

# Moving & Handling Policy

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# 1. Introduction

NHS Greater Glasgow and Clyde (NHSGGC) exists to provide healthcare services of the highest quality, to the people of Greater Glasgow and Clyde. We recognise that we cannot provide these services unless we ensure, so far as is as reasonably practicable, that we reduce the risks to the health and safety of staff, patients, volunteers, students and others affected by our work activities. We are also committed to continually improving the quality of care that we provide. These are primary objectives of NHSGGC, and we prioritise them equally alongside other business and operating objectives.

NHS GGC recognises its duty of care to employees and its responsibility as an employer. NHSGGC acknowledges that staff involved in the moving and handling of people and / or loads may face the risk of injury, and therefore attaches major importance to the health, safety and wellbeing of the staff.

The aim of this policy is, through risk assessment, to reduce this risk to the lowest level reasonably practicable. It is developed in accordance with legislative and professional guidance documents.

In practice this means that NHSGGC promotes:

- The avoidance of moving and handling where it is reasonably practicable to do so by employing solutions to eliminate the task
- Where it is not possible to avoid the task, assessment of moving and handling risks through generic and specific risk assessment
- In terms of people handling; the elimination of high risk practices; and maximisation of co-operation and independence from the person
- Monitoring and reviewing moving and handling practices and guidance

This policy sets out the management arrangements that are required to ensure compliance with current legislation and guidance.

## a) Definitions

### i. Emergency Situations

There are situations that can be described as emergencies, that is, 'life threatening', where the person must be moved to safety immediately and there may be no time to obtain equipment or plan the move. These situations can include where a person is:

- In water and in imminent danger of drowning
- In an area that is actually on fire or filling with smoke
- In danger of bomb or bullet
- In danger from a collapsing building or other situations
- Attempting suicide by hanging
- Experiencing a severe haemorrhage

All other situations are foreseeable and must be identified and recorded in the Risk Assessment and procedures or response protocols developed to manage situations that may arise. Examples of situations where this may apply are given in the table below:

Situation	Response Protocol
Cardiac arrest with the person on a chair or on the floor	If the person is on a chair, slide to the floor and commence resuscitation on the floor until the person has been stabilised, then proceed to hoist person onto the bed / trolley, trying to keep person in as reclined a position as possible. Utilise overhead tracking if available or the flat lift transfer kit (Hover Jack / Hover Matt) where available
Unconscious person on the floor	Place the person in the recovery position on the floor until either they return to consciousness or if not, the hoist is available to transfer the patient onto a bed/ trolley. Proceed to hoist the patient onto the bed/trolley, trying to keep the patient in as reclined a position as possible. Utilise overhead Tracking if available or the flat lift transfer kit, (Hover Jack/ Hover Matt) where available
A falling person	If a person is collapsing move behind them and begin to step backwards, allowing the person to slide to the floor with their back against your front. You must not try to catch a falling person
A fallen person with no sign of injury	Recover a person from the floor with minimal assistance, hoist or Flat Lift Transfer Kit. Guidance is available on <a href="#">Moving and Handling - NHSGGC</a> Community staff, depending on local protocols, may have access to additional equipment such as inflatable cushions or portable hoists
A person on the floor who has a suspected spinal injury or fractured femur	If the fall occurs in a confined space, slide the person into a more spacious area, preferably with the use of sliding sheets  In our Acute & main Mental Health settings where a hip / femur injury <b>i.e. fracture neck of femur</b> is suspected team handling is required with the use of the Flat Lift Transfer Kit (Hover Jack/ Hover Matt) Spinal injuries will be managed locally based on the individual clinical assessment at the time and a spinal board is required  In other environments a 999 call will be required
In the event of evacuation for any reason	Move the person as quickly and as safely as possible. Local protocols should be developed to account for the action to be taken in this situation, including the potential use of equipment designed to assist with evacuation

## ii. High Risk Lifts / Practices

High risk practices can be defined as “any move that involves staff lifting the full body weight or a major part of the body weight of a patient” and “any move where the patient /client can grip onto the handler [lock on]” (Handling of People, Ed 7, BackCare, 2023). The Lifts and Practices identified below should not be used:

### 1. Examples of high risk techniques are as follows:

- Drag Lifts / Underarm Hook – where a person is held under the axilla / armpit and includes the following activities; moving a person up the bed; sitting a person forwards in a chair / bed; assisting a person into standing; and, walking a person with linked arms
- Lifting the full or partial weight of a patient

### 2. Examples of high risk practices are as follows:

- Manually lifting a person in and out of the bath
- Manually lifting a person from the floor
- Manually transferring a person from bed to chair; chair to chair; chair to bed using any of the above high risk techniques
- Gripping
- Supporting of the major portions of a person’s body weight

These are not exclusive lists. If you are unsure of the lifts / practices you are using, please contact any member of the moving and handling team.

