

Corporate	CCG CO11 Moving and Handling Policy
------------------	--

Version Number	Date Issued	Review Date
V3	29/03/2018	March 2020

Prepared By:	Governance Manager, North of England Commissioning Support
Consultation Process:	Policy forwarded to CCG for comments and changes before been taken to Committee for approval
Formally Approved:	29/03/2018

Policy Adopted From:	V2 CCG CO11 Policy
Approval Given By:	Quality, Safety and Risk Committee

Document History

Version	Date	Significant Changes
1	March 2013	Policy provided to Clinical Commissioning Group (CCG) as part of policy suite.
2	May 2015	Re-styled to CCG Policy standard Review of duties and responsibilities
3	February 2018	Re-styled to CCG Policy standard Review of duties and responsibilities

Equality Impact Assessment

Date	Issues
December 2017	See section 9 of this document

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.

Table of Contents

1. Introduction	3
2. Definitions	4
3. Policy for Moving and Handling	4
3.1. Risk Assessment - Manual Handling of objects.....	4
3.2 Back Care Treatment/Occupational Health	4
4. Duties and Responsibilities	5
5. Implementation	8
6. Training Implications	8
7. Related Documents.....	9
7.1 Other related policy documents.....	9
7.2 Legislation and statutory requirements.....	9
8. Monitoring, Review and Archiving	9
8.1 Monitoring.....	9
8.2 Review.....	9
8.3 Archiving.....	10
9. Equality Impact Assessment	11
 Appendix A.....	
Further Guidance for Manual Handling Operations and the Safety of Equipment.....	16
 Appendix B.....	
Manual Handling Risk Assessment	18

1. Introduction

- 1.1 For the purposes of this policy, NHS Newcastle Gateshead 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

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

Quality, Safety and Risk Committee	<p>The Quality, Safety and Risk 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.</p>
Chief Officer	<p>The Chief Officer, as Accountable 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.</p>
Head of Corporate Affairs	<p>The Head of Corporate Affairs will:</p> <ul style="list-style-type: none"> • Identify the appropriate process for regular evaluation of the implementation and effectiveness of this policy. • Identify and implement revisions to this policy and arrange for superseded versions of this policy to be retained in accordance with Records Management: NHS Code of Practice (2009). • Maintain the policy database.
Governing Body	<p>The Governing Body, as the employer, is responsible for ensuring health and safety and conducting the CCG's undertakings in such a way as to ensure the safety of staff, visitors and others affected by its undertaking so far as is reasonably practicable. The Governance and Risk Committee is responsible for giving the Governing Body assurance on the following:</p> <ul style="list-style-type: none"> • ensuring that there is an effective policy for Health and Safety at Work in respect of its employees, visitors, others and that it is reviewed and updated on a regular basis. • the promulgation of the policy and of health and safety information among CCG staff. • the establishment of health and safety procedures (Management of Health and Safety at Work Regulations 1999). • ensuring that all liability is covered by adequate insurance. • ensuring that sufficient resources are made available to enable managers of the CCG to fulfil their legal obligations.

<p>Nominated Executive</p>	<p>The responsibilities of the Chief Officer are discharged through the Nominated Executive for Health and Safety. They will ensure that:</p> <ul style="list-style-type: none"> • the CCG complies with all statutory obligations in relation to health and safety. • mechanisms are in place to effectively monitor performance on behalf of the Governing Body and that they are fully implemented. • the Governing Body and appropriate committees are informed and advised regarding action needed on any significant health and safety event and actual or potential risk. • the establishment and maintenance of an effective health and safety advisory service to the CCG through the appointment and/or training of adequate numbers of Competent Persons. • the availability of adequate health and safety training programmes for all levels of staff. • adequate resources are made available to ensure compliance with statutory health and safety obligations. • update and review with the Health and Safety team the Health and Safety Policy in accordance with the Health and Safety at Work etc. Act 1974 and the associated regulations issued by the Health and Safety Executive. • the appropriate committees function in accordance with statutory and mandatory health and safety regulations. • so far as is reasonably practicable that all Managers are aware of their responsibilities. • a management system exists for reporting and investigating incidents. • health, safety and welfare performance is measured, strategic targets set and progress monitored and reviewed. • adequate provision for health and safety is included in any service level agreements/contracts.
<p>All Managers</p>	<p>The Managers are responsible for ensuring that all activities within their areas of responsibility are managed and for the communication of health and safety information, in particular;</p> <ul style="list-style-type: none"> • ensuring that CCG policy is implemented within their areas of responsibility by agreeing a programme of action for health and safety , setting objectives and monitoring their effectiveness. • ensuring that risk minimisation is integrated into new service developments which may affect the health and safety of the CCG. <p style="text-align: right;"><i>See next page</i></p>

