

Policy/Procedure/Guideline**Safer Handling of Patients Policy****Version no:** 1.0**Issue Status:** Approved**Date of Ratification:** April 2016**Ratified by:** Clinical Governance
& Risk Board**Policy Author:** Bradley Woods**Policy Owner:** CG&RB**Review Frequency:** 1 Year**Identifiable Document Code:** PTUK018**Last Review:** April 2020**Next Review:** April 2021

<u>POLICY AWARENESS</u>	
People who need to know this policy in detail	All staff who come into contact with patients. Operational managers, Control Room Staff and Directors.
People who need to have a broad understanding of this policy	All Staff
People who need to know this policy exists	All Staff

<u>CHANGE CONTROL DETAILS</u>			
Date DD/MM/YY	Version	Description	Reason for changes
11/04/2016	1.0	New policy	New policy

Policy location:Main Policy Folder in Control Room and Crew Room
On PTUK Server

CONTENTS

1.0	Introduction	3
2.0	Purpose	3
3.0	Definitions	3
4.0	Duties	4
5.0	Training	6
6.0	Manual Handling Risk Assessments	7
7.0	Equipment	7
8.0	Infection Control Issues	8
9.0	Partners in Managing Manual Handling Risks	8
10.0	Monitoring	9
11.0	References	9
12.0	Appendices	9
	Appendix A - Legislation relating to Safer Manual Handling	10
	Appendix B - PATIENT MANUAL HANDLING RISK ASSESSMENT FORM	12
	Appendix C - EXAMPLES OF UNSAFE MANUAL HANDLING PRACTICE	18
	Appendix D - List of Manual Handling Equipment	19
	Appendix E - Equality Impact Assessment Tool	20
	Appendix F - Checklist for the Review and Approval of Procedural Document	21

1.0 Introduction

- 1.1 Patient Transport UK (PTUK) recognises and accepts its responsibilities as an employer to provide a safe and healthy work environment for all its employees as required under the Health & Safety at Work Act 1974 and the Manual Handling Operations Regulations 1992 amended 2004.
- 1.2 PTUK recognises the inherent risks, which moving and handling poses to the individual and by partnership working with our staff are committed to addressing these risks in a proactive way.
- 1.3 As far as is reasonably practicable, PTUK aim to eliminate moving and handling activities where there is a risk of injury. Where this is not possible PTUK aim to implement a range of actions supporting the continual development of safer handling practices and support mechanisms across the workplace, especially when dealing with bariatric persons.
- 1.4 PTUK will make suitable and sufficient assessment of all such risks and will offer information, training and supervision as necessary to staff when dealing with bariatric persons to minimise the risk to staff and patients.

2.0 Purpose

- 2.1 PTUK objectives are to provide high quality, clinically effective patient care within a safe working environment, using resources effectively and efficiently to achieve our goals.
- 2.2 Manual handling incidents may have a detrimental impact on PTUK's ability to achieve these objectives therefore PTUK is determined to reduce these risks wherever possible and support our staff in every way practicable.
- 2.3 This policy relates to manual handling activities with regard to bariatric persons undertaken by operational and non-operational staff of PTUK, in accordance with their clinical need and the environment in which they are placed.
- 2.4 The aim is to ensure that bariatric persons are moved in a dignified and comfortable manner so far as reasonably practicable.

3.0 Definitions

3.1 Manual Handling

This term refers to the transporting or supporting of a load including the lifting, putting down, pushing, pulling, carrying or moving by hand or by bodily force. The human effort may be directly applied to a load or indirectly, by hauling on a rope or pulling a lever. Manual handling may also be referred to as moving and handling.

3.2 Load

This is a moveable (discreet) object. This can be a person or inanimate object such as equipment, tools or machines.

3.3 Ergonomics

Is the interaction between people and their environment, which takes account of the activity and the equipment used within the activity. Making the job fit the person and not the person fitting the job.