Further advice can be found at [Moving and Handling - NHSGGC](#)

## iii. Rehabilitation/Treatment Handling

Manual Handling operations are defined as transporting or supporting a load (including lifting, putting down, pushing, pulling, carrying or moving thereof) by hand or bodily force.

Any moving and handling involved in a treatment programme constitutes treatment handling. To the HSE definition may be added guiding, facilitating, manipulating or providing resistance. Thus any treatment where force is applied through any part of the therapist’s body to any part of a person involves moving and handling.

Generic moving and handling assessments may suffice in some situations. However, if any part of the therapist’s assessment shows that there are risks specific to that treatment handling situation, in addition to those in the generic assessment already carried out, then a patient / client specific moving and handling risk assessment must be made. This is an integral part of the person’s records.

If it is not reasonably practicable to avoid the moving and handling tasks then the therapist must be prepared to assess the risks of the proposed handling tasks and reduce the risks so found. They must use their skills to the advantage of people without endangering the person, themselves or other staff.

## 1. Key Messages

- Therapists manually handle people as part of their professional role
- When treatment programmes are devised that involve moving and handling, that part of their work which is potentially hazardous must be assessed and the risks reduced so far as is reasonably practicable. This must be recorded
- Therapists must not use unsafe systems of work and the use of extra suitably trained staff or equipment may need to be considered
- Treatment goals must be realistic and achievable, or may need to be reconsidered
- Management must be aware of their responsibility to ensure staff safety is compatible with patient / client progress, and support staff in negotiations around rehabilitation issues
- Therapists must be alert to short term changes in a person's performance, which may be related to physical or psychological state
- Therapists must amend a treatment/risk management plan according to the prevailing circumstances
- For complex situations further guidance may be required, and a member of the moving and handling team must be contacted

## 2. Scope

This policy applies to the following groups:

- All employees of NHSGGC
- All independent contractors, including GPs, GDPs and their staff working in NHSGGC premises
- All students, trainees, temporary and agency staff and volunteers
- All employees of other organisations working in NHSGGC premises
- Any contractors or suppliers whose actions may affect the employees or patients / clients of NHSGGC. Contractors and suppliers must provide the necessary level of information, instruction, training and necessary supervision so not to put persons at risk.

## 3. Roles and responsibilities

The framework of accountability and responsibility for managers and staff on the implementation of this policy follow that laid out within the Health and Safety Policy and Risk Management Strategy.

### 3.1 Chief Executive

The Chief Executive has overall responsibility, on behalf of the NHSGGC Board, for ensuring the implementation of this policy throughout the organisation. In practice the Chief Executive will discharge this responsibility by delegation to Chief Officers, Chief Operating Officer and Directors, then through their line management structures.

## 3.2 The Director of Human Resources and Organisational Development

The Director of Human Resources and Organisational Development, who has delegated responsibility from the Chief Executive, is responsible for the implementation and monitoring of the policy.

## 3.3 Directors / Chief Officers / Management Team and other Senior Staff

- Each directorate / partnership / sector has a clear risk management responsibility and is responsible for:
- Ensuring that sufficient and suitable risk assessments are made
- Ensuring that the Moving and Handling Policy is being applied and that staff to whom specific responsibilities are delegated, are fully aware of and discharge these responsibilities
- Ensuring that local procedures are prepared to comply with them
- Ensuring risk assessments are completed, updated as necessary, that is, when change occurs, and reviewed annually
- Reducing the risks identified by risk assessments as far as is reasonably practicable by establishing time bound strategic planning of resources
- Review moving and handling incidents for trends
- Conduct risk assessments during the design stage of new facilities, including the seeking of ergonomic advice when necessary
- Consider moving and handling risks to staff and others where services are provided by third party contractors and suppliers

## 3.4 Local Managers and Departmental Heads

Every Local Manager and Departmental Head has a responsibility to:

