



**APRIL COMPLETE CARE SOLUTIONS LTD
(The “Company”)**

Manual Handling Policy

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1. Introduction

1.1 This policy should be read in conjunction with the Health and Safety at work Act 1974, the Manual Handling Operations Regulations 1992 (MHOR), the Management of Health and Safety at Work Regulations 1999 and the April Complete Care Solutions Health and Safety Policy.

1.2 This policy is relevant to all members of staff. Some staff groups have a greater exposure to risk than others, but because of the multifaceted nature of back pain no staff group should consider themselves to be risk free.

2. Policy objectives

2.1 The Policy has two overall objectives. Firstly, to ensure that client handling is undertaken in a safe, dignified and comfortable way. Secondly, to minimise the amount of lost time resulting from back and musculo-skeletal injury to staff by:

- Minimising the number of back and musculo-skeletal injuries suffered by employees.
- Helping staff with existing back or musculo-skeletal injuries to remain in work.
- Facilitating sustainable, early returns to work for staff absent with back and musculo-skeletal injuries.

3. Key principles

3.1 April will follow the hierarchy of measures as described in the MHOR. These are:

- Avoid hazardous manual handling operations so far as is reasonably practicable
- Make an assessment of all manual handling tasks that cannot be avoided.
- Reduce the risk of injury so far as is reasonably practicable. In determining what is reasonably practicable consideration will be given to:
 - The balance between the degree of risk to staff against the cost of doing something about it in terms of resources, staff, time and effort.
 - The magnitude of the risk arising from the activity in question in relation to the benefit to the user of the service involved.

4. Manual handling

4.1 Avoidance

4.1.1 The first thought is to find ways of avoiding hazardous manual handling tasks. This might require the work to be done in a different way or the handling to be mechanised, for example by the use of a hoist or other equipment.

4.2 Assessment

4.2.1 A risk assessment must be carried out for all hazardous manual handling that cannot be reasonably avoided. An ergonomic risk assessment requires consideration of all the factors associated with the manual handling operation. This should be done with a systematic approach under the categories of:

- The task being undertaken
- The individual undertaking the task

- The load (which may be a person)
- The working environment.

4.3 Reducing the risk

4.3.1 April's policy is to reduce risk from manual handling tasks to the lowest level that is reasonably practicable. This is not the same as eliminating risk, which although laudable is rarely possible. A critical part of the risk assessment is to consider the acceptable level of residual risk. When making this judgement a balance has to be drawn between the degree of risk (as determined by the assessment), the cost of averting the risk, the duty of care, and, when a client is involved, the choices expressed by the client. Individual employees should be advised and supported in this by the Registered Manager.

4.4 Recording the assessment

4.4.1 Significant findings of risk assessments must be recorded and the record kept available, as long as it remains relevant. An assessment need not be recorded if it could easily be repeated and explained at any time because it is simple and obvious, or because the risk is low, is only going to last a short time and the time taken to record it is disproportionate to the value.

4.4.2 All clients requiring manual handling must have client handling assessments recorded in their care plans.

4.4.3 Staff will forward risks rated as high to the Manual Handling Trainer who will support the staff to lessen the risk to an acceptable level.

4.5 Capabilities and training

4.5.1 April will ensure that all staff have the capabilities necessary to carry out their jobs without unreasonable risk to themselves and others. Due to the range of work undertaken by April different staff groups will require different capabilities. Training will be provided to make sure that staff obtain and maintain these capabilities.

4.5.2 Employers are required by the Management of Health and Safety at Work Regulations 1999 to assess the risks to health and safety to staff and others arising from the work they are undertaking. As a consequence of this assessment each service will:

- Identify the manual handling capabilities required by its staff to work in that particular area.
- Determine the level of risk to which staff are exposed.

4.5.3 Posts with significant manual handling risks require completion of a Manual Handling Capabilities Appraisal & Training Needs Analysis Form for each member of staff. These forms record 3 things:

1. The equipment and techniques necessary for the job.
2. A health declaration.
3. A training needs analysis.

4.5.4 It is the responsibility of the Registered Manager to ensure that these forms are completed for all staff.

4.5.5 Completed forms will be used for an annual appraisal of the manual handling and training needs of staff within that service. This process will produce training that is relevant and timely; line managers and supervisors will use supervision time to complete the forms. Individual members of staff will sign their Manual Handling Capabilities Appraisal & Training Needs Analysis Form copies of which must then be sent to the office for storage as part of the staff training record. This form will provide evidence that April has:

- Assessed the risks associated with each post,
- Assessed the capabilities of its staff to undertake the roles for which they have been employed, and
- Provided the necessary training to bridge any gaps.