	<ul style="list-style-type: none"> • ensuring that adequate information, instruction, training and supervision is provided as necessary for all levels of staff to ensure they are safe and without risk to health. (A Health and Safety Leadership Checklist can be found in Appendix A). • have a special knowledge of their department and will therefore have a key role to play in ensuring good health and safety practice. They will advise the Executive lead and provide a first point of contact for safety representatives, trade union officials and others who wish to make representation on health and safety matters. Their responsibilities include ensuring: <ul style="list-style-type: none"> • so far as is reasonable, the health, safety and welfare of all persons, including visitors, casual/temporary staff in their place of work. • that necessary information, instruction, training and supervision are provided to all employees. • that all employees attend all relevant health and safety training. • that any relevant local procedures are developed and implemented in accordance with relevant corporate policies. • that suitable and sufficient risk assessments are carried out in their area of work and appropriate action taken. • that health and safety issues, including health and safety policies, are communicated and discussed at team meetings or relevant forum. • that specialist roles are acknowledged, e.g. Risk Assessors, Fire Wardens, and First Aiders. • that staff are familiar with CCG health and safety policies and implement them, calling on the assistance of the health and safety team and other specialist advisors as necessary. • compliance with all legal requirements and CCG policies in relation to health and safety in their areas of responsibility. • that all accidents and near misses are reported in a timely manner and properly investigated as per policy and any recommendations to prevent a recurrence are implemented as soon as practicable. • that they fully consult with and involve staff on matters relating to health and safety. <p>A checklist for Managers is attached as Appendix B.</p>
--	--

All Staff	<p>All staff, including temporary and agency staff, are responsible for:</p> <ul style="list-style-type: none"> • taking reasonable care for the health and safety • following safe working practices applicable to their work at all times. • reporting any hazardous situation or shortcomings in the existing safety arrangements to their manager or on SIRMS. • working in accordance with information and training provided. • not misusing or interfering with anything that has been provided for their health and safety. • fully co-operating and abiding by risk assessments. • being aware of the location of first aid equipment and of the identify and location of First Aiders. • being aware of the arrangements for evacuating the building. • practicing good housekeeping, eg. keeping work areas tidy and free from obstructions. • undertaking training/awareness sessions when provided.
------------------	---

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 Code of Practice for Health and Social Care 2016.

9. Equality Impact Assessment



Introduction - Equality Impact Assessment

An Equality Impact Assessment (EIA) is a process of analysing a new or existing service, policy or process. The aim is to identify what is the (likely) effect of implementation for different groups within the community (including patients, public and staff).

We need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010
- Advance equality of opportunity between people who share a protected characteristic and those who do not
- Foster good relations between people who share a protected characteristic and those who do not

This is the law. In simple terms it means thinking about how some people might be excluded from what we are offering.

The way in which we organise things, or the assumptions we make, may mean that they cannot join in or if they do, it will not really work for them.

It's good practice to think of all reasons why people may be excluded, not just the ones covered by the law. Think about people who may be suffering from socio-economic deprivation or the challenges facing carers for example.

This will not only ensure legal compliance, but also help to ensure that services best support the healthcare needs of the local population.

Think of it as simply providing great customer service to everyone.

As a manager or someone who is involved in a service, policy, or process development, you are required to complete an Equality Impact Assessment using this toolkit.

Policy	A written statement of intent describing the broad approach or course of action the Trust is taking with a particular service or issue.
Service	A system or organisation that provides for a public need.
Process	Any of a group of related actions contributing to a larger action.



STEP 1 - EVIDENCE GATHERING

Name of person completing EIA:	Lee Crowe
Title of service/policy/process:	Moving and Handling Policy
Existing: <input type="checkbox"/> New/proposed: <input checked="" type="checkbox"/> Changed: <input type="checkbox"/>	
What are the intended outcomes of this policy/service/process? Include outline of objectives and aims	
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 be affected by this policy/service /process? (please tick)	
<input type="checkbox"/> Consultants <input type="checkbox"/> Nurses <input type="checkbox"/> Doctors <input checked="" type="checkbox"/> Staff members <input type="checkbox"/> Patients <input type="checkbox"/> Public <input type="checkbox"/> Other	
If other please state:	
<hr/>	
What is your source of feedback/existing evidence? (please tick)	
<input type="checkbox"/> National Reports <input type="checkbox"/> Internal Audits <input type="checkbox"/> Patient Surveys <input type="checkbox"/> Staff Surveys <input type="checkbox"/> Complaints/Incidents <input type="checkbox"/> Focus Groups <input type="checkbox"/> Stakeholder groups <input type="checkbox"/> Previous EIAs <input checked="" type="checkbox"/> Other	
If other please state:	
<ul style="list-style-type: none"> • Health and Safety at Work Act • Management of Health and Safety at Work Regulations • Health and Safety Guidance HSG65 • Feedback from CCG staff and regular service line meetings between NECS/CCG. 	