- Ensure that all members of staff seek appropriate moving and handling input, in accordance with the guidelines within this policy
- Regularly reviewing their workplace, equipment and procedures in relation to existing generic risk assessments to ensure that they are up to date and where new risks are identified, undertake generic risk assessments. Review assessments when change occurs and at least annually. Risk Assessors need to have completed a relevant course and read the associated guidance document
- Ensure that existing and new equipment is registered with the Estates Department to enable compliance with relevant legislation and to follow NHSGGC procedures for servicing and maintenance of equipment
- Ensure that patient / client specific moving and handling assessments are carried out when appropriate and reported in relevant documentation. Should non-compliance occur, assistance can be sought from the Moving and Handling department
- Oversee local implementation of the Moving and Handling Policy with particular regard to the use of high risk techniques and practices
- Ensure safe systems of work as identified by the risk assessment documentation including competency assessment completion and recording
- Ensure applicable staff complete their moving and handling self-assessments. This

will include those with a medium risk rating following competency assessment or those returning to work following prolonged absence

- Maintain a record of moving and handling assessment / training for individual members of staff at Ward/Departmental level, for example, within e:ESS, the employees personnel file or a dedicated training file
- Ensure that incidents and near misses are recorded via DATIX or any replacement Incident Reporting System
- For staff who regularly physically assist people to move or undertake regular moving and handling of loads, have an appropriate system of local competency assessment is provided
- Review and / or approve incidents and near misses reported to their department ensuring any actions to reduce risk are completed
- Refer where appropriate, members of staff returning from absence following a musculoskeletal disorder with continuing symptoms to Occupational Health and Moving and Handling for review with regards to further input
- Notify the Occupational Health, Moving & Handling and Health & Safety teams as soon as possible, if serious injury resulting from a moving and handling incident occurs
- Ensure that new/inexperienced staff work in conjunction with appropriately trained staff in order to reduce the potential risk of injury
- Develop local processes for working with Plus size people
- Undertake initial categorisation of the type of event and seriousness on the incident form
- Initiate local investigation(s) as required
- Provide feedback to staff regarding the actions taken following an incident
- Maintain departmental policies and procedures and ensure staff are informed of any changes

### 3.5 Every member of staff

Everyone in the organisation has a responsibility to:

- Take reasonable care of their own health and safety and that of others who may be affected by their activities or omissions
- Comply with NHSGGC's Moving and Handling Policy
- When appropriate, in patient handling areas, staff must carry out patient / client specific moving and handling assessments. These must be recorded with a safe system of work of how the person is to be assisted to move on the relevant documentation
- Follow guidance for assisting plus sized people. Contact the Moving and Handling team if there are outstanding concerns
- Follow policies and procedures identified by risk assessment and/or care plans. If this is not possible report and/or record any changes required
- Avoid manual lifting of the full/major portion of the body weight of person, except in exceptional or life threatening situations
- Recognise high risk handling activity and understand why these activities are inappropriate and must be reported
- Make full and proper use of equipment and know how to report faults
- Apply principles learnt from moving and handling education to facilitates efficient movement and handling, to the best of their ability
- Be aware of their own personal capability before handling loads, and seek

- assistance if required
- Staff should identify to their manager any issues that might affect their ability to undertake moving and handling activities enabling measures of support to be implemented
- Report any incidents of musculoskeletal pain to their Local Manager. If the incident is related to work this must be reported on Datix or any replacement Incident Management System. If required, self-refer to occupational health and/or physiotherapy

## 3.6 Moving and Handling Service

This department has a number of support responsibilities in relation to NHSGGC wide Moving and Handling arrangements. These include:

- Advise on strategic developments required to reduce musculoskeletal disorders and to comply with legislation and current best practice
- Audit the risk assessment process and advise when necessary
- Promote the implementation of the NHSGGC Moving and Handling Policy
- Ensure systems are in place to monitor the competence of staff undertaking higher risk moving and handling activities
- Provide advice for managers and staff at all levels of the organisation
- Develop moving and handling standards across the organisation
- Advise on design and equip of new builds and refurbishments where appropriate
- Maintain a record of moving and handling education for all members of staff within NHSGGC and provide reports to relevant personnel
- Investigate relevant moving and handling incidents reported via DATIX (or any subsequent Incident Reporting System)
- Liaise with service providers regarding moving and handling and to be involved in discussions regarding future service level contracts
- Support RIDDOR and other significant incidents being investigated from a moving and handling perspective as required
- Provide assistance and support to staff in all aspects of moving and handling at local level

# 4. Body of Policy

## 4.1 Education

### *Legislation Relating to Moving and Handling Education*

1. The Health and Safety at Work etc. Act 1974, Part 1, Section 2(2)c requires employers to provide “...such *information, instruction, training and supervision* as is *necessary* to ensure, so far as is reasonably practicable, the health and safety at work of his employees.”
2. The Management of Health and Safety at Work Regulations 1999, Regulation 5 requires that “Every employer shall make... arrangements as are appropriate...for the effective planning, organisation, control, monitoring and review of the preventative and protective measures.”

