Knowledge Guide

Moving and Handling (MH201)
This Knowledge Guide belongs to....

Name:

Organisation:

Place of Work:

Manager:

Start Date:

End Date:
Contents

1. Understand the key concepts of manual handling in relation to assisting and moving individuals

   1. Define the term manual handling
   2. Describe the following terms in relation to assisting and moving individuals: risk, hazard, risk assessment, care plan, ergonomic approach
   3. Describe how current legislation relates to assisting and moving individuals
   4. Identify agreed ways of working that relate to assisting and moving individuals.
   5. List a range of items of manual handling equipment and their uses

2. Understand the impact of assisting and moving for workers and individuals

   1. Explain the importance of keeping up to date on current techniques, equipment and legislation with regard to assisting and moving individuals
   2. Describe the basic anatomy of the human body including the structure of the spine affected by assisting and moving
   3. Describe the potential injuries to the individual which may arise by failing to follow approved assisting and moving techniques
   4. Describe the potential injuries to the worker which may arise by failing to follow approved assisting and moving techniques
   5. Describe the potential legal consequences of injuries to the individual
3 Understand a worker’s own role and roles of others in assisting and moving individuals

1. Describe responsibilities of a worker’s own role in relation to assisting and moving an individual

2. Identify the limitations of a worker’s own role in relation to assisting and moving individuals

3. Describe the role of others in relation to assisting and moving

4. Describe when advice and/or assistance should be sought to assist and move an individual safely

4 Understand the requirements for preparing the environment prior to assisting and moving an individual

1. Describe why preparatory checks are necessary in relation to an individual's care plan, moving and handling risk assessment and the legal requirements for the safety of equipment

2. List a range of precautions for infection prevention and control

3. Describe the difference between formal (documented) and informal (on the spot) risk assessments

4. Describe the steps that should be taken to ensure the environment supports an individual’s dignity during assisting and moving activities

5. Describe how the environment can be a barrier to assisting and moving an individual

6. Describe ways to overcome environmental barriers in the assisting and moving of individuals
Understand how to support the individual to prepare before assisting and moving

1. Describe why it is important to communicate with the individual prior to assisting and moving

2. Describe why it is important to communicate with others prior to assisting and moving

3. Describe what factors should be taken into account when the individual's wishes conflict with their care plan in relation to health and safety and their risk assessment

4. Describe where to seek advice and assistance if the individual’s wishes conflict with their care plan
How to use this Knowledge Guide

Do you need this Knowledge?

This guide is designed to help you to gain the knowledge you need to support you with Moving and Handling. Your manager is responsible for checking your knowledge, understanding and competence in your specific workplace(s) before you work unsupervised.

If you already have a good level of knowledge and experience, you could take an assessment instead and only read sections (or do sections of our eLearning) that you need to do in order to fill the gaps in your knowledge. By using an assessment, your knowledge will be recorded and you can build an evidence portfolio of your competence. This will save you and your manager a lot of time. Your organisation may have free or funded access to our assessment system. Check with your manager before you start using this guide. More information about our services can be found at www.TGMGroup.net.

The following symbols refer to actions you should take to achieve the outcomes. There is also an action checklist at the end.

Reference “Manager”

When we refer to “manager” in this Guide, this is the person responsible for checking you are competent and confident to work, it may mean something different in your role, for example: supervisor, line manager, coach, buddy, mentor, employer or assessor.
Understand the key concepts of manual handling in relation to assisting and moving individuals
1.1 Define the term manual handling

The Manual Handling Operations Regulations 1992 define manual handling as:

**Definition**

- Lifting and putting down
- Pushing and pulling
- Carrying
- Filling and emptying
- Moving
- Supporting a load by hand or bodily force
A load can be an:

- Object
- Person
- Animal

Describe the following terms in relation to assisting and moving individuals

1.2

a) Risk - A risk is the likelihood of a hazard causing harm (high or low). Anyone involved in manual handling could be at risk. Injuries and suffering can be linked to any work involving handling of loads. The weight of the item is an important factor, but many other factors can create a risk of injury. There are risks in handling light loads if the task is repetitive and is being carried out in poor conditions.

Other risks include twisting, bending, stretching or any other awkward posture that is adopted during the completion of a task or activity.
The Manual Handling Operations Regulations 1992 
(amended in 2002) require employers to:

**Avoid** the need for hazardous manual handling where you can

**Assess** the risk of injury from any hazardous manual handling that cannot be avoided

**Reduce** the risk of injury from hazardous manual handling if possible.

These are some of the risks involved with assisting and moving individuals:

- **The environment** - space constraints, uneven floor surfaces, rugs and other trip hazards, and the weather.

- **Your competence** and confidence - have you been assessed?