4.5.6 The office will follow up staff who fail to return their Manual Handling Capabilities Appraisal & Training Needs Analysis Form as part of the existing process for ensuring all April staff attend the relevant mandatory training. A completed Manual Handling Capabilities Appraisal & Training Needs Analysis Form provides evidence that manual handling competence, training needs analysis, relevant training and health surveillance has been completed for all staff.

4.5.7 The Manager is responsible for ensuring that staff complete training as identified on the Training Needs Analysis.

4.5.8 New starters must be competent in the identified areas before working unsupervised in activities requiring those capabilities.

4.5.9 Staff in posts for which manual handling risk is low are expected to attend the mandatory training designed for this group within 6 months of employment, with regular refresher courses.

5. Manual handling equipment

5.1.1 In many cases manual handling operations require equipment to reduce the risk to an acceptable level. Provision of equipment in itself is rarely sufficient to ensure that the risk is managed effectively. Managers have to ensure that:-

- Equipment is appropriate for its intended purpose.
- Staff are trained in the use of the equipment.
- Staff are aware of the existence of the equipment.
- The equipment is stored in a convenient and easily accessible place.
- Equipment is available for use when needed.
- There is sufficient equipment provided to match demand.
- Equipment is serviced and maintained to meet manufacturers' standards.
- Where appropriate equipment conforms to the Lifting Operations and Lifting Equipment Regulations 1998 (LOLER) and the Provision and Use of Work Equipment Regulations 1998 (PUWER).

6. Back care and ergonomics

6.1 Ergonomics analyses the way people interact with their surroundings, their equipment, the buildings they work in and the organisation of their activities. Ergonomics aims to improve the interaction to achieve better safety, improved productivity and improved job satisfaction.

April recognises that a modern, ergonomic approach will reduce the amount of staff absence and improve productivity

6.2 Client handling is known to be a significant cause of musculo-skeletal injury within the health care sector, hence the existence of specific employment law to try and control its harmful effects. However, recent developments in community care have resulted in health care workers undertaking much less client handling. Unfortunately they are still exposed to as much risk from many of the tasks that they continue to undertake on a daily basis. Examples of these tasks include:

- Leg ulcer management (Community Nursing).
- Stroke rehabilitation and therapeutic handling.
- Bathing and dressing.
- The use of computer workstations and display screens.

6.3 April is committed to reducing the likelihood of injury from all tasks undertaken by its employees, not just those for which there is specific legislation.

6.4 The manual Handling trainer will provide ergonomic advice and assessment to any April employee. Staff absent from work for more than 10 working days due to back or musculoskeletal injury should inform the Care manager to arrange a return to work assessment. Common referrals for ergonomic advice include:

- Return to work assessment and support.
- Workplace assessment.
- Seating assessment.
- Environmental assessment.
- Workplace adaptations.

7. Health surveillance

7.1 April has a legal duty to provide health surveillance for staff with an identifiable health condition related to their work (MHSWR). All staff must fill in a Health Declaration form. Information gained from this process allows the manager to check the effectiveness of control measures, review the risk assessment and protect individuals at increased risk.

8. Responsibility and accountability

8.1 Registered Manager

8.1.1 The Registered Manager is responsible for ensuring that staff are adequately skilled and have the necessary information to undertake their roles within April. These responsibilities include:

- Assessing the capabilities of staff to carry out the work for which they are employed (using the process described above).
- Ensuring that new staff do not commence their duties until they have the appropriate capabilities to do so,
- Allowing sufficient time for staff to undertake training during their working hours.
- Maintaining accurate training records

FORM PP-09

- Ensuring all clients with manual handling needs have current and accurate client handling assessments in their care plans.
- Maintain accurate load handling assessments for all non-client tasks with significant risks of injury.
- Ensure that manual handling equipment is managed in accordance with Section 5 of this policy.
- Addressing known problems in the workplace that are contributing to musculo-skeletal disorders for staff.
- Discuss staff who have been absent with back or musculoskeletal injury for over 2 weeks with the Registered Manager. This may lead to a return to work assessment and support to facilitate an early return to work.
- Ensure that staff adhere to the policy. Persistent breaches of policy should be dealt with by performance or disciplinary procedures.
- Ensure that Manual Handling Capabilities Appraisal & Training Needs Analysis are completed and acted on for all staff with significant manual handling job components.
- Ensure all staff attend back care and manual handling training appropriate to their risk profile and training needs analysis.
- Complete and record a full risk assessment for pregnant staff and for staff with a known musculo-skeletal injury.

8.2 Staff

- Assess manual handling risk before undertaking any hazardous tasks.
- Be available and willing to participate in and contribute to manual handling training sessions. For certain groups of staff this will involve practical participation and practice.
- Inform their manager of any health condition that could affect their ability to safely carry out their job.
- Conform to agreed manual handling action plans.
- To only practice within the limits of their capabilities