In addition, regulation 13 (2) and (3) requires employers to provide health and safety training:

- On recruitment
  - When risks change
  - To be repeated periodically where appropriate
3. The Manual Handling Operations Regulations 1992 (as amended 2002), Regulation 4(1)(b)(i), (ii), (iii) and Regulation 5 do not specify training, however, employees should be given information on:
- Recognition of risk
  - Risk assessment including consideration of the following factors; task, individual capability, load, environment and other factors
  - Safe working systems
  - Use of equipment
4. The document 'The Scottish Manual Handling Passport Scheme' was issued by the Scottish Government (CEL 15, 2014) and identifies minimum standards for moving and handling. These minimum standards identify a curriculum for foundation (induction) training that will enable the transfer of induction training between participating organisations. Additionally, the standards require that employers implement either a training or competency assessment approach to update education.
5. In summary, moving and handling training should be provided on recruitment, when risks change and repeated where appropriate. Employers are required to monitor and review the effectiveness of the training within the work place to ensure the risks identified through the initial risk assessment of moving and handling activities undertaken by their employees is minimised.

## 4.2 Education NHSGGC will provide

### 1. Foundation (Induction) training

This is for all new starts who have not previously attended Foundation training from another organisation participating in the Scottish Manual Handling Passport scheme. Foundation courses are for staff groups who are required to handle either people regularly (1 day) or people occasionally or inanimate loads regularly (1/2 day). Staff should not undertake higher risk moving and handling activities, for example, assisting dependent people to move and frequent handling of inanimate loads until they have undertaken this training.

Staff who are not required to handle loads regularly are expected to undertake the moving and handling e-learning module currently hosted on Learn Pro (see link on page 13) or accessible through [NHSGGC - HR Connect](#)

Induction training dates are available on HR Connect (e:ESS) for Acute and Partnerships staff on link below.

### 2. Competency Assessment

NHSGGC has adopted a competency assessment approach for update education of

higher risk staff to facilitate the focusing of moving and handling education to individuals who require it based on skill gap and risk. Staff who require further moving and handling input will generally receive this in their place of work provided by the Moving and handling team, removing the need in the majority of cases to send staff on classroom based training courses.

Further information on Education Competence assessment can be found in the Moving and Handling pages [Moving and Handling - NHSGGC](#).