- **The person’s weight and size.**

- **Equipment available** - is it in working order & suitable?

- **The person’s state of mind** - are they willing or scared, injured or unwell?
b) **Hazard** - A **hazard** is something with the potential to cause harm. It is important to identify any hazards during a risk assessment. Hazards involved in manual handling of individuals include:

- The load or individual being moved
- Equipment available, its state of repair and suitability for use
- Competence of the person doing the move
- Environment, available space, flooring and the weather
c) **Risk Assessment** – A Risk Assessment is a legal requirement to ensure the health, safety, welfare and security of staff, individuals and the wider community. Its purpose is to:

- Help the individual to have their choices met in the safest possible way
- Reduce or remove any risks
- Enable decisions, which are logical, realistic and legal
- Provide clear guidance and information on how to work safely with individuals

Risks can change overtime

Therefore risk assessment and risk management will be subject to frequent review.

A risk assessment is about identifying risks and taking sensible and proportionate measures to control them.
There are 5 steps to undertaking a risk assessment...

1. Identify the hazards
2. Decide who might be harmed and how
3. Evaluate the risks and decide on precautions
4. Record your significant findings
5. Review your assessment - update if necessary

Visit the Health and Safety Executive’s website (HSE) for more information:
http://www.hse.gov.uk/risk/index.htm

d) Care Plan – A Care Plan is an agreement between the individual who is being supported and the organisation who is providing the support to help manage the everyday care, support and wellbeing of the individual. The Care Plan may involve more than one person, organisation or support mechanism, depending on the individual.

It is usually a written document detailing what a person needs support with, when and how. It is kept updated by the people who are involved in providing the care and support.

Locate the Care Plan(s) for the people you will be supporting
An individual’s care plan may contain the following personal information about:

<table>
<thead>
<tr>
<th>What an individual likes and dislikes</th>
<th>Personal goals</th>
<th>Support services in place</th>
</tr>
</thead>
<tbody>
<tr>
<td>Who is in charge of support services</td>
<td>When support will be carried out</td>
<td>Emergency contacts</td>
</tr>
<tr>
<td>Exercise plans</td>
<td>An individual’s preferred method of communication</td>
<td>Eating plans</td>
</tr>
</tbody>
</table>

Individuals are encouraged to create their own care plans. The information is private and should only be seen by the individual and the people involved in providing their care and support.

The care plan should set out how best to support an individual during a manual handling manoeuvre or activity. This will depend on the individual’s circumstances and needs. Always read the care plan before providing care and support to an individual.

The care plan should explain the level of assistance needed, the equipment to be used (if required), and any other relevant information.
e) **Ergonomic approach** – An **ergonomic approach** looks at manual handling as a whole. It takes into account a range of relevant factors, including the nature of the task, the individual, the load, the working environment and any equipment required. The acronym **TILEE** is often used to help people remember what is involved.

### TILEE

| T | TASK | Does the activity involve twisting, stooping, bending, excessive travel, pushing, pulling or precise positioning of the load, sudden movement, inadequate rest or recovery periods, team handling or seated work? |
|---|------|__________________________________________________________________________________________________________________________________________________|
| I | INDIVIDUAL | The worker and their strength or height relevant to the task. Are they pregnant, disabled or suffering from a health problem? Is specialist knowledge, skills or training required? |
| L | LOAD | The person, object or animal that is being moved or supported to move. |
| E | ENVIRONMENT | The working environment. The temperature, lighting, space constraints, floor conditions and levels, ventilation, the weather, clothing or Personal Protective Equipment (PPE) that could restrict movement. |
| E | EQUIPMENT | Is the correct equipment provided for the task? Is it fit for purpose? Do you need any PPE? |
Each of the TILEE categories may influence the others. None of them can be considered on their own. To carry out an assessment in a structured way, it is helpful to begin by breaking the operations down into separate, more manageable items.

### Example

An individual has fallen to the floor between two chairs and cut their arm. They are unable to get up...

**TASK** – to get the person up from the floor safely.

**INDIVIDUAL** – the member of staff who finds the individual on the floor is a slim, small framed female, however there are three other workers available to help.