3.4 Safer Handling

PTUK recognises that moving or lifting a person poses a risk. For those patients unable to move themselves they will be assisted to transfer themselves or will be moved with the aid of manual handling equipment where reasonable and practicable.

3.5 Injury or Musculoskeletal Disorders (MSD)

An injury may occur to any part of the body. A MSD indicates problems such as low back pain, joint injuries and repetitive strain injuries of various sorts. These can arise from manual handling incidents or from periods of static posture (such as sitting for a long period) or regular stooping, twisting, bending, and are often caused by cumulative effect rather than being attributable to a specific incident.

3.6 Hazard

Anything with the potential to do harm

3.7 Risk

The likelihood or chance that the hazard will lead to harm. The risk may reflect both the likelihood of harm occurring and its severity.

4.0 Duties

4.1 Duties of Directors of PTUK

- 4.1.1 The Directors of PTUK have overall responsibility and liability for ensuring the health, safety and welfare of employees, patients, visitors and those affected by PTUK activities. They have overall responsibility for the implementation of this policy, in accordance with legislation and national guidance.

4.2 Duties of Managers of PTUK

- 4.2.1 Managers are responsible for ensuring they have a comprehensive understanding of their own remit within this policy and any associated procedures and guidelines. They are also responsible for ensuring staff understand and comply with the policy and associated procedures.
- 4.2.2 Managers must ensure that they work in close association with the Training Manager to ensure that all operational and non-operational staff within their area of responsibility attends manual handling training and refresher training.
- 4.2.3 Managers must ensure that any accident relating to manual handling is logged on the Incident Report System, is investigated and remedial action is taken where necessary.
- 4.2.4 Managers must ensure that staff access the Occupational Health Service should a manual incident occur for assessment.

4.3 Training Manager and Clinical Lead Paramedic

- 4.2.1 The Training Manager and the Clinical Lead have a responsibility to ensure that current guidelines are taught on induction courses and that all staff are updated on a regular basis to include any changes in national guidance on moving and handling bariatric persons.

4.3 Employees

- 4.3.1 Operational and clinical staff should report (in confidence) to the Operations Director any personal condition, which may be detrimentally affected by manual handling activity or have an effect on their ability to undertake manual handling activities.
- 4.3.2 All staff must comply with information, instruction and training given to them in relation to manual handling activity.
- 4.3.3 Employees have a responsibility to maintain a level of fitness commensurate to the work they are employed for; a good standard of general fitness can help reduce injuries from manual handling operations.
- 4.3.4 Employees must ensure that their own health and safety is not put at undue risk when carrying out manual handling activities. This will require them to carry out a personal risk assessment before each event and to request assistance if required.
- 4.3.5 Employees should use specialist bariatric equipment that has been provided for them to minimise manual handling activities when dealing with bariatric persons.
- 4.3.6 Any difficulties encountered with bariatric manual handling equipment should be reported to the Control Room, the Training Manager and the Clinical Lead.

- 4.3.7 All staff have a responsibility to report manual handling incidents to the Control Room. A report will be made by or on behalf of any patient or staff member, who may be affected by a manual handling incident.
- 4.3.8 All staff are reminded of their obligations under the Health & Safety at Work Act 1974 Section 7:
‘it shall be the duty of every employee whilst at work to take reasonable care of the health and safety of themselves and other persons who may be affected by their acts and omissions at work’.
- 4.3.9 All staff are reminded of their obligations under the Manual Handling Operations Regulation 1992:
‘to make use of appropriate equipment provided for them. Such equipment will include machinery and other aids provided for the safe handling of loads’.

‘each employee while at work shall make full and proper use of any system of work provided for their use by the employer’.
- 4.3.10 Employees who are or have recently been pregnant must pay particular regard to their capabilities for safe manual handling operations. Any concerns they have must be reported to the Associate Operations Director who can liaise with the Occupational Health Service for further guidance if necessary

4.4 Clinical Governance and Risk Board

- 4.4.1 The Clinical Governance and Risk Board (CG&RB) is responsible for monitoring the effectiveness of this policy and ensuring sufficient resources are available to support its implementation.