Evidence	What does it tell me? (about the existing service/policy/process? Is there anything suggest there may be challenges when designing something new?)
National Reports	Not applicable
Patient Surveys	Policy has no impact on patients
Staff Surveys	Staff Surveys to include questions around H&S
Complaints and Incidents	This policy will ensure that systems are in place should there be any complaints received or Incidents regarding Health and Safety and that the CCG has robust systems in place around H&S Management
Results of consultations with different stakeholder groups – staff/local community groups	Only applicable to staff within CCG
Focus Groups	Only applicable to staff within CCG
Other evidence (please describe)	



STEP 2 - IMPACT ASSESSMENT

What impact will the new policy/system/process have on the following: (Please refer to the 'EIA Impact Questions to Ask' document for reference)
Age A person belonging to a particular age The Policy will ensure that individuals of all ages are considered in relation to Health and Safety tasks.
Disability A person who has a physical or mental impairment, which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities This Policy has a positive impact on any staff who have a physical/Mental impairment by considering their needs regarding H&S and the subsequent policies and procedures that underpin the Health and Safety Strategy.
Gender reassignment (including transgender) Medical term for what transgender people often call gender-confirmation surgery; surgery to bring the primary and secondary sex characteristics of a transgender person's body into alignment with his or her internal self perception. As far as we are aware there are no members of staff to whom this applies. Should there be a member of staff undergoing gender reassignment/transgender the content within the policy does not include vocabulary that should cause offense.
Marriage and civil partnership Marriage is defined as a union of a man and a woman (or, in some jurisdictions, two people of the same sex) as partners in a relationship. Same-sex couples can also have their relationships legally recognised as 'civil partnerships'. Civil partners must be treated the same as married couples on a wide range of legal matters The Policy has no impact on marriage or civil partnership.
Pregnancy and maternity Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth, and is linked to maternity leave in the employment context. The Policy can be accessed by all staff via intranet and policies/procedures are in place which underpin the policy's aims. The CCG also has New and Expectant mothers risk assessment documentation in place to ensure all risks are considered.
Race It refers to a group of people defined by their race, colour, and nationality, ethnic or national origins, including travelling communities. There are no requirements for translation within the current staff group should the staff group characteristics change then versions and signage within the CCG in other languages can be obtained.
Religion or belief Religion is defined as a particular system of faith and worship but belief includes religious and philosophical beliefs including lack of belief (e.g. Atheism). Generally, a belief should affect your life choices or the way you live for it to be included in the definition. Risk assessments and training can be arranged for staff unavailable due to religious or other reasons.
Sex/Gender A man or a woman. There is no discriminations between males and females within the policy
Sexual orientation Whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes Policy uses appropriate language no additional considerations are required.
Carers A family member or paid helper who regularly looks after a child or a sick, elderly, or disabled person Risk assessments and training can be arranged for those staff that have caring responsibilities and there is also online training which can be accessed whilst working within the CCG or at home.
Other identified groups such as deprived socio-economic groups, substance/alcohol abuse and sex workers Other groups have been considered however as the Policy is for staff there are no additional impacts on health inequalities.



STEP 3 - ENGAGEMENT AND INVOLVEMENT

How have you engaged stakeholders in testing the policy or process proposals including the impact on protected characteristics?
Please list the stakeholders engaged: Shared policy with Governance Colleagues within CCG. Regular service line meetings with CCG to discuss any H&S issues that arise.



STEP 4 - METHODS OF COMMUNICATION

What methods of communication do you plan to use to inform service users of the policy?

- Verbal – stakeholder groups/meetings Verbal - Telephone
 Written – Letter Written – Leaflets/guidance booklets
 Email Internet Other

If other please state:

ACCESSIBLE INFORMATION STANDARD

The Accessible Information Standard directs and defines a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of service users.

Tick to confirm you have you considered an agreed process for:

- Sending out correspondence in alternative formats.
 Sending out correspondence in alternative languages.
 Producing / obtaining information in alternative formats.
 Arranging / booking professional communication support.
 Booking / arranging longer appointments for patients / service users with communication needs.

If any of the above have not been considered, please state the reason:

This policy is not applicable to service users as it relates to CCG staff only however should alternative formats etc be required the Health and Safety Team within the CSU will ensure that this is actioned.



STEP 5 - SUMMARY OF POTENTIAL CHALLENGES

Having considered the potential impact on the people accessing the service, policy or process please summarise the areas have been identified as needing action to avoid discrimination.