**LOAD** – the individual who has fallen is a tall, well-built male.

**ENVIRONMENT** – the environment is well lit and the floor is carpeted.

**EQUIPMENT** - there is a lifting cushion available and disposable gloves to protect the workers from the blood coming from the gentleman’s cut arm. The chairs have arm rests which the gentlemen can use to help steady himself.
Describe how current legislation relates to assisting and moving individuals

<table>
<thead>
<tr>
<th>Law</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manual Handling Operations Regulations 1992</td>
<td>• Abbreviated to: MHOR&lt;br&gt;• Designed specifically to eliminate or reduce a manual handling risk to an acceptable level</td>
</tr>
<tr>
<td>Lifting Operations and Lifting Equipment Regulations 1998</td>
<td>• Abbreviated to: LOLER&lt;br&gt;• About work equipment which is used for lifting and lowering people or loads&lt;br&gt;• Employers to ensure lifting equipment is positioned or installed to prevent risk of injury and is sufficiently strong, stable and suitable for purpose</td>
</tr>
<tr>
<td>Workplace (Health, Safety and Welfare) Regulations 1992</td>
<td>• Abbreviated to: WHSWR&lt;br&gt;• Ensures that employers provide suitable working conditions for their employees</td>
</tr>
<tr>
<td>Provision and Use of Work Equipment Regulations 1998</td>
<td>• Abbreviated to: PUWER&lt;br&gt;• Ensures equipment employers provide is suitable, safe for use, only used by people who are competent to do so, and maintained in a safe condition</td>
</tr>
<tr>
<td>Health and Safety at Work Act 1974</td>
<td>• Abbreviated to: HSWA&lt;br&gt;• Primary legislation covering occupational health and safety in the UK&lt;br&gt;• Requires employers to ensure, as far as it is reasonable, the health, safety and welfare of all employees at work</td>
</tr>
</tbody>
</table>
Identify agreed ways of working that relate to assisting and moving individuals

Your employer (usually via your manager) should provide you with information on agreed ways of working, in line with safe assisting and moving principles.

This should include appropriate clothing and flat closed in footwear.

Using TILEE will help you to apply safe methods of assessing and completing tasks.

It is also important to remember that each individual you work with will be different and each moving task or activity will vary.

Discuss with your manager your agreed ways of working
These are the basic principles of efficient movement:

**Think before you take action**
- Plan the lift. Can handling aids be used? Where is the load going to be placed? Will help be needed with the load? Remove obstructions such as discarded wrapping materials. For a long lift, consider resting the load midway on a table or bench to change grip.

**Don’t flex your back while lifting**
- This can happen if the legs begin to straighten before starting to raise the load.

**Keep the load close to your waist**
- Keep the load close to the body for as long as possible when lifting. Keep the heaviest side of the load next to the body. If a close approach to the load is not possible, try to slide it towards the body before attempting to lift.

**Look ahead**
- Keep your head up, not down at the load, once it has been held securely.

**Adopt a stable position**
- Your feet should be apart with one leg slightly forward to maintain balance (alongside the load, if it is on the ground). You should be prepared to move your feet during the lift to maintain stability. Avoid tight clothing or unsuitable footwear, which may make this difficult.

**Get a good hold**
- Where possible, the load should be hugged as close as possible to the body. This may be better than gripping it tightly with hands only.

**Start in a good posture**
- At the start of the lift, slight bending of the back, hips and knees is preferable to fully flexing the back (stooping) or fully flexing the hips and knees (squatting).
It is important to follow agreed ways of working. They are there to protect you, also the individual and anyone else involved. If something changes, it is best practice to report this change and request a new risk assessment.

If you are working as a team, use commands to ensure the manoeuvre is completed as safely and efficiently as possible. Confirm the direction of travel and the end point (in ambulance, on chair in first aid post, in toilet etc.) first.

**Guidance**

When carrying out a moving task, say the words:

**READY**    **STEADY**    **GO**
List a range of items of manual handling equipment and their uses

**Hoists** are used to transfer a person from one location to another e.g. from sitting in a chair to lying in their bed. It is important to select the correct type of hoist and sling for the individual and the specific task. Selecting the wrong hoist and sling can be extremely dangerous and will increase the risk of injury and death.

There are standing hoists, fixed hoists, mobile hoists, overhead ceiling hoists, bath hoists and hoists to help people up who have fallen on the floor. Hoists need to be maintained and regularly inspected to ensure they stay safe for use.

**Slings for hoists** come in a variety of different types and sizes. It is important to select the correct sling for the individual and the hoist and the sling must fit the person. Each year, at least 1 person dies or is seriously injured when staff use a sling that is too big, usually when a person returns home after a hospital stay and they have lost a lot of weight. Incompatibility of the hoist and sling can result in insecure attachments between the two.

**Guidance**

Incorrectly attaching a loop on a sling to a spreader bar designed for a clip attachment, or attaching a clip on a sling to a spreader bar designed to take a loop attachment.

Using an access sling for going to the toilet gives a great degree of access but very little support and their use should therefore be restricted to being used for going to the toilet only.
Check the manufacturers washing instructions for Slings and ensure they are laundered in line with these and your agreed ways of working.

**Slide sheets** are used to slide individuals up a bed, across from a trolley onto a bed and moving a fallen person. They reduce the risk of injury to an individual’s skin. They also reduce the amount of pushing and pulling making the movement easier and safer for everyone involved.