5.0 Training

- 5.1 PTUK recognises the need for standards in safer manual handling training and the provision of advice. PTUK accepts the legal requirement that all employees receive an appropriate level of manual handling training, with special emphasis being given to training staff in dealing with bariatric persons.
- 5.1.2 Manual handling training will only be given by competent person(s). Only staff who have successfully completed a recognised ‘train the trainer course’ are deemed competent to deliver manual handling training.
- 5.1.3 Staff delivering the manual handling training must receive refresher training on an annual basis and be deemed competent.
- 5.1.4 Manual handling training is regarded by PTUK as mandatory training and considers it essential in regard to the risk management process, therefore staff must attend

training courses either on an annual basis, as a refresher and also following a manual handling incident.

- 5.1.5 If the manual handling trainer has concerns regarding a staff member's level of competence at the end of the training course, this will be discussed both with the staff member and their manager as soon as possible, so an action plan can be devised.
- 5.1.6 Training records of all staff that have completed manual handling training will be kept by the Training Manager.

6.0 Manual Handling Risk Assessments

- 6.1 Due to the nature of ambulance work and the fact that the majority of employees work at distance, it is not possible for PTUK to assess all manual handling operations for significant risk. However, it is reasonable for PTUK staff to carry out generic risk assessments. Generic risk assessments will help PTUK reduce the risk of injury to employees to the lowest possible level.
- 6.1.2 Staff often work in places where PTUK has little control over the potential manual handling hazards. PTUK staff must take reasonable care of their own safety and complete a Dynamic Manual Handling Risk Assessment prior to moving/lifting a bariatric person.
- 6.1.3 All staff must carry out a dynamic risk assessment before attempting a manual handling task. The mnemonic 'TILE' is used which considers the individual elements of the activity.
 - 1. Nature of the **Task**
 - 2. **Individual capability** of the person/s performing the task
 - 3. The size, weight and shape of the **Load**
 - 4. **Environmental** considerations i.e. hazards
- 6.1.4 If operational staff, once having completed a TILE dynamic risk assessment, wishes to undertake a more comprehensive risk assessment then they can complete a Patient Manual Handling Risk Assessment - See Appendix B
- 6.1.5 All Patient Manual Handling Risk Assessments undertaken need to be feedback to PTUK Control and the Operations Director and stored for future use. If any actions or alternative working practices need to be implemented following staff feedback, then this will be communicated and introduced to all staff, via the Training Manager.

7.0 Equipment

- 7.1 The Training Manager and Clinical Lead will assist managers and staff within PTUK in the selection of bariatric manual handling equipment.

- 7.1.2 Many items of equipment are marked with a safe working load. This is the maximum weight that this equipment can cope with. This weight must not be exceeded. If in doubt, please contact the Training Manager or Clinical Lead for advice.
- 7.1.3 Staff must only use equipment that they have been taught how to use and are happy and competent to do so.
- 7.1.4 Before using any item of equipment, the member of staff has a responsibility to visually check that the equipment is free from defect, is clean and in good working order.
- 7.1.5 All lifting equipment will be subject to a statutory examination by a competent engineer at intervals not exceeding 6 months. The Facilities and Premises Manager in conjunction with the Health and Safety Manager are responsible for co-ordination of servicing of equipment.
- 7.1.6 The Provision and Use of Work Equipment Regulations (1998) state that equipment should only be used for the purpose for which it was designed. If in doubt, please contact the Training Manager or Clinical Lead for advice.
- 7.1.7 PTUK provides a wide range of bariatric manual handling equipment. This list will be updated whenever new equipment is purchased. See Appendix 3 for a list of the bariatric equipment.

8.0 Infection Control Issues

- 8.1 Patient handling equipment should be cleaned / decontaminated in accordance with the manufacturer's recommendations. If in doubt ask the Training Manager or Clinical Lead for advice.
- 8.2 Equipment must be decontaminated between each patient and whenever visibly soiled.

