

Policy Type		Policy Name
Information		
Governance		
Corporate	X	CO11 Moving and Handling
Standard Operating		CO11 Moving and Handling
Procedure		
Human Resources		

Status	Final
Committee approved by	Executive Committee
Date Approved	December 2017
Equality Impact Assessment undertaken	Completed
Distribution	All CCG staff
Planned Review Date	December 2019 (extended to July 2020)

Document History

Version	Date	Significant Changes
1	3/2013	Policy provided to Clinical Commissioning Group (CCG) as part of policy suite
2	08.05.2015	Re-styled to CCG policy standard Review of duties and responsibilities
3	October 2017	Minor amendments to policy. Main changes are new Appendices relating to Risk Assessment which replaces old Risk Assessments due to Legislation changes.
3.1	May 2019	Review date extended.

POLICY VALIDITY STATEMENT

This policy is due for review on the latest date shown above. After this date, policy and process documents may become invalid.

Policy users should ensure that they are consulting the currently valid version of the documentation.

Approval

Role	Name	Date
Approval (1)	Policy Group	2013
Approval (2)	Executive In Common	29/09/2017
Approval (3)	Executive Committee	December 2017
Approval (3.1)	Combined Management Board	May 2019 (3.1)

Review

This policy is due for review on the latest date shown above. After this date, policy and process documents may become invalid.

Table of Contents

1.	Introduction	. 4
2.	Definitions	. 5
3.	Policy for Moving and Handling	. 5
4.	Duties and Responsibilities	. 6
5.	Implementation	. 8
6.	Training Implications	. 9
7.	Related Documents	. 9
8.	Monitoring, Review and Archiving	10
9.	Equality Impact Assessment	11
Арр	pendix A: Further Guidance for Manual Handling Operations and the Safety of	
	Equipment	15
Apr	pendix B: Manual Handling Risk Assessment	17

1. Introduction

- 1.1 For the purposes of this policy, NHS Durham Dales, Easington and Sedgefield Clinical Commissioning Group will be referred to as "the CCG".
- 1.2 The CCG recognise they have a statutory duty towards the safety of their employees and others working in or visiting their premises, including patients, contractors and visitors who might be subject to moving and handling risks.
- 1.3 Statistically it has been recognised within the NHS, that the major cause of skeletal and muscular injuries to staff is due to inappropriate manual handling techniques, use of inadequate equipment and in some instances a disregard of good practice and local manual handling policies. It is also recognised that personal injuries to health service staff arising out of manual handling operations can impose a severe financial burden on the NHS.
- 1.4 The CCG have a Duty of Care under the Health & Safety at Work Act (1974), The Management of Health and Safety at Work Regulations (1999) and the Manual Handling Operations Regulations 1992 as amended 2002) and is fully committed to safeguarding the health and safety of its staff.
- 1.5 This document sets out the CCG approach to minimising the incidence of manual handling injuries within its premises and the impact of manual handling on health and wellbeing, delivery of service, the environment and property. It applies to all CCG people, functions, actions and services. It is intended for all types of healthcare buildings including those that perform administrative functions.
- 1.6 The aim of this policy is to reduce the incidence of manual handling related injuries and its associated costs, provide a safer environment for staff and patients and ensure sufficient, suitable equipment designed to reduce manual handling is available.
- 1.7 This document outlines the CCG Policy on Manual Handling which includes:
 - avoiding the need for hazardous manual handling, so far as is reasonably practicable;
 - assessing the risk of injury from any hazardous manual handling that can't be avoided; and
 - reducing the risk of injury from hazardous manual handling, so far as is reasonably practicable.
- 1.8 The Policy details the responsibilities of specific individuals and groups for implementing the Policy and supporting procedures.

2. Definitions

2.1 Moving and Handling or Manual Handling is defined as any transporting or supporting of a load by hand or bodily force, and includes lifting, putting down, pushing, pulling carrying or moving. "Load" means any item or object that is being transported or supported. The definition includes the handling of a person. So, for example, the actions taken by a nurse to move a patient in a hospital, home or clinic would constitute manual handling operations, as would an office worker carrying files.