There are different types of slide sheets and it is important to read the manufacturers’ recommendations on how they should be used. Make sure they are stored safely. Never leave them on the floor because they are likely to be made of slippery material which is hazardous if they are trodden on.

**Transfer boards** are used to transfer individuals in a variety of situations; for example moving a person from a seat to a wheelchair and helping a person get in and out of a car. There are a variety of boards available (e.g. lateral angled / curved / self-glide) and it is important to select the correct one for the individual and task.

Transfer boards have a low friction, sliding surface to allow swift and easy movement. The level of the bed / chair / commode etc. must be similar height to use a transfer board safely.
**Turntables and turning cushions** are used to assist people in turning around; for example: getting in or out of a car, a wheelchair or bed. The individual can stand or sit on the turntable and it rotates them in the direction required with the support of the carer.

**Electric profiling beds** (EPB) are used for dependent / immobile individuals. The base of the bed is sectioned. The mattress can therefore be profiled to sit the individual up and prevent them slipping down the bed. The height can also be adjusted. Movement is usually powered and controlled via a bedside handset by staff and, if appropriate, the bed’s occupant.

EPBs can reduce the risk of injury to staff and bed occupants. They can increase user independence, faster recovery from illness and improve cost-effectiveness.

**Handling belts** are used to assist individuals who can support their own weight; for example helping people stand up. They should not be used for lifting. The handling belt is designed to be worn by the individual to facilitate safer transfers and prevent injuries caused by grabbing hold of sensitive limbs. The belt needs to be fitted securely or it will slip during the transfer.
Wheelchairs are used by people who have difficulty walking or they are unable to walk due to illness, injury, or disability. There are a variety of wheelchairs available. A wheelchair user can manually drive the chair forwards by turning the rear wheels by hand, or some wheelchairs are powered by motors (electric wheelchairs). There are often handles behind the seat to allow the wheelchair to be pushed by another person.

Lifting cushions are used to assist people to get up from the floor or from a bath. For example, if someone falls over they can shuffle on to the cushion, or be rolled on from the recovery position and be assisted to sit upright. The lifting cushion is battery powered and can be inflated at the touch of a button. With someone supporting the individual from behind, the inflated seat brings them to a raise seated position ready to stand. Once the lift is complete, it can be deflated, folded up and stored away tidily.

Bed levers, support rails/poles are designed to provide stability for those who need extra help getting in and out of bed or help in changing positions while in bed. They can be securely attached either to the floor or the bed.
**Bath chairs** enable individuals to bathe independently, to retain their dignity, to enable family members to assist without the increased risks of bending over the bath or straining to stop the individual slipping. Bath chairs also support an individual to get in and out of the bath, reducing the risk of slipping or getting stuck.

**Emergency evacuation equipment** - There are a variety of pieces of equipment available to help with the safe evacuation of individuals. These include: evacuation chairs, carry chairs and carry sheets, basket stretchers, and extrication boards. Equipment needs to be selected depending on the emergency and the individual; for example:

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**Example**

If an individual needs to leave a building because they are unwell, a carry chair may be the safest and most efficient option.

If an individual is unconscious and trapped, an extrication board may be the most appropriate option.

You need to be aware of emergency procedures and what your role is should an emergency happen.
Walking aids and hand rails – These may be used by people needing minor assistance. Walking aids include: walking frames (wheeled or not wheeled), trolleys, walking sticks and crutches.

Handrails can be fitted to assist an individual to climb steps, get in and out of the bath/shower, get on/off the toilet, and walk up/down slopes.

Bariatric equipment is equipment which is specially designed for use with very heavy people.

Bariatric refers to a person weighing over 25 stone (160Kg) and / or with a Body Mass Index (BMI) of more than 40.

Body shapes make it difficult to define weight therefore anyone whose weight, size and body shape causes manual handling issues for staff are included in the definition of a Bariatric person.

List a range of items of manual handling equipment and their uses relevant to your role.
2. Understand the impact of assisting and moving for workers and individuals
Explain the importance of keeping up to date on current techniques, equipment and legislation with regard to assisting and moving individuals

It is important for you to keep up-to-date with the latest assisting and moving techniques, equipment and legislation. As changes are introduced, you have a duty of care to ensure that you update your knowledge and skills.

Changes can be:

- **in legislation**: There are many ways you can keep up to date. The internet is an effective way but make sure you are getting accurate information.

- **new equipment**: Being aware of these changes and being competent in assisting and moving will reduce the risk of injury to yourself, the individual you are supporting, and others involved.