9.0 Partners in Managing Manual Handling Risks

- 9.1 There are potential benefits in working with other agencies and NHS bodies that are involved in moving and handling people. Sharing information and having consistent approaches should assist in reducing the likelihood of untoward incidents arising in the process of ensuring smooth transfer of bariatric persons.
- 9.2 There are occasions when the task of moving a bariatric person safely poses a high level of risk and yet, in view of the patient's clinical condition it is unavoidable. In certain situations it may be necessary to seek assistance from other agencies to ensure the safety of both patient and staff. In order that such events go as smoothly as possible it is essential to establish clear communication and expectations to avoid undue delay in moving the patient and to maintain the person's dignity and safety throughout.

10.0 Monitoring

- 10.1 Audit of the Safer Handling of Patients Policy will be undertaken by the Clinical Lead who will work in conjunction with the Operations Director. Incidents which have been reported will be audited. This will take into account numbers, types and causes of musculoskeletal injuries sustained by PTUK staff. The number of attendees for training sessions will also be audited. This audit will be undertaken annually by the Training Manager and feedback will be given to the CG&R Board.

11.0 References

HSE (1974) Health and Safety Executive Health & Safety at Work etc Act 1974 HMSO London

HSE (1995) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) (as amended 2012) 1995, HMSO London

Health and Safety Executive (1999) Management of Health & Safety at Work Regulations 1999, Approved Code of Practice L21, HSE Books London

HSE (2004) Health and Safety Executive (2004) Manual Handling. Manual Handling Operations Regulations 1992 (as amended). Guidance on Regulations 23, 3rd edition, HSE Books 2004 Sudbury: HSE

HSE (1998) Health and Safety Executive (1998) Lifting Operations and Lifting Equipment Regulations 1998, Statutory Instrument 1998 NNo.2307

HSE (1998) Health and Safety Executive (1998) Provision and Use of Work Equipment Regulations 1998, Statutory Instrument 1998 No. 2306 Approved Code of Practice and Guidance L22, HSE Books London

National Back Exchange (2011) The Guide to the Handling of People: a systems approach Hop 6. 6th edition

12.0 Appendices

Appendix A
Appendix B
Appendix C
Appendix D
Appendix E
Appendix F

Appendix A - Legislation relating to Safer Manual Handling

Health and Safety at Work Act etc. (1974)(HSAWA)

Employers have to:

- Protect the health and safety of their employees
- Protect the health and safety of others who might be affected by the way they go about their work
- With regard to training (Section 2(2)(c) employers are required to provide:
 - Information
 - Instruction
 - Training
 - Supervision

Employees have to:

- Take care of their own health and safety and that of others
- Co-operate with their employer

Management of Health and Safety Work Regulation 1999 (MHSWR)

Under these Regulations employers have a duty to:

- Assess the risks to health and safety of their employees at work
- Provide information and training to employees
- Review the risk assessments if there is any reason to believe it is no longer valid and make changes if needed

Manual Handling Operations Regulations (1992) (MHOR)(as amended)

The MHOR apply the broad requirements of the MHSWR. The regulations are primarily focused on avoiding or minimising the risk of injury to employees from manual handling activities.

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR as amended 2012) (HSE 1995)

These Regulations require the reporting of work related accidents, diseases and dangerous occurrences. If an employee is off work for more than 7 consecutive days as a result of an injury-excluding the date of the injury, an appropriate form must be completed and sent to the Health and Safety Executive (HSE).

Lifting Operations and Lifting Equipment Regulations (1998) (LOLER)

Employers have a duty to ensure that equipment used to lift/move a person is safe and fit for purpose. LOLER require equipment to be:

- Strong and stable enough for its particular use and marked to indicate safe working load
- Positioned and installed to minimise any risks
- Used safely i.e. the equipments use should be organised, planned and executed by competent staff

- Subject to ongoing thorough examination and, where appropriate, inspected by a competent member of staff

**Provision and Use of Work Equipment Regulations (1998)
(PUWER)**

These Regulations recommend the safe use of equipment. They state that equipment must be inspected as follows:

- Before being put into use for the first time
- At regular intervals
- Where significant risk could result from incorrect installations, relocation or deterioration
- All inspections must be recorded.