### 3. Self-Assessment

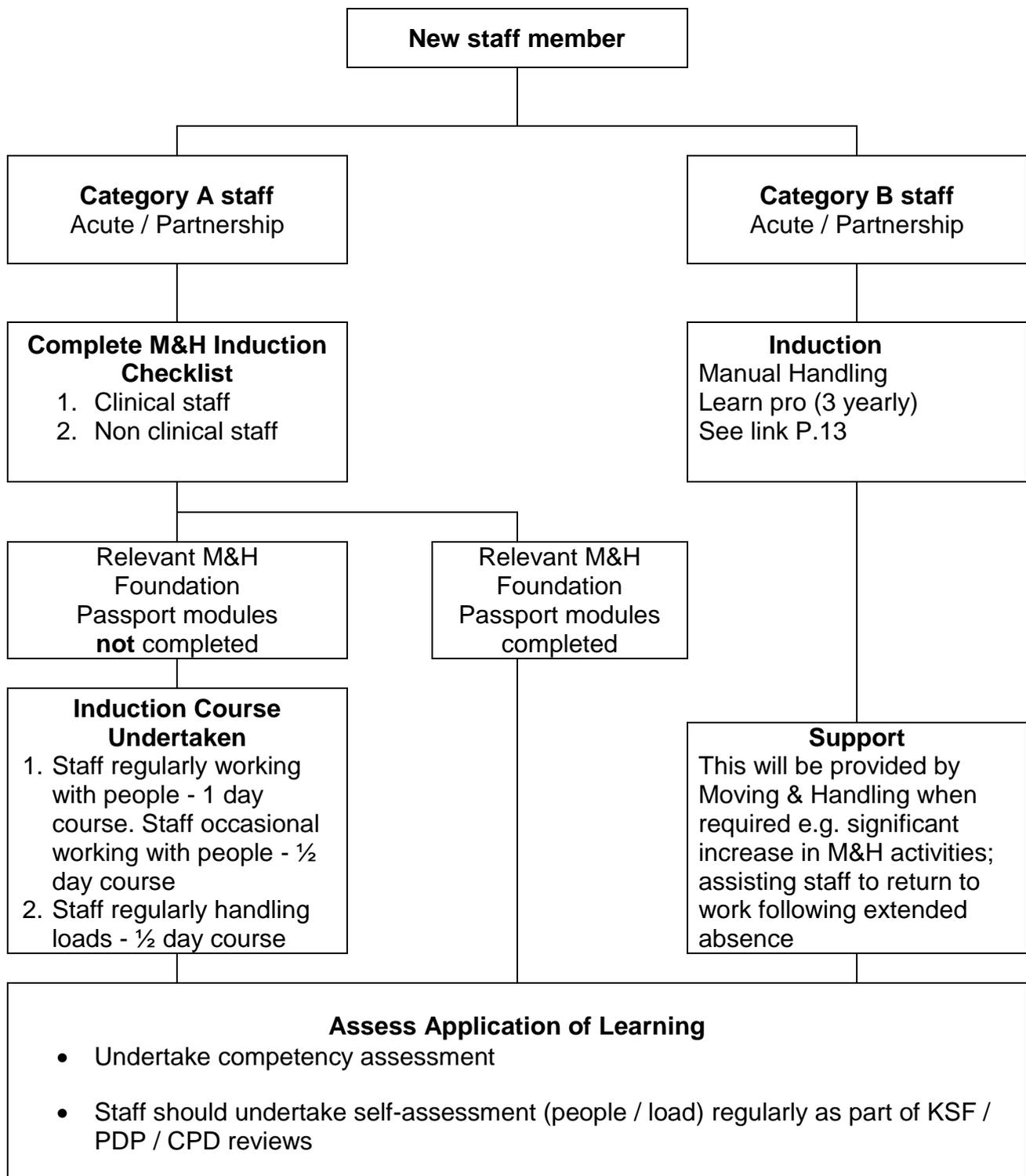
Self-assessment documentation has been developed for clinical & non clinical staff (see above Moving & Handling link). This documentation prompts staff to identify learning need in terms of their moving and handling knowledge and skills. This tool can be used as part of the TURAS and / or PDP review process if a staff member has any work place moving & handling concerns. In addition this self-reflection