- **ability or circumstances**: You are required to comply with legislation. Not keeping yourself up to date and not complying with the latest legislation means you are neglecting your duty of care. If a serious incident occurs, you could be investigated and suspended from work.
Describe the basic anatomy of the human body including the structure of the spine affected by assisting and moving

The spine is made up of individual bones called vertebrae. The diagram shows the spine and how it sits inside the body.

The **spinal cord** is the main pathway for information connecting the brain and peripheral nervous system. It is protected by the spinal column.

Although the spinal column is somewhat flexible, some of the **vertebrae** in the lower parts of the spinal column become fused. There are 33 vertebrae.

**Intervertebral discs** act as a shock absorber between each of the vertebrae in the spinal column. They keep the vertebrae separate when there is impact from activity. They also serve to protect the nerves that run down the middle of the spine and intervertebral disks.
Ligaments are fibrous connective tissue that connect bones to other bones. Moving a load (object, person or animal) incorrectly can cause ligaments to sprain. You should never drag a load as this can cause joints to over stretch and then you risk spraining your ligaments.

Tendons are tough bands of fibrous connective tissue that connect muscle to bone. Tendons and muscles work together to move bones.

Muscles are fibrous tissues that shorten when they contract. This action pulls on the tendon, and then on the bone to which it is attached, producing movement. They connect muscles to other muscles. Sudden movements or pulling a load suddenly can cause pulled muscles or a tear in tendons and this will result in you feeling a great deal of pain.

Skin is made up of multiple layers of ectodermal tissue and is the soft outer covering of the human body. The skin guards the underlying muscles, bones, ligaments and internal organs. As we get older, our skin becomes more fragile. It becomes thinner and more easily damaged.

There are 206 bones in the human body. All of your bones, except for one (the hyoid bone in your neck), form a joint with another bone. Joints hold your bones together and allow your rigid skeleton to move. Joints are the place where two bones meet.
Describe the potential injuries to the individual which may arise by failing to follow approved assisting and moving techniques

Possible injuries include:

<table>
<thead>
<tr>
<th>Injury</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Bruises</strong></td>
<td>Can happen if you allow the person you are moving to come into contact with the equipment too quickly or if you are not being gentle enough. Some people bruise much more easily than others.</td>
</tr>
<tr>
<td><strong>Cuts / lacerations</strong></td>
<td>Might occur if a person or animal is dragged against a sharp edge or if you have long nails. You should keep your nails short.</td>
</tr>
<tr>
<td><strong>Fractures</strong></td>
<td>Can happen if pressure is put on an individual’s hand or arm during a manoeuvre, or if the individual falls because of poor technique or because you are using the incorrect size sling and the individual falls out.</td>
</tr>
<tr>
<td><strong>Friction</strong></td>
<td>To the skin can happen if the individual is dragged up in a bed or their skin rubs against their clothes or a piece of equipment.</td>
</tr>
<tr>
<td><strong>Joint damage</strong></td>
<td>Might occur if you pull the individual using an “under the shoulder” drag lift method. This can dislocate the person’s shoulder joint.</td>
</tr>
<tr>
<td><strong>Falls</strong></td>
<td>Can result in any or a combination of the injuries already described.</td>
</tr>
</tbody>
</table>
Falls can result in any or a combination of the injuries already described. Resistance from a person who does not co-operate with you during a manoeuvre will increase the risk of injury to that person and to you.

Individuals with pre-existing conditions; such as: arthritis, brittle bone disease, cellulitis; or injuries from trauma, will need to be treated with extra care as certain parts (if not all) of their body will be tender and painful when you touch them.

Remember to maintain the dignity for a person who is being moved or supported to move.

Describe the potential injuries to the worker which may arise by failing to follow approved assisting and moving techniques

The Health and Safety Executive reported that in 2013/14:

- an estimated 909,000 working days were lost due to handling injuries
- an average of 6.6 days were lost for each injury
- handling caused nearly a quarter of reported injuries
Handling injuries are described as strains; sprains; lifting, carrying, pushing or pulling loads; trapped fingers and cuts from sharp objects.

It is not just the weight of the load that can cause injury. It is also the size, shape, the way employees have to carry the load, available grip, where it has to be moved to and how often tasks have to be completed. Failing to follow approved assisting and moving techniques can lead to:

- Back pain and musculoskeletal disorders (MSD)
- Assisting and moving injuries
- Discomfort and twinges of pain

The term MSD covers any injury, damage or disorder of the joints or other tissues in the upper / lower limbs or the back. MSD can be categorized into upper limb disorders (ULDs) and lower limb disorders (LLDs).

ULDs affect the arms from shoulder to fingers or the neck including problems with the soft tissues, muscles, tendons
and ligaments, along with the circulatory and nerve supply to the limb. ULDs are usually a result of incorrect posture, working in unusual positions, or heavy lifting / carrying loads.