3. Policy for Moving and Handling

3.1. Risk Assessment - Manual Handling of objects

- 3.1.1 A risk assessment of all manual-handling activities must be undertaken before commencement of the task.
- 3.1.2 The purpose of a risk assessment is to carry out a systematic analysis of all the work undertaken by employees to identify manual handling operations and to ascertain which of these pose a significant risk of injury. Factors to be considered are the task, the load, the individual and the working environment including available equipment (Further information is provided in Appendix A) and a risk assessment form for assessing the manual handling of objects is provided in Appendix B.

3.2 Back Care Treatment/Occupational Health

Any member of the CCG can self-refer to the designated Occupational Health Service.

4. Duties and Responsibilities

Executive Committee	The Executive i Committee has delegated responsibility to the Governing Body (GB) for setting the strategic context in which organisational process documents are developed, and for establishing a scheme of governance for the formal review and approval of such documents. It is responsible for monitoring compliance with the Moving and Handling policy. It will receive reports on fire safety performance and will ensure that any issues of significant risk are actioned appropriately.
Chief Officer	The Chief Officer has overall responsibility for the strategic direction and operational management, including ensuring that CCG process documents comply with all legal, statutory and good practice guidance requirements. In addition, the Chief Officer is required to have appropriate health and safety policies and programmes of work in place in order to improve
	and maintain procedures within the organisation's premises.
Chief Operating	The Chief Operating Officer responsible for Health and Safety will lead in:
Officer	
Officer	 Ensuring that moving and handling measures are implemented by agreeing a programme of action for moving and handling, setting objectives and monitoring their effectiveness and achievements. Ensuring that CCG managers are familiar with moving and handling procedures and implement them. Ensuring that appropriate advice is sought from the Governance Manager (Health & Safety), Commissioning Support or external agencies whenever any modification to working practices is planned. Generating and formulating this policy. Identifying the appropriate process for regular evaluation of the implementation and effectiveness of this policy. Identifying the competencies required to implement this policy, and either identifying a training resource or approaching Workforce Learning and Development department within the Commissioning Support Organisation for assistance. Notifying the Policy Co-Ordinator of any revisions to this document. Arranging for superseded versions of this document to be retained in accordance with HSC 199/053 NHS Retention and Disposal Schedule.

All line managers

Heads of Service and managers are responsible for:-

- Ensuring the release of staff time to undertake Manual Handling Training as set out in the CCG Mandatory Training requirements for commencing employment and at refresher training at appropriate intervals;
- Ensuring that risk assessments of manual handling activities are carried out and appropriate control measures put in place to manage the risks as far as reasonably practicable. This may include provision to provide appropriate equipment;
- Enabling staff to utilise their learning from the training when back in their learning environment;
- Determining that all agency staff and short-term staff, prior to employment commencing manual handling activities, have received Manual Handling Training.
- Identification and provision of moving and handling equipment needs through assessment and practical evaluation of equipment suitability and compatibility;
- Ensuring that moving and handling equipment is maintained in a safe and serviceable working state. That its use remains appropriate to the task for which it is intended and that relevant staff are trained and competent to operate the equipment in use in line with the Provision and Use of Work Equipment Regulations (PUWER) 1998 (7) and the Lifting Operations and Lifting Equipment Regulations (LOLER) 1998 (8);
- Identification of moving and handling risks by monitoring practices, auditing department incident reports and thorough, prompt, accident investigation and reporting to the Governance Manager, Health and Safety
- Maintaining a list of moving and handling equipment available for staff to use, with information on where it is kept, how to access it and any loan arrangements.

All Staff

CCG employees are responsible for actively co-operating with managers in the application of this policy to enable the CCG to discharge its legal obligations and in particular;

Regulation 5 of the Manual Handling Operations Regulations 1992 (as amended) states that:

"Every employee while at work shall make full and proper use of any system of work provided for his use by his employer in compliance with Regulation 4(1)(b)(ii) of these regulations."