Potential Challenge	What problems/issues may this cause?
1 Workforce Characteristics	May require other formats such as braille, size of font etc. May also need to consider if face to face training takes place that accessibility of training venues is sufficient.



STEP 6- ACTION PLAN

Ref no.	Potential Challenge/ Negative Impact	Protected Group Impacted (Age, Race etc)	Action(s) required	Expected Outcome	Owner	Timescale/ Completion date
1	Staff unable to access Strategy	Age, Disability	Alternative formats provided if required, font size adjustment. As part of reasonable adjustments on appointment.	All staff can access the policy for reference	CCG/ NECS H&S	On receipt of individual request

Ref no.	Who have you consulted with for a solution? (users, other services, etc)	Person/ People to inform	How will you monitor and review whether the action is effective?
1	CCG Governance Colleagues	NECS Health and Safety Team	Regular Service Line Meetings



SIGN OFF

Completed by:	Lee Crowe
Date:	December 2017
Signed:	
Presented to: (appropriate committee)	Quality, Safety and Risk Committee
Publication date:	March 2018

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).

Manual Handling Risk Assessment

Section A	
Site.....Department.....	
Task description:	
Operations covered by this assessment (detailed description): Location(s): Personnel Involved (numbers, staff, contractor etc)	Control measures currently in use (e.g. deliveries brought to point of use): Equipment currently in use (e.g. trolleys, barrows, etc)
<p>Re-assess the risk taking into consideration the control measures already in place</p> <p>Likelihood of incident: Rare <input type="checkbox"/> (1) Unlikely <input type="checkbox"/> (2) Possible <input type="checkbox"/> (3) Likely <input type="checkbox"/> (4) Certain <input type="checkbox"/> (5)</p> <p>Consequence of incident: Negligible <input type="checkbox"/> (1) Minor <input type="checkbox"/> (2) Moderate <input type="checkbox"/> (3) Major <input type="checkbox"/> (4) Catastrophic <input type="checkbox"/> (5)</p> <p>The numbers in the brackets are the risk score. Multiply the likelihood X consequence to achieve the risk score. Risk score <input type="checkbox"/></p> <p>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</p>	

Section B - More detailed assessment, where necessary					
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 taken)	Possible remedial action (Possible changes to be made to system/task, load, workplace/space, environment. Communication that is needed)
	Low	Med	High		
The tasks - do they involve: <ul style="list-style-type: none"> • Holding loads away from trunk? <input type="checkbox"/> • Twisting? <input type="checkbox"/> • Stooping? <input type="checkbox"/> • Reaching upwards? <input type="checkbox"/> • Large vertical movement? <input type="checkbox"/> • Long carrying distances? <input type="checkbox"/> • Strenuous pushing or pulling? <input type="checkbox"/> • Unpredictable movement of loads? <input type="checkbox"/> • Repetitive handling? <input type="checkbox"/> • Insufficient rest or recovery? <input type="checkbox"/> • A work rate imposed by process? <input type="checkbox"/> 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
The loads - are they: <ul style="list-style-type: none"> • Heavy? <input type="checkbox"/> • Bulky/unwieldy? <input type="checkbox"/> • Difficult to grasp? <input type="checkbox"/> • Unstable/unpredictable? <input type="checkbox"/> • Intrinsically harmful (e.g. sharp/hot)? <input type="checkbox"/> 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
The working environment - are there: <ul style="list-style-type: none"> • Constraints on posture? <input type="checkbox"/> • Poor floors? <input type="checkbox"/> • Variations in levels? <input type="checkbox"/> • Hot/cold/humid conditions? <input type="checkbox"/> • Strong air movements? <input type="checkbox"/> • Poor lighting conditions? <input type="checkbox"/> • Restricted access and egress? <input type="checkbox"/> 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Individual capability - does the job: <ul style="list-style-type: none"> • Require unusual capability? <input type="checkbox"/> • Hazard those with health problem? <input type="checkbox"/> • Hazard those who are pregnant? <input type="checkbox"/> • Call for special information/training? <input type="checkbox"/> 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Other factors: Is movement or posture hindered by clothing or personal protective equipment?	Yes <input type="checkbox"/> No <input type="checkbox"/>				

Section C – Remedial action to be taken

Remedial steps that should be taken, in order of priority:	Person responsible for implementing controls	Target implementation date	Completed Y/N
1 ?			
2			
3			
4			
5			

Date by which actions should be completed:

Risk score following remedial action taken:

Assessors Name: Signature:.....Date of assessment

Date for 1st review of assessment:Date of 2nd review:Date of 3rd review:

ACTIVITY

Task

											
YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO				

Individual

				
YES NO	YES NO	YES NO	YES NO	YES NO

Load

								
YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO

Environment

											
YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO					

Other Factor