**LLDs affect the legs and feet**, from hips to toes. Workers may report lower limb pain, aching and numbness without a specific disease being identified or present. About 80% of damage to the hips, knees and legs at work is due to overuse.

**Symptoms of MSDs may include:**

- Aches & pains
- Tenderness
- Stiffness
- Weakness
- Numbness
- Tingling & cramp
- Swelling
Describe the potential legal consequences of injuries to the individual

If an individual is injured as a direct result of poor practice or incompetence of an employee, there may be legal consequences.

Each situation is different and circumstances and level of injury need to be investigated. In some circumstances the injured individual may wish to sue the organisation. For further advice and information you will need to ask your manager.

Best practice is to ensure that you have the knowledge and competence to complete a task, before you start it. Your manager is responsible for checking your knowledge and competence.

Your employer has a legal duty to ensure its employees receive immediate attention if they are injured or taken ill at work.

There should be emergency procedures in place (such as first aid and fire plans). Being aware of what to do can help save people’s lives, reduce the risk of injury and the impact of injury.
RIDDOR requires employers, and other people in control of work premises, to report and keep records of:

**RIDDOR**

- Work related accidents that cause death
- Work related accidents that cause reportable serious injuries
- Diagnosed cases of certain industrial diseases
- Incidents with the potential to cause harm

You can find out more by visiting the Health and Safety Executive’s website:

**Ask...**

Discuss with your manager your local emergency procedures
Understand a worker’s own role and roles of others in assisting and moving individuals
Describe responsibilities of a worker’s own role in relation to assisting and moving an individual

Your role in assisting and moving individuals includes:

- Ensuring the **safety** of everyone involved in assisting and moving tasks
- Keeping your **knowledge and skills** up to date
- Having your **competence** regularly checked
- Effective **communication** (including instructions, guidance and reassurance to individuals)
- Working together as a **team**
- Use the **correct equipment** (including PPE)
Conducting "on the spot" risk assessments

Reading the formal risk assessment in the care plan

Reporting changes and concerns

Recording all relevant information in the care plan

Maintaining equipment and work environment
3.2 Identify the limitations of a worker’s own role in relation to assisting and moving individuals

It is important to recognise your own limitations in relation to assisting and moving individuals. Sometimes there will be tasks which you are unable to complete or need help to complete. It is not a weakness to ask for help. Recognising your limitations will help protect your wellbeing and not put you or others at risk.

It is best practice to recognise when your competence might be affected. For example:

- If the environment is increasing the risks e.g. space constraints, the weather, floor conditions which increase the strain to carry out the task
- If you have an injury which will affect your ability to complete the task
- If you feel unwell
- If you are unsure about how to complete a task
- Physical constraints e.g. you are too tall or short
- Pregnancy or recently given birth
- Health problems e.g. if you suffer from asthma or allergies
- Fatigue – long shift, lack of food or drink
Describe the role of others in relation to assisting and moving

Examples of the role of others in relation to assisting and moving:

Managers:
- Make sure all workers have relevant knowledge for their roles
- Provide appropriate working environments
- Support workers if they have any concerns

Doctors:
- Provide advice on skin care and pressure ulcers
- Competent to move an individual appropriately for examination
- Interact with and support individuals

Speech and language therapist:
- Improve communication methods
- Perform good practice in assisting and moving individuals whilst achieving therapeutic outcomes

Physiotherapist:
- Help and treat people with physical problems caused by illness, accident or ageing
- Maximise movement through health promotion, preventive healthcare, treatment and rehabilitation
- Developing therapeutic methods to moving as part of a treatment or rehabilitation programme
Occupational therapist:

- Assesses and treats physical and psychiatric conditions using specific activity to prevent disability and promote independent function in all aspects of daily life

Describe when advice and/or assistance should be sought to assist and move an individual safely

If you are unsure or have any concerns, it is important to ask for advice and assistance. You may need to ask for advice if...

<table>
<thead>
<tr>
<th>New equipment is introduced</th>
<th>An individual’s circumstances change</th>
<th>An individual is new to you</th>
</tr>
</thead>
<tbody>
<tr>
<td>You discover equipment is faulty</td>
<td>Care plan instructions are not clear</td>
<td>An individual is not co-operating</td>
</tr>
<tr>
<td>An individual is unhappy</td>
<td>An individual is being aggressive</td>
<td></td>
</tr>
</tbody>
</table>

**Whatever the situation, it is best practice to speak up.**

Putting yourself or others at risk is not wise and can not only cause injury, but get you into trouble.
Understand the requirements for preparing the environment prior to assisting and moving an individual.
Describe why preparatory checks are necessary in relation to:

a) An Individual’s Care Plan

Prior to assisting and moving an individual, always read the care plan.

