



Hardfacts

Norwich Union Risk Services

Ref No 5017 (v6)

August 2006

Manual Handling in Nursing and Residential Care Homes

Introduction

Fifty per cent of all the serious accidents occurring in nursing and residential care homes that are reported to the Health and Safety Executive in accordance with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) are as a result of manual handling. Of these accidents, 70% involve the movement of patients. Back pain and manual handling are regarded by many as synonymous and nowhere more so than in the health services. This acceptance of back pain or fatigue at the end of a working day is often seen as an inevitable part of health service work.

Legal Requirements

The Manual Handling Operations Regulations 1992 requires that employers carry out a systematic assessment of the risks of injury arising from manual handling operations and of the action required to reduce those risks to the lowest level reasonably practicable. As a first step, employers will be required to make a judgement as to the existence of risk of injury. If no evidence of risk of injury for a particular manual handling task is found, no further action will be necessary. However, where the initial judgement identifies a risk of injury, and that manual handling task cannot reasonably be avoided, a more detailed assessment will be needed. Assessments must be kept up to date.

The health and safety policy of the home should already include a section on manual handling of residents by nursing and other staff groups.

The policy should readily identify those individuals within the organisation who have particular responsibilities for manual handling, including training and the

purchasing of equipment and mechanical lifting aids. Policies and procedures must be effectively communicated to all those who may be affected by them.

Manual Handling Assessments

The duty to carry out an assessment of manual handling operations is placed on the employer. In practice, the assessment task may be delegated to individuals within the organisation as appropriate.

The first step must be to identify where manual handling operations can be avoided. It should not be assumed that because a particular manual handling operation has always been undertaken, it is automatically unavoidable. It is now recognised that routines which demanded that all residents were bathed, washed and dressed by a certain time are no longer appropriate. Given time and appropriate assistance, many residents may be able to manage certain tasks for themselves and the risks to staff from manual handling can be significantly reduced.

An assessment will still need to be made even where mechanical handling equipment is available, because the use of such equipment may not totally avoid the need for manual handling.

There are four main factors –

- **Task**
- **Load**
- **Working Environment**
- **Individual Capability**

These factors must be addressed during the course of an assessment. Each of these is dealt with in detail in the HSE guidance documents. It must be recognised, however, that one factor cannot be considered in isolation as they all interact and affect one another in turn.

No one factor is necessarily more important than another but proper consideration of these factors should result in an ergonomic approach to manual handling. Therefore reducing the risk of injury to the lowest reasonably practicable level.

The Regulations do not specify the appropriate steps to be taken in any given circumstance, but instead directs the employer's attention towards judging the risks so that precautions which minimise those risks in any given local situation can be readily identified.

Handling Aids

The assessment process should identify those manual handling tasks for which mechanical aids should be used. Manual handling equipment selected for a particular task should reduce the manual handling load of staff; be easy to operate; be capable of lifting the load in safety; be capable of being used in the intended location; be in sound condition and properly maintained. It should also be suitable for the condition and comfort of the resident.

Training

Training in manual lifting techniques has often been inappropriately regarded as the primary means of avoiding injury. The provision of training in manual lifting techniques in isolation can be misleading. Those trained find themselves trying to apply the techniques in given situations irrespective of other relevant factors, e.g. the patient or the environment.

Appropriate training must be provided to all staff groups before any manual handling tasks are undertaken. This may form part of a general induction programme. Sufficient time must be allowed to permit explanation, demonstration and practice, both in the classroom and the workplace. Training is an ongoing process and the continuation of training by review or refresher courses must be planned and implemented. Appropriate supervision must be provided to ensure training is put into practice.

As a minimum, training programmes should include:

Back care - This should cover spinal mechanics so that the causes of back pain, of posture and movements etc likely to contribute to pain or injury can be readily identified.

Ergonomics - Guidance on evaluation of the environment, task, load and individual capability should be included, along with advice on how employees can alter their own environment to make work safer.

Mechanical handling aids - The training should cover the practical use and care of such equipment and reference should be made to the supplier's handbook. Advice on how to gain the co-operation of residents and when to offer reassurance should also be covered.

Manual handling techniques - Guidance on manual handling techniques.

Fitness - Increasingly recognised as important in the avoidance of injury. General fitness, the effect of obesity and other physical conditions such as pregnancy are relevant considerations.

Key Action Steps

The following steps need to be taken to manage the manual handling risks:

- Appoint a responsible person to carry out the manual handling assessments and ensure that they are adequately trained and resourced for the task.
- Assess the tasks and identify how to reduce the risks as far as is reasonably practicable.
- Provide handling aids and equipment
- Train staff.
- Record the assessment and training.

References

- Manual Handling: Guidance on the Regulations (L 23), HSE Books 2004.
- Manual Handling in the Health Services, HSE 1998 (2nd edition).
- Getting to grips with manual handling INDG 143 (Rev 2) HSE 2004.

Ref No 5017 (v6)

August 2006