documentation can be used if: staff are returning from long term sickness absence; if a staff member is transferring into a clinical area with a different skill set or if a staff member has scored medium or above during their competency assessment.

### 4. Arrangements can be made for onsite meetings/ coaching sessions, either 1:1 or small groups can be arranged to update skills.

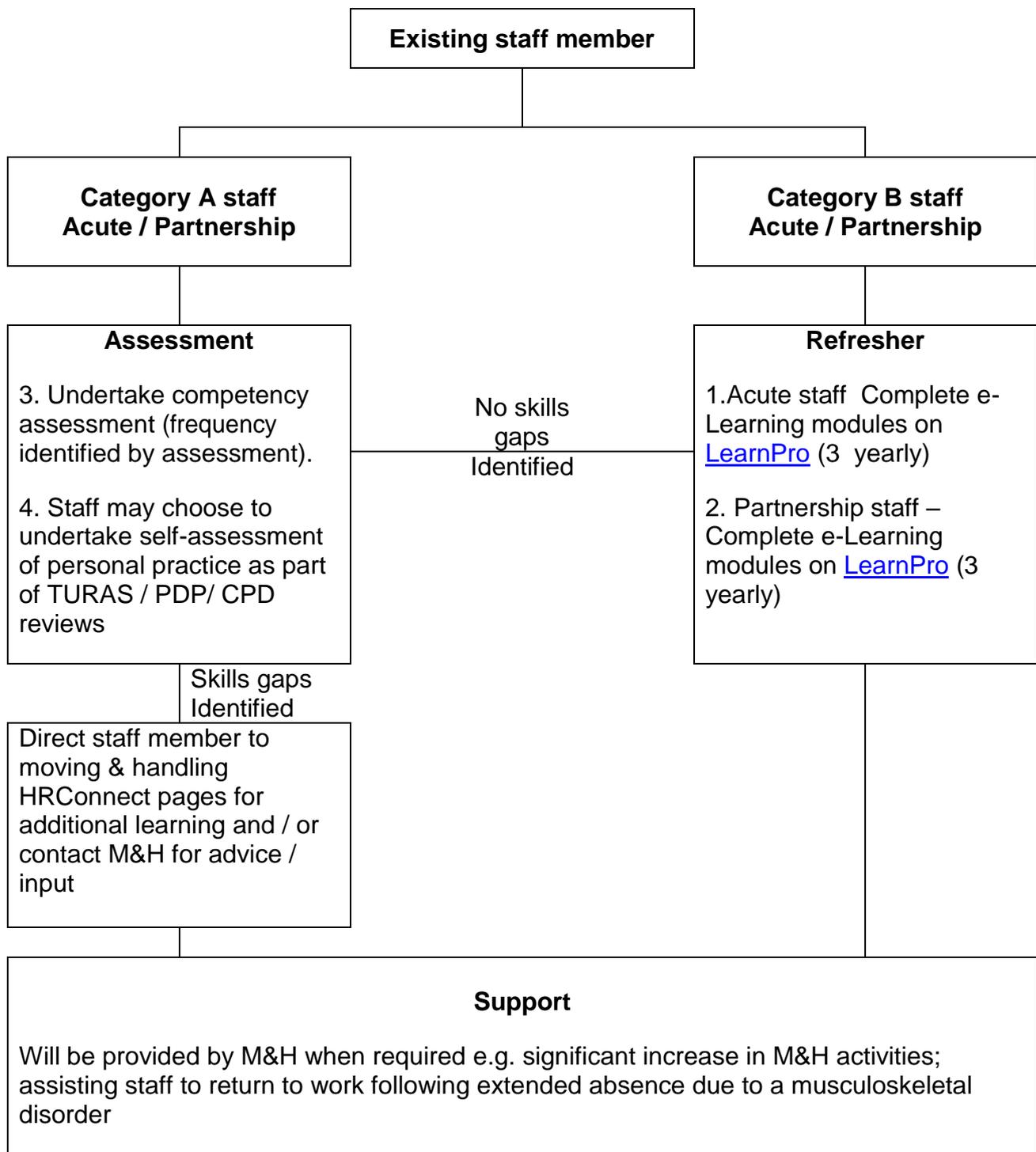
These courses are designed for staff:

