

MANUAL HANDLING

▶ AIMS OF SECTION

To reduce the number of injuries caused by poor and excessive lifting.

To provide the basis for compliance with the legal and good practice requirements relating to manual handling.

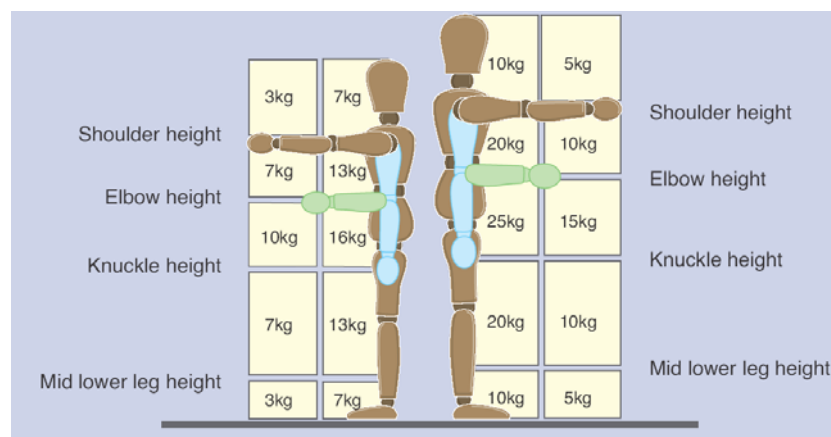
▶ INSTRUCTIONS

For all tasks which regularly involve lifting or moving loads, details should be entered on the **INDEX OF MANUAL HANDLING TASKS (FORM 1)**.

On the form entitled **FORM 2: MANUAL HANDLING OF LOADS – LIFTING AND CARRYING OF LOADS ASSESSMENT CHECKLIST, Section A** should be completed for lifting and carrying. Templates have been provided.

For all tasks which regularly involve lifting loads greater than those shown in the following diagram the assessor should then go on to complete the assessment **DETAILED MANUAL HANDLING ASSESSMENT Section B**.

Examples of common heavy objects within the hotel should be recorded on **FORM 3**.



This assessment should be carried out by the ‘competent person’.

A number of questions which are posed in the columns headed the **TASKS, LOADS, WORKING ENVIRONMENT, INDIVIDUAL CAPABILITY AND OTHER FACTORS** regarding the particular task. If appropriate the column headed **YES** would be ticked and an assessment of risk identified. An assessment of the risk should be made bearing in mind the current controls and documented in **Section B**.

Remedial action which will reduce the risk should be documented in **REMEDIAL ACTION Section C**. The priority for remedial action is based upon the seriousness of the likely injuries and potentially the number of people it could affect, either because they all carry out the lifting or because if the load was dropped it could result in injury to other people.

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Guidelines for pushing and pulling

For pushing and pulling operations (whether the load is slid, rolled or supported on wheels) the guideline figures assume the force is applied with the hands, between knuckle and shoulder height. It is also assumed that the distance involved is no more than about 20m. If these assumptions are not met, a more detailed risk assessment should be undertaken using the checklist provided.

	Men	Women
Guideline figure for stopping or starting a load	20kg	15kg
Guideline figure for keeping the load in motion	10kg	7kg

As a rough guide, the amount of force that needs to be applied to move a load over a flat, level surface using a well-maintained handling aid is at least 2% of the load weight.

The force will need to be greater if the conditions are not perfect.

There is no specific limit to the distance over which the load is pushed or pulled as long as there are adequate opportunities for rest and recovery.

The form entitled **FORM 4: MANUAL HANDLING OF LOADS – PUSHING AND PULLING ASSESSMENT CHECKLIST** should be completed for pushing and pulling.

All staff who carry out manual handling tasks on a regular basis must be trained and a record of training should be kept using the training summary **FORM 4: MANUAL HANDLING TRAINING RECORDS**.

The training should include a demonstration by the trainee.

