G.09 Hazardous Manual Tasks Policy

1.0 INTRODUCTION/BACKGROUND

Manual Handling is any activity where a person lifts, lowers, pushes, pulls, carries or otherwise moves, holds or restrains any animate or inanimate object.

The Disability Safe Organisation says:

Over 50% of all injuries in the health and community services sector 2006/2007 were related to manual handling, this indicates the risks associated with lifting, pushing, pulling, carrying, holding, moving or restraining people and objects during the provision of care are significant and require ongoing management. Most manual handling injuries are preventable through better approaches to managing risks.

The Disability Safe Organisation notes that manual handling injuries often result from:

- Moving, transporting, transferring clients
- Repetitive movements
- Lifting and carrying materials and equipment
- Working at incorrect heights
- Lack of physical space
- Heavy physical work
- Poor workplace design
- Poor postures and actions
- Sudden unexpected load bearing
- Fatigue
- Poor physical fitness
- No mechanical aids being used
- No training in manual handling techniques and the use of mechanical aids
- Unpredictable, changing, large loads

Mercy Services commitment to providing and maintaining a safe and healthy environment for employees, volunteers, clients and visitors applies to manual handling tasks.

Work Health & Safety legislation requires Mercy Services to identify and control the risks involved in any manual handling that could be seen as a hazardous manual task.

2.0 SCOPE

This procedure is to ensure that Mercy Services meets its legal and moral requirement to ensure that hazardous manual tasks are completed safely and without injury at all Mercy Services activities. It will apply to the Board of Directors, all employees and volunteers and requires the full co-operation and assistance of all personnel.
3.0 POLICY STATEMENT

Mercy Services’ manual handling practices in the workplace are completed in a safe manner by:
- consulting with employees to identify manual handling hazards and to assess and control the associated risks;
- ensuring the design of work systems, equipment, tasks and the work environment is consistent with the goal of eliminating or reducing manual handling injuries; and
- allocating sufficient resources (in terms of people, facilities and equipment) to enable the aims of this policy to be achieved.

4.0 PROCEDURE

4.1 Identifying manual handling risks

Manual handling hazards should be identified as part of the risk assessments when:
- developing/reviewing Safe Work Practices;
- Mercy Services site inspections;
- client home and other community site inspections;
- client risk assessments; and
- prior to commencing using new venues, equipment or practices.

Consultation between management, workers, clients and, if appropriate, their families/carers is an important part of the hazard identification process. Coordinators/Managers/Nurses/Director of Care are to encourage everyone to help identify risks.

4.2 Assessing manual handling risks

In accordance with the Mercy Services’ Risk Management Policy, the risk level of identified hazards is assessed for likelihood and consequence.

When assessing manual handling risks Coordinators/Managers/Nurses/Director of Care will consider:
1. actions and movements involved;
2. the work environment including temperature and layout;
3. the worker’s posture and position;
4. the duration and frequency of manual handling;
5. the load location and distance moved;
6. weights and forces involved;
7. the characteristics of loads and equipment;
8. how the task relates to work being carried out before and after;
9. the worker’s age, skill and experience;
10. the clothing required; and
11. any special needs of the worker.
4.3 **Eliminate or control the risks.**
The relevant work supervisor is responsible for consulting and developing a response to the manual handling risk assessment. Director of Care and other Managers are responsible for eliminating or controlling manual handling risks at Mercy Services sites and organisation-wide manual handling risks.

Eliminating the risk is the most effective way to make work safe but if this is not possible procedures must be developed to control the risk. Generally Safe Work Practices (SWP) are the means of controlling manual handling risks.

Manual handling injuries may be eliminated or minimised by:

- Eliminate the task *(for example, use of a wheelchair taxi rather than transporting the client and their wheelchair in a Mercy Services car).*
- Eliminate the task by the use of engineering controls *(for example, changing the equipment or materials used).*
- Reduce the amount of handling involved *(for example, change work practices).*
- Reduce repetitive work by introducing variations in work activities.
- Alter the layout of work areas to avoid twisting, sideways bending or excessive reaching.
- Match skills and abilities of workers with client needs.
- Reorganise storage areas so that heavier and frequently used items are stored between knee and shoulder height, ensure weight of products is manageable.
- Carry smaller loads *(In seated work, don’t lift objects in excess of 4.5 kg; from a standing position keep loads below or between the 16 to 20 kg range; extreme caution must be used with loads between 20 to 55kg; and do not lift, lower or carry objects in excess of 55 kg, unless team lifting or mechanical assistance is provided).*
- Use of lifting devices.
- Maintain and regularly inspect all equipment used for manual handling tasks.
- If client condition changes, review manual handling procedure.
- Provide information and training on risk assessment and safe lifting techniques at induction and during in-service training programs.
- Providing staff with access to facilities and encouragement to exercise.