Appendix B - PATIENT MANUAL HANDLING RISK ASSESSMENT FORM

Person Moving and Handling Assessment (Adult)						
Patients Details				Assessor Details		
Name:		D.O.B:		Name:		
Location: e.g Home, Hospital				Destination		
				Signature:		
Height:		Weight:		Assessment date:	Review date:	
Details of other people involved in the moving and handling assessment:						
Name		Designation		Signature		
Part 1 Checklist of Handling Tasks						
Task	Can the person perform these tasks independently					
	Yes	No	Variable	N/A	Comments	
Rolling in bed						
Lying to sitting in bed						
Repositioning up bed						
Getting into bed						
Getting out of bed						
Sitting to standing (Chair)						
Standing to sitting (Chair)						
Sitting to standing (Bed)						
Standing to sitting (Bed)						
Standing						
Walking						
Rising from floor						
Stairs						
Steps						
Lifting legs						
Repositioning self in chair						
Manoeuvring wheelchair						
Is there a History of Falls? Yes / No (please Circle)						
If Yes, Give details below including causative factors if known						

Part 2 of the assessment must be completed if the patient is not independent in all handling tasks	
Person Moving and Handling Assessment - Part 2	
Patients Name:	
Patients D.O.B:	
Details of any relevant medical conditions/diagnosis:	
Details of any moving and handling hazards in relation to the person's physical condition e.g. poor balance, pain in joints, muscle weakness, skin integrity:	
Details of any mobility equipment/aids that the patient uses e.g. walking stick, wheelchair.	
Details of any moving and handling hazards related to communication, comprehension or behaviour e.g. Impaired hearing, impaired vision and behavioural issues.	
Wishes and opinions of the patient being moved.	
Assessment date:	Assessors Signature:

Person Moving and Handling Assessment (Adult)					
Patients Details			Assessor Details		
Name:		D.O.B:	Name:		
Location: e.g Home, Hospital			Destination		
			Signature:		
Height:	Weight:		Assessment date:	Review date:	
Details of other people involved in the moving and handling assessment:					
Name		Designation		Signature	
Part 1 Environmental Constraints Check list					
Hazard					
Internal	Yes	No	Comments		
Stairs (Number)					
Door Ways					
Fixed Furniture (e.g. Stair lift)					
Movable Furniture (e.g. Chairs)					
Good Lighting					
Good Flooring (e.g. secure carpet)					
Space available to move					
Space available for equipment					
Cluttered Walk Ways					

External			
Stairs (Number)			
Good Lighting			
Good Flooring			
Space available to move			
Space available for equipment			
Cluttered Walk Ways			

Diagram. Pictures attached.

Person Moving and Handling Assessment - Part 2	
Equipment Needed	Any Other Action Required

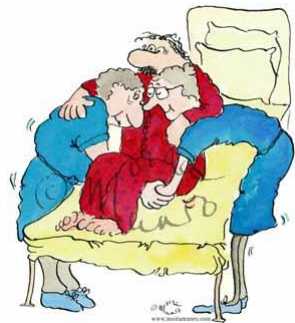
Additional Comments:

Moving and Handling Plan

Task Description	Details of movement methods to be used	No. Staff Required

Appendix C - EXAMPLES OF UNSAFE MANUAL HANDLING PRACTICE

Many of the manual handling techniques used in the past are now considered 'unsafe and dangerous'. The pictures below show examples of these outdated and unsafe practices.

