibilities

6.1 The **Chief Executive** is responsible for:-

6.1.1 Ensuring there are arrangements for identifying, evaluating and managing risk associated with manual handling.

6.1.2 Providing resources for putting the Policy into practice.

6.1.3 Ensuring that there are systems in place for monitoring incidents linked to manual handling activities and that Highland Hospice regularly reviews the effectiveness of the Policy.

6.2 **Departmental Managers** are responsible for: -

6.2.1 Identifying manual handling risks within their department and to identify measures to reduce risk.

6.2.2 Ensuring that manual handling risk assessments are carried out, updated as necessary, reviewed every year, and details kept.

6.2.3 Ensuring manual handling risk assessments are carried out for employees with specific manual handling needs such as expectant mothers.

6.2.4 Being fully aware of the issues highlighted within current manual handling risk assessments carried out for their areas.

6.2.5 Putting into practice, as far as reasonably practicable, any control measures identified through risk assessments or required under this policy.

6.2.6 Recording details of action plans for reducing risk and passing information to senior managers to ensure risk control measures are prioritized.

6.2.7 Ensuring that Vantage is completed for all injuries or near misses involving manual handling and keep up-to-date details of all manual handling incidents.

6.2.8 Investigating any incident related to manual handling and taking appropriate measures to reduce or eliminate the risk of any recurrence.

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- 6.2.9 Taking account of the risks created by manual handling in the design of new facilities or work practices, and taking advice when necessary.
- 6.2.10 Ensuring that all employees and volunteers receive relevant training before starting their jobs and that they are updated regularly.
- 6.2.11 Ensuring that training is recorded both at induction and refresher training sessions via Learning and Development for employees; training for volunteers is recorded by the Voluntary Services Office on Better Impact
- 6.2.12 Referrals to the Occupational Health Service, when appropriate.
- 6.3 **Employees and volunteers** are responsible for: -
 - 6.3.1 Taking reasonable care for their own safety and that of colleagues and patients.
 - 6.3.2 The correct use of manual handling equipment provided.
 - 6.3.3 Following safe systems of work shown in the risk assessments.
 - 6.3.4 Completing Manual Handling mandatory training together with other courses identified by their line manager.
 - 6.3.5 Asking for extra training if they feel that they need it.
 - 6.3.6 Assessing the task before carrying out any manual handling activity to ensure appropriate precautions are taken.
 - 6.3.7 Reporting to their line manager any risks which they think have not been managed effectively.
 - 6.3.8 Avoiding hazardous lifting in all but exceptional or life-threatening situations and reporting any injury or significant pain which may have been caused by manual handling at work and any personal factor (such as musculoskeletal injury, illness, or pregnancy), which might increase the risk
 - 6.3.9 Completing Vantage promptly and reporting all incidents involving manual handling.
 - 6.3.10 Reporting any concerns regarding the risk assessment or safe system of work to their departmental manager.

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6.4 **Physiotherapist** is responsible for: -

6.4.1 Practical manual handling and lifting equipment training in clinical areas. Please see policy guidance clinical effectiveness entitled '*Moving and Handling Patients*' DOC02045

6.4.2 Assisting department managers with risk assessments

6.5 The **Occupational Health Service** is responsible for: -

6.5.1 Carrying out pre-employment screening and advising the Manager of any health reasons that may affect a candidate's ability to carry out manual handling duties;

6.5.2 Providing health assessment and advice for employees who are referred to the service.

6.5.3 Advising managers and / or employees of the outcomes of a health assessment and assisting in the achievement of solutions.

6.5.4 Providing assessment and treatment/advice for employees with musculoskeletal injuries.

6.5.5 Supporting workplace assessments to assist with phased return to work or where there has been a change to the employee's health.

7. Principles

7.1 Highland Hospice is committed to applying a safe system of work to all manual handling situations as defined in the Manual Handling Operations Regulations (1992) as amended in 2002, that is: any lifting, lowering, pushing, pulling, carrying, supporting or moving of a load by hand or by bodily force.

7.2 Highland Hospice is committed to a policy of minimal manual lifting.

7.3 Highland Hospice is committed to eliminating, so far as is reasonably practicable, manual handling operations which incur a significant risk of injury, or otherwise reduce the level of risk to the lowest level reasonably practicable. To facilitate this Highland Hospice is committed to providing:

- risk assessment
- adequate manual handling training
- manual handling equipment

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- guidance on site.
- Improvements to control risk created by manual handling

7.4 Contribute to helping employees who have musculoskeletal symptoms;

7.5 Reinforce the responsibilities of managers for manual handling activities within their areas of responsibility.

7.6 Staff Groupings

7.7 The level of risk for individual staff roles will be determined with reference to risk assessment processes.

- Low Risk (Non-Patient Handling) - all non-patient handling staff (Volunteer drivers, rehab and wellbeing services, Helping Hands, café, shops, ward reception, housekeeping
- Medium Risk (Minimal Patient Handling) - all employees who come into contact with patients, whether or not they may require to assist those patients to move/transfer. i.e. Social worker, Chaplin,
- High Risk (Patient Handling) - For all employees who handle patients in a variety of situations and volunteer health care assistants.

8. Training

8.1 Low risk roles - there is a Mandatory LearnPro (employees) or MS Forms (volunteers) module covering the theory of Moving and Handling. These are refreshed every 12 months.

8.2 All clinical employees and volunteers who handle patients receive appropriate manual handling competency-based training in accordance with the Scottish M&H passport at the earliest opportunity according to the tasks in which employees are involved and then yearly refresher competency assessments.

8.3 Highland Hospice will provide training and guidance on:

- minimal manual handling
- legislation and policy
- ergonomics
- risk assessment

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- back care
- possible injuries that may be sustained
- fitness and health education
- safe manual handling principles, maneuvers and efficient movement
- using manual handling equipment

9. Approval

Consultation through Health, Safety and Wellbeing Group with formal approval through Senior Management Team.

10. Review and Monitoring Procedure

10.1 Documents shall be periodically reviewed at least every three years by the policy owner.

10.2 Any suggested improvements or modifications to this document are to be passed on to the policy owner for discussion at the next Health, Safety and Wellbeing Committee meeting.

10.3 Monitoring non-clinical manual handling activities will occur through risk management processes, compliance to identified controls and incident reporting mechanisms.

10.4 Monitoring clinical manual handling activities will occur through

- Use of correct clinical documentation
- Observation during clinical practice
- Review of clinical incidents
- Review risk assessments and compliance to identified controls
- Trends analysis when appropriate
- Concerns will be addressed through the Clinical Governance Group.

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DOCUMENT REVISION SUMMARY

DOC No: 01026 Title: Manual Handling

Referenced DOCs: 01020, 01021, 02014, 02045, 02046, 02066

Details of Revision	Revision	Effective Date
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Complete review of policy and alignment with new policy	A	10/09/2024
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