- who are returning to work after a long absence and who need to refresh their skills
- who are struggling to stay at work due to a musculoskeletal disorder which they perceive is being made worse by how they are currently undertaking their work activities
- who during review with their manager identify they have some skills gaps
- who as the result of a competency / self-assessment, are identified as requiring the session by a Moving and Handling Practitioner

## 4.3 Overview of Moving and Handling Education Process – New Staff



## 4.4 Overview of Moving and Handling Education Process – Existing Staff



## 4.5 Risk Assessment

The Manual Handling Operations Regulations (HSE, 2004), make it each Manager's responsibility to reduce risks within their area. The extent to which Managers need to take action depends on the level of risk (see figure 2).

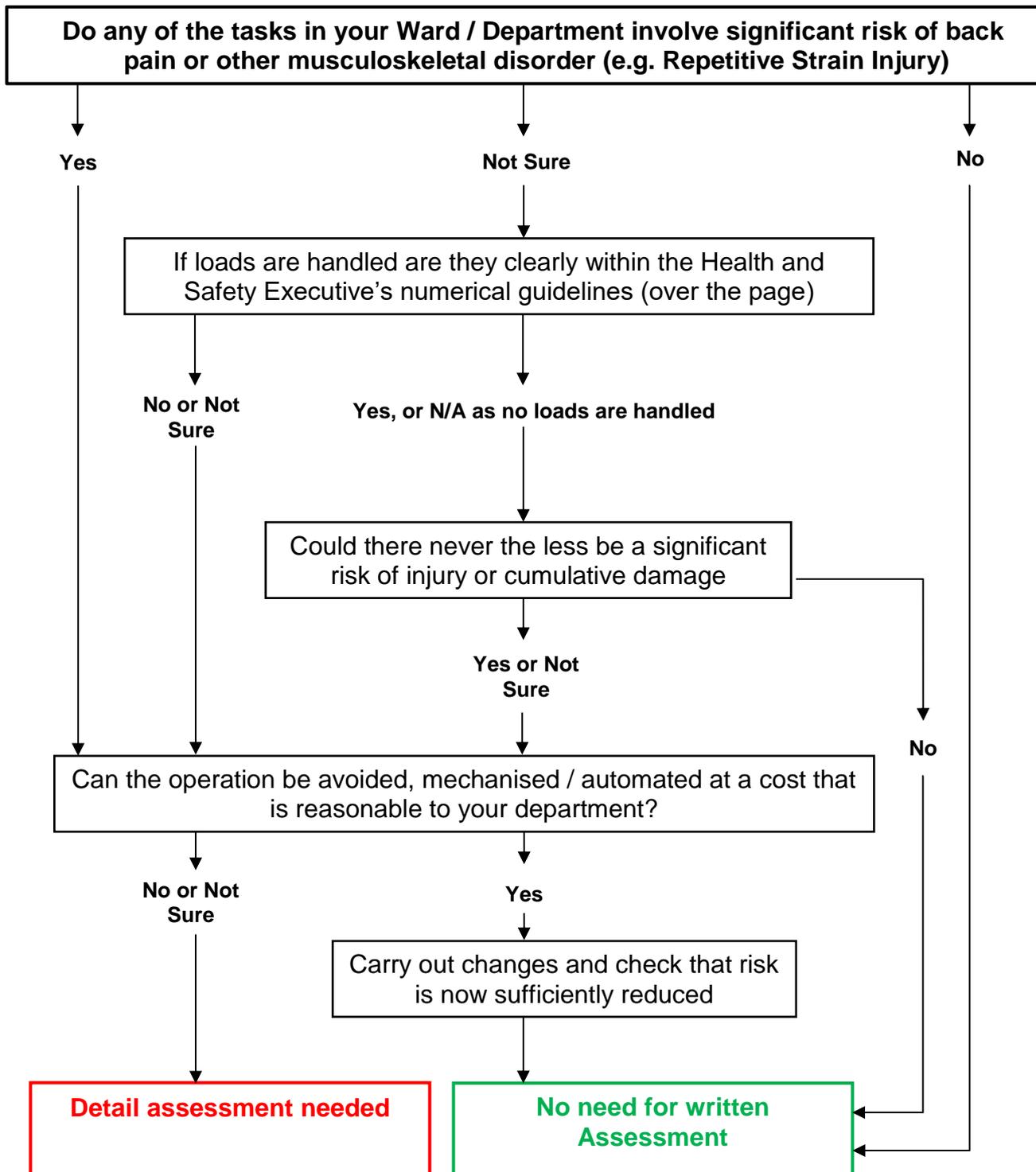


Fig 1. Risk Assessment flow chart

Moving and Handling Risk Assessment forms can be obtained from [Moving and Handling - NHSGGC](#) and advice, if required for completing the assessments, can be sought from the moving and handling team.

**N.B.** If an unusual handling task has to be carried out, it is the Local Managers responsibility to assess the task and decide a course of action again, advice if required, can be sought from the Moving and Handling Department.

## 4.6 Guidelines for Lifting and Lowering Operations

Further information regarding carrying, pushing, pulling, twisting and repetitive operations can be obtained from Health and Safety or Moving and Handling Departments.