FORM 1: INDEX OF MANUAL HANDLING TASKS

TASK	ASSESSED?	DATE OF ASSESSMENT	REVIEW DATE

FORM 2: LIFTING AND CARRYING OF LOADS: ASSESSMENT CHECKLIST
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Section A – Preliminary:

<p>Task Name:</p> <p>Task description:</p> <p>Load weight:</p> <p>Frequency of operation:</p> <p>Carry distances:</p> <p>Are other manual handling tasks carried out by these operators?</p> <p>Assessment discussed with employees/safety representatives:</p>	<p>Is an assessment needed? (An assessment will be needed if there is a potential risk of injury, eg if the task falls outside the guidelines)</p> <p style="text-align: center;">Yes/No*</p> <p style="text-align: center;">* Circle as appropriate</p>
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If “Yes” continue. If “No” the assessment need go no further.

<p>Operations covered by this assessment (detailed description):</p> <p>Locations:</p> <p>Personnel involved:</p> <p>Date of assessment:</p>	<p>Diagrams (other information including existing control measures):</p>
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If ‘Yes’ continue. If ‘No’ the assessment need go no further.

<p>Overall assessment of the risk of injury? *Circle as appropriate</p> <p>Make your overall assessment after you have completed Section B.</p>	<p>Low/Medium/High*</p>
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MANUAL HANDLING-

Section B Questions to consider	If yes, tick appropriate level of risk			Problems occurring from the tasks (Make rough notes in this column in preparation for the possible remedial action to be taken)	Possible remedial action, eg changes that need to be made to the task, load, working environment etc. Who needs to be involved in implementing the changes?
	Low	Med	High		
Do the tasks involve:					
• holding loads away from trunk?					
• twisting?					
• stooping?					
• reaching upwards?					
• large vertical movement?					
• long carrying distances?					
• strenuous pushing or pulling?					
• unpredictable movement of loads?					
• repetitive handling?					
• insufficient rest or recovery?					
• insufficient rest or recovery?					
Are the loads :					
• heavy?					
• bulky/unwieldy?					
• difficult to grasp?					
• unstable/unpredictable?					
• intrinsically harmful (sharp/hot)?					
Consider the working environment – are there:					
• constraints on posture?					
• poor floors?					
• variations in levels?					
• hot/cold/humid conditions?					
• strong air movements?					
• poor lighting conditions?					
Consider individual capability – does the job:					
• require unusual capability?					
• hazard those with health problem or a physical or learning difficulty?					
• pose a risk to those who are pregnant?					
• call for special information/training?					

MANUAL HANDLING-

Questions to consider:	Yes	No	Problems occurring from the tasks (Make rough notes in this column in preparation for the possible remedial action to be taken)	Possible remedial action, eg changes that need to be made to the task, load, working environment etc. Who needs to be involved in implementing the changes?
Other factors to consider:				
<i>Protective clothing</i>				
• is movement or posture hindered by clothing or personal protective equipment?	Yes	No		
• is there an absence of the correct/suitable PPE being worn?	Yes	No		
<i>Work organisation (psychosocial factors)</i>				
• do workers feel that there has been a lack of consideration given to the planning and scheduling of tasks/breaks?	Yes	No		
• do workers feel that there is poor communication between managers and employees (eg. not involved in risk assessments or decisions on changes in workstation design)?	Yes	No		
• are there sudden changes in workload, or seasonal changes in volume without mechanisms for dealing with the change?	Yes	No		
• do workers feel they have not been given enough training and information to carry out the task successfully?	Yes	No		

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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.			
6.			
7.			
8.			
Date by which actions should be completed:			
Date for review of assessment:			
Assessor's name:	Signature:		