All employees already have a duty under the Health and Safety at Work Act 1974 to report any areas where they feel they are working at risk to themselves, their colleagues

Shall ensure that:

- They take care of their own health and safety and that of others who may be affected by their activities when involved in manual handling operations;
- They know their role in the implementation of the Moving and Handling Policy and comply with the policy;
- They participate in any training (including required updates) given in manual handling principles relevant to their work prior to undertaking any hazardous manual handling operations as part of their duty. This training is mandatory;
- They are competent in the use of, and do utilise any equipment that has been provided to reduce the risk of injury in moving and handling activities or other factors relating to this activity;
- They bring to their manager's attention any equipment that is needed to reduce the potential risk of injury in moving and handling operations or report any defects/problems in mechanical aids relating to this activity;
- They participate in the risk assessments of hazardous moving and handling operations to determine measures to reduce the potential risk of injury;
- They report any change in working conditions, personnel involved in moving and handling operations or a significant change in the nature of the task or the load that may necessitate a review of the risk assessment procedure;
- They report to their managers any medical conditions (including pregnancy) that might affect their ability to undertake manual handling operations;
- They report promptly to their managers any accidents and incidents resulting from moving and handling operations and complete an incident report form. They self-refer to Occupational Health if they suspect their injury resulted from a manual handling operation.

5. Implementation

- 5.1 This policy will be available to all Staff for use in the circumstances described on the title page.
- 5.2 All managers are responsible for ensuring that relevant staff within the CCG have read and understood this document and are competent to carry out their duties in accordance with the procedures described.

6. Training Implications

- 6.1 Appropriate training in manual handling techniques and equipment as described within the organisation mandatory training matrix) will be provided to all staff. Training will be provided through the national Skills for Health System. Managers must ensure that staff within their area of responsibility undertake this training.
- 6.2 Managers must ensure that all new lifting equipment is used correctly. Training in the use of new equipment must be undertaken in the workplace so that staff feel safe using the equipment and it should be incorporated into the statutory training programmes provided for staff. Managers can arrange for the training to be provided in the workplace by the manufacturer or may identify a member of staff to be trained and then carry out cascade training for existing staff and any new staff. Record any advice given.
- 6.3 Records of training will be kept centrally by the Governance Manager (H&S) in NECS and locally by the CCG. The Governance Manager will inform CCG Managers of staff who have not attended their mandatory training. Managers should then ensure staff undertake training as soon as possible.
- 6.4 The frequency of manual handling training sessions is identified within the Statutory and Mandatory Training Matrix available from the Commissioning Support Services

7. Related Documents

7.1 Other related policy documents

CCG Health and Safety Policy

7.2 Legislation and statutory requirements

- Health and Safety at Work Etc. Act 1974, HMSO.
- Management of Health and Safety at Work Regulations 1999: Approved Code of Practice, L21 HSE Books.
- Manual Handling Operations Regulations (amended 2002).
 Guidance on regulations (revised 1998) London. HSE Publications (as amended).
- Provision and Use of Work Equipment Regulation 1998 (PUWER):
 Approved Code of Practice and Guidance L22, HSE Books.
- Lifting Operations and Lifting Equipment 5. 1998 Regulations LOLER), Approved Code of Practice and Guidance L113, HSE Books.

8. Monitoring, Review and Archiving

8.1 Monitoring

The governing body will agree a method for monitoring the dissemination and implementation of this policy. Monitoring information will be recorded in the policy database.

8.2 Review

- 8.2.1 The governing body will ensure that this policy document is reviewed in accordance with the timescale specified at the time of approval. No policy or procedure will remain operational for a period exceeding three years without a review taking place.
- 8.2.2 Staff who become aware of any change which may affect a policy should advise their line manager as soon as possible. The governing body will then consider the need to review the policy or procedure outside of the agreed timescale for revision.
- 8.2.3 For ease of reference for reviewers or approval bodies, changes should be noted in the 'version control' table on the second page of this document.

NB: If the review consists of a change to an appendix or procedure document, approval may be given by the sponsor director and a revised document may be issued. Review to the main body of the policy must always follow the original approval process.

8.3 Archiving

The governing body will ensure that archived copies of superseded policy documents are retained in accordance with Records Management: NHS Code of Practice 2016.