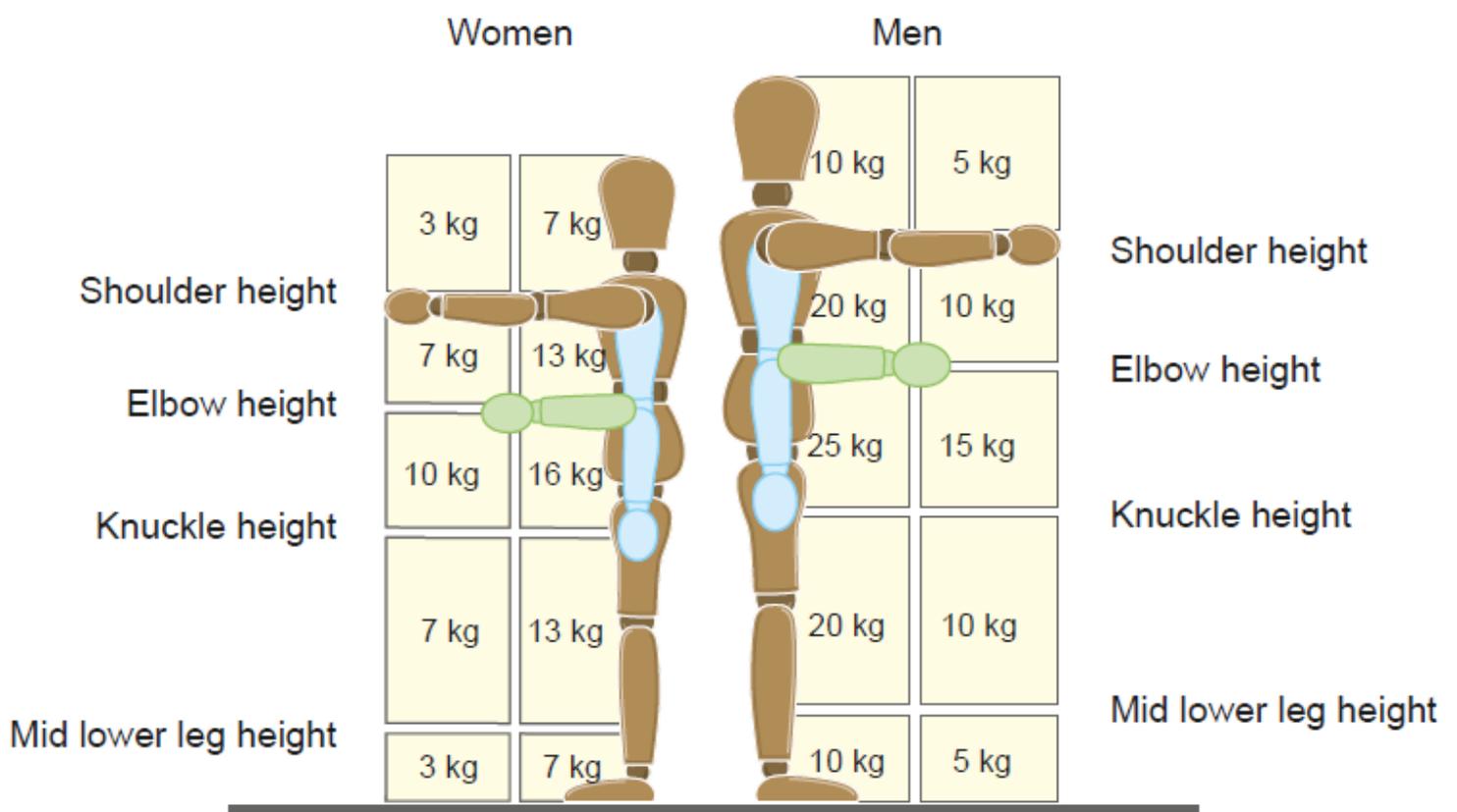


Fig 2. Guidance for when a risk assessment should be conducted

**N.B.** The above guidelines are for when a moving and handling risk assessment must be carried out, i.e. if the weight of the load to be lifted is greater than that shown in the diagram, a Risk Assessment should be undertaken. The figures noted above will need to be reduced in a number of circumstances, including for tasks which are highly repetitive, involve long carry distances and involve twisting. It should be noted that these figures are **not maximum weight limits**.

## 5. Review

October 2027 (Sooner if any legislation change)

**Previous Policy** - July 2017

### **Changes from previous Policy**

Reformatted into current Policy template with wording updated to fit new format and reflect current practice

Links updated

Flowcharts reformatted & updated

Appendices removed

Bibliography remove

### **Communication and Implementation Plan**

Corporate communications will be used to advise staff that the policy has been updated.

The Moving and Handling Team can provide advice and training in addition to the resources on the Moving and Handling pages [Moving and Handling - NHSGGC](#)

### **Monitoring**

Monitoring of implementation and compliance with this policy shall be undertaken by the Health and Safety Forum.

### **Impact Assessment**

To be completed as separate document

## 6. References

[Moving & Handling Guidance Documents](#)  
[Display Screen Equipment Policy & Guidelines](#)  
[Health & Safety Policy](#)  
[Incident Management Policy](#)  
[Provision & Use Of personal Protective Equipment](#)  
[Safety Notice Policy](#)  
[Bariatric Guidance](#)  
[Rehabilitation / Treatment Handling – \(Appendix 4\)](#)  
[Guidance for Managing Musculoskeletal Disorders](#)

[Falls Service](#)

### Further Information

Care Inspectorate - [Managing falls and fractures](#)

Health and Safety Executive - [www.hse.gov.uk/scotland/](http://www.hse.gov.uk/scotland/)

Health and Safety Executive web pages and guidance, including:

[Musculoskeletal Disorders](#)

[Moving and Handling Equipment including hoists](#)

[Health and Social Care Services](#)

[National Back Exchange](#)

Scotland's Commissioner for Children and Young People – [www.sccyp.org.uk](http://www.sccyp.org.uk) a report on the moving and handling of children and young people with disabilities - [SCCYP Report](#)

Scottish Manual Handling Forum – [www.smhf.co.uk](http://www.smhf.co.uk)

The Chartered Society of Physiotherapy - [www.csp.org.uk](http://www.csp.org.uk)

The College of Occupational Therapy - [www.cot.org.uk](http://www.cot.org.uk)

The Royal College of Midwives - [www.rcm.org.uk](http://www.rcm.org.uk)

The Royal College of Nursing – [www.rcn.org.uk](http://www.rcn.org.uk)

The Scottish Government – [www.scotland.gov.uk/home](http://www.scotland.gov.uk/home)

The Society of Radiographers - [Home | SoR](#)