The care plan will inform you of how best to complete a task, the equipment to be used and any essential information about the individual and the environment which will support best practice. The care plan will have a record of any changes since the last time you worked with the individual.

Essential information includes: the individual’s likes, dislikes, preferred communication method, level of participation etc.

Examples of environmental constraints that might be required prior to assisting and moving an individual:

- Ensuring the environment supports the individual’s dignity
- Moving an item(s) to provide adequate space
- Applying the brakes on a wheelchair, bed and hoist
- Checking the floor surface is even
- Preparing the area where the individual is going to be moved to
• Collecting all personal care items needed
• Communicating with the individual and any other people involved
• Removing any potential hazards
• Checking that equipment is safe and appropriate for use

b) Moving and handling risk assessment

Conducting an ‘on the spot’ **moving and handling risk assessment** before you complete a task will cover hazards and risks, such as:

• The space available to complete the manoeuvre
• The wellbeing of the individual at that current point in time
• Your wellbeing at that current point in time
• Are you wearing suitable clothing, footwear, PPE?
• Do you need someone to help you complete the task?
• How long will the task take to complete?

Before using any **equipment**, make sure that it is the correct item for the task, if it is properly maintained and fit for use.

Ensure that battery powered equipment is fully charged (or has enough charge to complete the manoeuvre).
c) Legal requirements for the safety of equipment

Equipment needs to be maintained in line with manufacturers’ instructions and guidelines. Equipment safety is a legal requirement under Provision and Use of Work Equipment Regulations 1998 (PUWER).

Lifting Operations and Lifting Equipment Regulations (LOLER) 1998 states employers must ensure lifting equipment is examined:

- Every 6 months for equipment used for lifting people
- Every 12 months for lifting equipment used for lifting loads
- After installation
- After being moved to a new site or location

If you find a faulty piece of equipment, you should label it ‘DO NOT USE’

Then advise your colleagues and report it to your manager.
4.2 List a range of precautions for infection prevention and control

**Good hand hygiene and hand washing** - Widely acknowledged to be the single most important activity for reducing the spread of infection. It is important that you wash your hands properly and regularly.

**Good personal hygiene** - Clean uniforms, hair tied back, short nails, no jewellery except wedding band, appropriate footwear.

**Cough etiquette / respiratory hygiene** - “use it, bin it” in relation to tissues. Always put your hand in front of your mouth when coughing or sneezing and wash your hands afterwards.

**Skin care** - You should have bare arms below the elbow and handwashing should include the forearms.

You should use **Alcohol Based Hand Rub** when handwashing facilities are not available.

**Appropriate use of Personal Protective Equipment (PPE)** like gloves, aprons, eye protection and footwear.

**Occupational exposure management (inc. sharps)** - Work as per your pre-agreed ways of working. Keep your immunisation vaccinations up-to-date.
You can find further information on infection prevention and control on the internet via these links:


Describe the difference between formal (documented) and informal (on the spot) risk assessments

A formal (documented) risk assessment is a documented process setting out how to complete a task. The task is risk assessed to define or estimate a risk. Controls and recommendations are explained that you should follow in order to reduce the risks. You should follow the steps described to complete the task as safely as possible. A formal risk assessment:

- Is documented
- Takes longer to complete
- Focuses on scenarios

An informal (on the spot) risk assessment is carried out at the point in time immediately before completing a task. An informal (on the spot) risk assessment:

- Focuses on the immediate problem
- Is also carried out continuously throughout the move

Example

Jo is ready to be moved and willing to co-operate. I have the competence to assist Jo. It is safe to move Jo, so she is moved.
Describe the steps that should be taken to ensure the environment supports an individual’s dignity during assisting and moving activities

**Dignity** is about how an individual feels, thinks and behaves in relation to the value they feel about themselves and others. To treat a person with dignity is to treat them as being of worth, in a way that is respectful of them as valued individuals.

Dignity can be promoted or diminished when you are assisting and moving people. Common areas to consider are:

**The physical environment** – you should pull the curtains, close the door and protect the individual from exposure from or being seen by other people.

**Attitudes and behaviour of workers and others** – you should be respectful to individuals, show empathy and understanding about their needs and how they might feel. Do not rush them or put pressure on them to move quickly or to complete activities if they are not comfortable to complete them.
The way in which activities are completed - ensure activities are completed according to an individual’s care plan and in the most efficient and safest way.

When dignity is absent, individuals may feel devalued and have no control. They may lack confidence and be unable to make decisions for themselves. Your approach should support the individual to reduce feelings of humiliation, embarrassment or shame.