9. Equality Impact Assessment

Equality Impact Assessment Initial Screening Assessment

STEP 1

Step 1

As a public body organisation we need to ensure that all our strategies, policies, services and functions, both current and proposed have given proper consideration to equality and diversity, do not aid barriers to access or generate discrimination against any protected groups under the Equality Act 2010 (Age, Disability, Gender Reassignment, Pregnancy and Maternity, Race, Religion/Belief, Sex, Sexual Orientation, Marriage and Civil Partnership, Carers and Health Inequalities).

A screening process can help judge relevance and provides a record of both the process and decisions made.

This screening determines relevance for all new and revised strategies, policies, projects, service reviews and functions.

Completed at the earliest opportunity it will help to determine:

- The relevance of proposals and decisions to equality, diversity, cohesion and integration.
- Whether or not equality and diversity is being/has already been considered for due regard to the Equality Act 2010 and the Public Sector Equality Duty (PSED).
- Whether or not it is necessary to carry out a full Equality Impact Assessment.

Name(s) and role(s) of person completing this assessment:

Name: Lee Crowe Role: Governance Manager, H&S/Fire/Security		
Title of the service/project or policy:		
Moving and Handling policy		
Is this a: X Strategy / Policy Service Review Project If other, please specify:		
What are the aim(s) and objectives of the service, project or policy:		
The aim of the policy is to ensure CCG considers Health and Safety along with its other business objectives and to ensure that the CCG follows the details stipulated within H&S Regulations.		

Who will the project/service /policy / decision impact?		
Consider the actual and potential impacts:		
x Staff		
service users/patients		
other public sector organisations		
voluntary / community groups / trade unions		
others, please specify:		

Questions	Yes	No
Could there be an existing or potential impact on any of the protected characteristic groups?		Х
Has there been or likely to be any staff/patient/public concerns?		Х
Could this piece of work affect how our services, commissioning or procurement activities are organised, provided, located and by whom?		Х
Could this piece of work affect the workforce or employment practices?		Х
 Does the piece of work involve or have an impact on: Eliminating unlawful discrimination, victimisation and harassment Advancing equality of opportunity Fostering good relations 		Х

If you have answered no to the above and conclude that there will not be a detrimental impact on any equality group caused by the proposed policy/project/service change, please state how you have reached that conclusion below:

The procedure is a review of an existing procedure and has received only minor
updates. There is no fundamental change to the content therefore the previous EIA
which concluded 'no impact' remains appropriate.

If you have answered yes to any of the above, please now complete the 'STEP 2 Equality Impact Assessment' document.

Governance, ownership and approval

Please state here who has approved the actions and outcomes of the screening		
Name Date		
Executive Committee	December 2017	

Publishing

This screening document will act as evidence that due regard to the Equality Act 2010 and the Public Sector Equality Duty (PSED) has been given.

If you are not completing 'STEP 2 - Equality Impact Assessment' this screening document will need to be approved and published alongside your documentation.

A copy of all screening documentation should be sent to: **NECSU.Equality@nhs.net** for audit purposes.

Further Guidance for Manual Handling Operations and the Safety of Equipment

The Manual Handling Operations Regulations 1992 (as amended) stipulates a hierarchy of strategies with regard to handling:

Avoid or eliminate hazardous manual handling operations as far as is reasonably practicable; this may be done by redesigning the task to avoid moving the load or by automating or mechanising the process.

Assess a task where manual handling cannot be avoided, in a suitable and sufficient manner; and

Reduce or control the risk as far as is reasonably practicable – particular consideration should be given to the provision of mechanical assistance, but where this is not practicable other improvements to the task, the load, and the working environment should be explored.

Inform, instruct and train (to change behaviour) employees, supported by supervision.

Review and re-assess tasks following any changes to ensure other risks are not introduced.

Good manual handling risk assessment should include the:

- Task
- Individual
- Load
- Environment

Individual Capability

NB: There are no maximum weights that anyone can safely lift as everyone's capability is different. There is a wide range of physical capability amongst the working population.