TAKE ACTION ...AND CHECK THAT IT HAS THE DESIRED EFFECT

MANUAL HANDLING

Questions to consider	If yes, tick appropriate level of risk			Problems occurring from the tasks (Make rough notes in this column in preparation for the possible remedial action to be taken)	Possible remedial action, eg changes that need to be made to the task, load, working environment etc. Who needs to be involved in implementing the changes?
	Low	Med	High		
Do the tasks involve:					
• High initial forces to get the load moving?					
• High forces to keep the load in motion?					
• Sudden movements to start, stop or manoeuvre the load?					
• Twisting/manoeuvring of the load into position or around obstacles?					
• One-handed operations?					
• The hands below the waist or above shoulder height?					
• Movement at high speed?					
• Movement over long distances?					
• Repetitive pushing/pulling?					
The load or object to be moved?					
• Does it lack good handholds?					
• Is it unstable/unpredictable?					
• Is vision over/around it restricted?					
If on wheels/castors , are they:					
• Unsuitable for the type of load?					
• Unsuitable for the floor surface/work environment?					
• Difficult to steer?					
• Easily damaged or defective?					
• Without brakes or difficult to stop?					
• With brakes, but the brakes are poor/ineffective?					
• Without a planned inspection and maintenance regime based on a frequency that keeps them in working order?					

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Section B: Pushing and pulling – More detailed assessment, where necessary

Questions to consider	If yes, tick appropriate level of risk			Problems occurring from the tasks (Make rough notes in this column in preparation for the possible remedial action to be taken)	Possible remedial action, eg changes that need to be made to the task, load, working environment etc. Who needs to be involved in implementing the changes?
	Low	Med	High		
Consider the working environment – are there:					
• Constrains on body posture/positioning?					
• Confirmed spaces/narrow doorways?					
• Surfaces or edges to cause cuts/abrasions/burns to hands or body?					
• Rutted/damaged/slippery floors?					
• Ramps/slops/uneven surfaces?					
• Trapping or tripping hazards?					
• Poor lighting conditions?					
• Hot/cold/humid conditions?					
• Strong air movements?					
Consider individual capability – does the job:					
• Require unusual capability?					
• Hazard those with a health problem or a physical or learning difficulty?					
• Hazard those who are pregnant?					
• Call for special information/training?					

MANUAL HANDLING

Questions to consider	Yes/No	Problems occurring from the tasks (Make rough notes in this column in preparation for the possible remedial action to be taken)	Possible remedial action, eg changes that need to be made to the task, load, working environment etc. Who needs to be involved in implementing the changes?
Other factors to consider Equipment			
<ul style="list-style-type: none"> • Is movement or posture hindered by clothing or personal protective equipment? 	Yes/No		
<ul style="list-style-type: none"> • Is there an absence of the correct/suitable PPE being worn? 	Yes/No		
<ul style="list-style-type: none"> • Are trolleys/carts/floor surfaces poorly maintained/cleaned/repaired? 	Yes/No		
<ul style="list-style-type: none"> • Is there a lack of a regular maintenance procedure for the equipment? 	Yes/No		
Work organization			
<ul style="list-style-type: none"> • Do workers feel that there has been a lack of consideration given to the planning and scheduling of tasks/rest breaks? 	Yes/No		
<ul style="list-style-type: none"> • Do workers feel that there is poor communication between users of equipment and others (eg managers, purchasers etc)? 	Yes/No		
<ul style="list-style-type: none"> • Are these sudden changes in workload, or seasonal changes in volume without mechanisms for dealing with the change? 	Yes/No		
<ul style="list-style-type: none"> • Do workers feel they have not been given enough training and information to carry out the tasks successfully? 	Yes/No		

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.			
6.			
7.			
8.			
Date by which actions should be completed:			
Date for review of assessment:			
Assessor's name:		Signature:	

TAKE ACTION ...AND CHECK THAT IT HAS THE DESIRED EFFECT

FORM 5: MANUAL HANDLING TRAINING RECORDS

DATE OF TRAINING	TRAINEE	DEPARTMENT	TRAINEE'S SIGNATURE	TRAINER'S SIGNATURE