Describe how the environment can be a barrier to assisting and moving an individual

These are some examples of how the environment can be a barrier to assisting and moving an individual.

Space constraints

Is there room to move around easily? Does the working environment hinder working at a safe height (for example: high bed / low seating / restricted headroom) or compromise good posture (worker has to stretch, twist to reach, furniture or fixtures are causing restrictions or narrow walkways) if so, the risk of injury from assisting and moving an individual is increased.
Doors

A door which is frequently used may benefit from having an automatic opening feature rather than having to manually open it or wedge it open until the task is finished. This avoids the need to stop and start to open and close the door, or, twist and overstretch to hold the door open.

Flooring

Are there variations in the floor level? Are there uneven, slippery or unstable floors? Steps, steep slopes etc. can increase the risk of injury by making movement more difficult. Carpeted floors can increase the strain on a worker to push and pull hoists and wheelchairs.

Thermal environment and ventilation

Are there extremes of temperature, high humidity or gusts of wind that may affect handling? High temperatures or humidity can cause rapid fatigue and perspiration on the hands may reduce grip. Working at low temperatures may impair dexterity.

Lighting

Are there poor lighting conditions? Dimness or glare may cause poor posture if the worker has to stoop to see. Contrast between areas of bright light and deep shadow can increase the risk of tripping and hinder the accurate judgement of height and distance.
Describe ways to overcome environmental barriers in the assisting and moving of individuals

These are some of the ways you can overcome the barriers to assisting and moving an individual:

- Use ramps where possible
- Raise toilet seats
- Use bright lightbulbs
- Use a dehumidifier
- Close curtains and blinds
- Move items out of the way
- Raise or lower beds
- Ask someone to hold a door open
- Install auto open doors
- Remove trip hazards
- Wedge doors open
Understand how to support the individual to prepare before assisting and moving
Describe why it is important to communicate with the individual prior to assisting and moving

Being supported to move can make an individual feel anxious or apprehensive, if you explain and reassure them first, this will hopefully make them feel better about things.

By providing this information, you are also gaining valid consent. Informing the individual of your intentions will enable the individual to communicate how much they wish to do for themselves, how they are feeling and any wishes they may have. At this point you can carry out your ‘on the spot’ risk assessment before continuing with the task / activity.

Remember that your tone of voice and your body language also communicates messages to the individuals you support.
Describe why it is important to communicate with others prior to assisting and moving

If other people are involved in the assisting and moving activity, it is essential that you communicate with each other.

Working together as a team will help the smooth running of any activity. If you are completing a manoeuvre as part of a team, one person should lead with commands such as “ready, steady, lift”.

Remember, the individual is part of this team. Saying the commands out loud will also indicate to the individual when they are going to be moved.

Communicating allows you to discuss options, plan and overcome any issues which may arise, prior to assisting and moving the individual.
Describe what factors should be taken into account when the individual's wishes conflict with their care plan in relation to health and safety and their risk assessment

If an individual's wishes conflict with their care plan in relation to health and safety and their risk assessment it is best practice to:

- Avoid going against their wishes
  - Record what has been said and actions taken
  - Report to your manager

- Do not compromise your safety
  - Do not compromise the safety of the individual
  - Maintain the individual's wellbeing and dignity

- Request a review of the risk assessment
  - Support the individual to make informed choices
  - Do not complete a task you are not competent in
Describe where to seek advice and assistance if the individual’s wishes conflict with their care plan

If the individual’s wishes conflict with their care plan and you are unsure of what to do, always seek advice and assistance. You may be able to get advice and assistance from:

- Your manager
- A senior colleague
- Another professional
- The individual’s family or carer

Think about anything you see or hear which might have a negative impact on the individuals you support.
## Your checklist....

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<td>✔</td>
<td>Locate the Care Plan(s) for the people you will be supporting</td>
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<td>1.4</td>
<td>Ask</td>
<td>Discuss with your manager your agreed ways of working</td>
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<td>1.5</td>
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<td>List a range of items of manual handling equipment and their uses relevant to your role</td>
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<td>2.5</td>
<td>Ask</td>
<td>Discuss with your manager your local emergency procedures</td>
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<td>5.4</td>
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<td>Think about anything you see or hear which might have a negative impact on the individuals you support</td>
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What’s next…..

An essential part of your development is to assess, evidence and record what you have learnt. You may be entitled to use our assessment and evidence recording system. Your manager is responsible for supporting you with this, observing your practice and ensuring you are competent in your workplace, with the people you support.

Checking your knowledge, competence and practice will be a regular part of your ongoing Continuous Professional Development.

By taking an assessment first, you may find you already have some, most, or all of the knowledge required and you can save time by avoiding repeating subjects and courses unnecessarily.

More information about our resources can be found at www.TGMGroup.net.

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