Lifting and Lowering

To obtain maximum capability when carrying out a manual handling operation that involves lifting or lowering the object should be held at waist height and close into the body. If the object is held at arm's length, below the waist or above shoulder this will result in a significant reduction in capability to safely lift or lower loads.

Equipment

It is accepted that in many cases the use of suitable handling equipment will greatly reduce the occurrence of skeletal or muscular injury. Manual handling problems can be exacerbated by inappropriate purchase of equipment, the lack of equipment, using the wrong equipment or inappropriate training in the use of the equipment.

Chairs

All NHS equipment including chairs must conform to NHS requirements with regards to fire retardancy, construction and covering.

Advice on the suitability of manual handling equipment can be obtained from the Governance Manager (Health and Safety/Fire/Security) within North of England Commissioning Support Unit (NECS).

Appendix B: Manual Handling Risk Assessment

Section A		
SiteDepartm	nent	
Task description:		
Operations covered by this assessment (detailed description):	Control measures currently in use (e.g. deliveries brought to point of use):	
Location(s):	Equipment currently in use (e.g. trolleys, barrows, etc)	
Personnel Involved (numbers, staff, contractor etc)		
Re-assess the risk taking into consideration the control me	asures already in place	
Likelihood of incident : Rare ☐(1) Unlikely ☐(2) Poss	ible ☐ (3) Likely ☐ (4) Certain ☐ (5)	
Consequence of incident: Negligible ☐(1) Minor ☐(2)	Moderate ☐ (3) Major ☐ (4) Catastrophic ☐ (5)	
The numbers in the brackets are the risk score. Multiply the likelihood X consequence to achieve the risk score. Risk score If the risk Score is 8 or over/ consequence is 4 or 5 go to section B. If the Score is less than 8 go to section C. Sign the assessment at the end of section B		

Questions to consider:	If yes, tick appropriate level of risk			Problem occurring from the task (Make rough notes in this column in preparation for the possible remedial action	Possible remedial action (Possible changes to be made to system/task, load, workplace/space, environment. Communication that is needed)
	Low	Med	High	taken)	environment. Communication that is needed)
The tasks - do they involve:					
 Holding loads away from trunk? 					
Twisting?					
• Stooping?			ᅵ 닏		
Reaching upwards?		$\parallel \parallel$	ᅵ		
 Large vertical movement? 	\vdash	$\vdash \vdash$			
Long carrying distances?	1		ᅵ		
Strenuous pushing or pulling?	1	H			
 Unpredictable movement of loads? 	ΙH	ΙH	H		
 Repetitive handling? 	ΙH	ΙH	H		
Insufficient rest or recovery?	ΙĦ	ΙĦ	l Н		
 A work rate imposed by process? 					
The loads - are they:					
Heavy?					
Bulky/unwieldy?					
Difficult to grasp?	1 4	l	l ∐		
 Unstable/unpredictable? 					
Intrinsically harmful (e.g. sharp/hot)?		Ш			
The working environment - are there:					
Constraints on posture?		$\parallel \parallel$			
• Poor floors?	1	$\parallel \parallel$	ᅵ		
Variations in levels?	1		H		
Hot/cold/humid conditions?					
Strong air movements? Page lighting and distance?	ΙĦ	lΗ	H		
Poor lighting conditions?Restricted access and egress?					
Restricted access and egress? Individual capability - does the job:					
Require unusual capability?					
Hazard those with health problem?	ΙΠ̈́	ΙΠ̈́	l Н		
Hazard those who are pregnant?					
Call for special information/training?					
Other factors:		1			
Is movement or posture hindered by clothing or					
personal protective equipment?	Yes □ No□				

Section C - Remedial action to be taken						
temedial steps that should be taken, in order of priority:	Person responsible for implementing controls	Target implementation date	Completed Y/N			
	implementing controls	date	1/11			
?						
Pate by which actions should be completed:						
rate by which actions should be completed.						
tisk score following remedial action taken:						
Assessors Name: Signature:	Date of assessment					

ACTIVITY

Task



Individual



Load



Environment



Other Factor