4.4 **Ongoing monitoring and review**
Ongoing monitoring and review is an integral part of risk management. The relevant Coordinators/Managers/Nurses/Director of Care is responsible for monitoring that the SWP/equipment/procedure is being implemented as designed. If s/he identifies any difficulty with the control s/he must refine it to a more suitable strategy.

A review of a manual handling SWP/control/procedure will be conducted if an Incident Report form highlights it as possibly inaccurate or ineffective.
It is important to continue to consult with everybody involved.

4.5 Training and Support
Manual handling will be incorporated in the mandatory training program for all staff and volunteers (See F.2. Learning & Development Policy). Manual Handling will be included in the Orientation for new staff/volunteers. At least every 2 years a more detailed manual handling training will be provided that addresses the specific tasks staff encounter in their work.

Effective on-the-job (SWP) instruction and adequate supervision will help staff/volunteers be aware of manual handling issues and the ways they can perform their jobs consistently and safely.

4.6 Compliance
Compliance with this policy is being measured by:
   a) 100% of staff have completed hazardous manual tasks training; and
   b) records show staff have been assessed as competent in 50% of the SWP relevant to their work.

4.7 Evaluation
The performance indicators for the evaluation of this policy are:
   a) 0% of incidents resulting from hazardous manual tasks;
   b) at least 90% of Mercy Services staff giving a positive rating on how well Mercy Services is committed to safety; and
   c) at least 90% give a positive rating in their evaluation of hazardous manual tasks training.

5.0 REFERENCES

<table>
<thead>
<tr>
<th>1. Current issues</th>
<th>a) None identified</th>
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<tbody>
<tr>
<td>2. Australian Standards</td>
<td>b) AS/NZS 4360: Risk Management</td>
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</table>
                            b) Work Health and Safety Regulations 2011 (NSW) |
| 4. Professional guidelines| a) None identified |
| 6. Codes of Ethics       | a) Australian Association of Social Workers Code of Ethics 2010  
                            b) Australian Psychological Association Code of Ethics  
6.0 RELATED WHS POLICIES AND PROCEDURES

- All WHS Policies
- F.2 Learning & Development Policy

7.0 RELATIONSHIP WITH STANDARDS

<table>
<thead>
<tr>
<th>Aged Care Accreditation Standards</th>
<th>Home Care Standards</th>
<th>Disability Standards</th>
<th>EQuIP Standards</th>
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<td>1.3, 1.4, 1.6, 2.3, 3.3, 3.4, 3.5</td>
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8.0 DOCUMENT CHANGES RECORD

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<tr>
<td>Jan 2005</td>
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| 07/10/09        | a) Old 1.0 Purpose  
b) New 1.0 Introduction  
c) Old 3.0 References  
d) Old 4.0 Definition  
e) New 3.0 Policy Statement  
f) Old 5.1.1  
g) Old 5.1.2 and 5.13  
h) Old 5.2  
i) Old 5.3  
j) Old 5.4 | a) Moved to 2.0 Purpose combined with scope  
b) added  
c) Moved to 5.0 References  
d) Included in new 1.0 Introduction  
e) Added  
f) Deleted (Mercy Services Management not Board seen as primarily responsible)  
g) Incorporated in New 4.1 - 4.5  
h) Incorporated in New 4.5 and F.2.e Learning & Development Policy  
i) Incorporated in New 4.4  
j) Incorporated in New 4.1 |
| 28/03/2011      | 7.0 Relationship to Standards | Section added |
| 06/02/2012      | a) All sections  
b) 4.6 Compliance  
c) 4.7 Evaluation  
d) 5.0 References | a) Updated with how new WHS laws and Codes of Practice apply at Mercy Services  
b) New section  
c) New section  
d) Updated with new WHS laws and Codes of Practice |
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<td>27/11/2012</td>
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| 01/07/2015      | a) All sections  
b) 4.5 Training and Support 
c) 5.0 References  
d) 7.0 Relationship with Standards | a) Use the term Supervisors for the extended list of positions that supervise staff  
Change frequency to “at least” every two years  
b) Update Codes of Ethics and Evidence  
c) Update Disability Standards and include Aged Care Accreditation Standards |
| Review due 01/07/2018 |               |                         |