Drag Lift**Cradle Lift****Drag Lift****Australian Carry****Australian Lift****Bear Hug****Top and Tail**

Appendix D - List of Manual Handling Equipment

Chairs

Transfer Chairs (up to 457kgs)

Stryker Evacuation Chair (up to 228kgs)

Various slide sheets

Hoists

Liko Viking XL Mobile Hoist (up to 300kgs)

Ferno Harrier XL (up to 450kgs)

Hoist Slings 300kgs, 400ks, 500kgs

Trolley Beds

Ferno Pegasus Trolley Beds

Ferno Megasus

Ferno Harrier

Ferno Falcon 6

Stairclimber

AAT Electric Stairclimber 120kgs and 160 kgs

Roll a Ramps

Roll a Ramps (up to 907kgs)

Appendix E - Equality Impact Assessment Tool

To be completed and attached to any procedural document when submitted to the appropriate committee for consideration and approval.

		Yes/No	Comments
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:		
	Race	No	
	Ethnic origins (including gypsies and travellers)	No	
	Nationality	No	
	Gender	No	
	Culture	No	
	Religion or belief		
	Sexual orientation including lesbian, gay and bisexual people	No	
	Age	No	
	Disability - learning disabilities, physical disability, sensory impairment and mental health problems	No	
2.	Is there any evidence that some groups are affected differently?	No	
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	No	
4.	Is the impact of the policy/guidance likely to be negative?	No	
5.	If so can the impact be avoided?	N/A	
6.	What alternatives are there to achieving the policy/guidance without the impact?	N/A	
7.	Can we reduce the impact by taking different action?	N/A	

If you have identified a potential discriminatory impact of this procedural document, please refer it to Human Resources together with any suggestions as to the action required to avoid/reduce this impact.

Appendix F - Checklist for the Review and Approval of Procedural Document

To be completed and attached to any document which guides practice when submitted to the appropriate committee for consideration and approval.

	Title of document being reviewed:	Yes/No/Unsure	Comments
1.	Title		
	Is the title clear and unambiguous?	Yes	
	Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	
2.	Rationale		
	Are reasons for development of the document stated?	Yes	
3.	Development Process		
	Is the method described in brief?	Yes	
	Are people involved in the development identified?	Yes	
	Do you feel a reasonable attempt has been made to ensure relevant expertise has been used?	Yes	
	Is there evidence of consultation with stakeholders and users?	Yes	
4.	Content		
	Is the objective of the document clear?	Yes	
	Is the target population clear and unambiguous?	Yes	
	Are the intended outcomes described?	Yes	
	Are the statements clear and unambiguous?	Yes	
5.	Evidence Base		
	Is the type of evidence to support the document identified explicitly?	Yes	
	Are key references cited?	Yes	
	Are the references cited in full?	Yes	
	Are supporting documents referenced?	Yes	
6.	Approval		
	Does the document identify which committee/group will approve it?	Yes	
	If appropriate have the joint Human Resources/staff side committee (or equivalent) approved the document?	Yes	
7.	Dissemination and Implementation		

	Title of document being reviewed:	Yes/No/Unsure	Comments
	Is there an outline/plan to identify how this will be done?	Yes	
	Does the plan include the necessary training/support to ensure compliance?	Yes	
8.	Document Control		
	Does the document identify where it will be held?	Yes	
	Have archiving arrangements for superseded documents been addressed?	Yes	
9.	Process to Monitor Compliance and Effectiveness		
	Are there measurable standards or KPIs to support the monitoring of compliance with and effectiveness of the document?	Yes	
	Is there a plan to review or audit compliance with the document?	Yes	
10.	Review Date		
	Is the review date identified?	Yes	
	Is the frequency of review identified? If so is it acceptable?	Yes	
11.	Overall Responsibility for the Document		
	Is it clear who will be responsible for co-ordinating the dissemination, implementation and review of the document?	Yes	

Individual Approval

If you are happy to approve this document, please sign and date it and forward to the chair of the committee/group where it will receive final approval.

Name		Date	11/04/2020
Signature			

Committee Approval

If the committee is happy to approve this document, please sign and date it and forward copies to the person with responsibility for disseminating and implementing the document and the person who is responsible for maintaining the organisation's database of approved documents.

Name		Date	11/04/2020
Signature			