# Moving & Handling

Work Manual

### **Moving and Handling**

Work through the Moving and Handling information and answer the questions at the end returning to your supervisor as soon as possible discussing any issues arising

No one working in a hospital, nursing home or on the community should need to lift a patient any more. Hoists, slings and other Moving and Handling aids remove the need for manual lifting. Client Moving and Handling may continue as long as it does not involve lifting most or all of the client's weight. The manual lifting of clients is eliminated in all but exceptional or life threatening situations. Clients can be encouraged to assist in their own transfers and handling aids must be used if they are not contrary to the clients needs.

### The Law

The 1992 Manual Handling Operations Regulations which came into force in 1993 and the E.C. Directive 90/269 add to the earlier Health and Safety at Work Act 1974 with regard to lifting/manual handling. They apply to all types of load, including clients in care environments. The new laws increase the employer's responsibility for providing safe lifting conditions.

# The key duties of the 1992 Manual Handling Regulations are: - Employer's duties

- Avoid the need for hazardous Moving and Handling Operations as far as is reasonably practicable
- Assess remaining Moving and Handling operations
- Reduce the risk of injury so far as is reasonably practicable
- Provide Moving and Handling training and equipment as necessary

### **Employees Duty**

- To make full and proper use of systems of work provided
- To take reasonable care of yourself and others who may be affected by your acts or omissions
- To cooperate with employers to ensure that statutory requirements are met
- Not to interfere with or miss-use anything provided in the interests of health safety and welfare

### Why the need for a different approach to handling and lifting?

Each year the number of working days lost due to back problems is increasing. Between 1987 and 1988 46.5 million working days were lost with spinal/back problems. Despite new lifting regulations the latest figures show an increase to 50.1 million. The cost of these problems to the employer is financial but to you the individual this is not the only consideration as one needs to think in terms of the pain and loss of quality of life however temporary or long term that may be. Care is one of the trickiest areas for the new lifting legislation because we are not in the business of moving inanimate objects. Our day consists of moving and handling people so not only do we have to consider our own comfort and safety when lifting but the safety, comfort and sensitivity of our clients

# What do you think are the 2 main priorities when lifting and moving clients?

### Making sure you don't hurt the client

- Holding a client under the arms could dislocate a shoulder especially a client who has suffered a stroke because of the poor muscle control
- Old/frail skin can tear easily through dragging or just from scuffing skin on bedclothes and run the risk of ulceration
- Gripping a client too hard could easily bruise them
- Incorrect use of lifting equipment could cause distress and or pain/injury to your client

Follow the care/assessment plan and learn and practice safe systems. Listen to your client watch for changes in your client's ability

### Making sure you don't hurt yourself

- Adopt a safe posture
- Wear flat supportive shoes and non restrictive clothing
- Follow the safe systems

Poor Moving and Handling of clients will inevitably put both the carer and client at risk

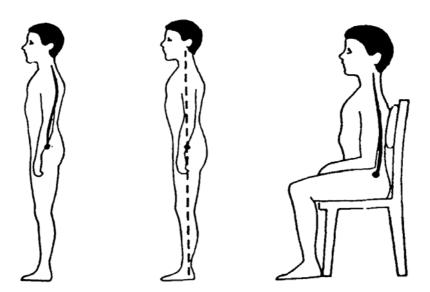
### So what is Good Posture?

It is only when you trip or stumble that you are likely to remember that moving about is a balancing act and that all the time without you thinking about it your muscles are working to defy gravity

The idea of the centre of gravity is important this is the point of balance for the body. To balance effortlessly your centre of gravity must be vertically aligned with the weight bearing joints and the feet (or a weight bearing mobility aid)

Look at the diagrams below showing a person with good posture. The black dot on the pelvis shows the point of balance of the body for someone who is standing up straight. In this position the weight of the head, the shoulders and the tummy are all directly above the pelvis. This forms a good solid shelf for the person to balance on. The pelvis is balanced directly above the knees which are in turn directly above the ankles: the 2 main load-bearing joints of the lower body.

In this standing position the muscles of the body have to do very little work to keep the person upright.



If you stand with feet apart and spread the weight evenly (i.e. not leaning on one foot) this will increase your base area and stability

Now look at the following illustrations. Add arrows to show how the weight of the upper parts of the body are distributed





You should have seen that the weight of the head is hanging in mid-air. Therefore the muscles in the neck and back are having to do a great deal of work to prevent the head falling further forward - and to prevent the rest of the body following it. There are similar problems all the way down the body in the standing posture.

Someone who has this posture will be:

- At risk of falling
- Using much more energy than necessary and will tire quickly
- Unable to expand the lungs fully
- Putting additional strain on the load bearing joints; the joints in the neck; all the joints of the spine, the hip joints, the knees and ankles and cause cumulative strain

# You can experience the effects of cumulative strain by performing the following exercise

- Stand upright with you feet comfortably close together
- Look up and relax your upper limbs and shoulders
- Be conscious of the weight distribution across your feet
- Now drop your head forward and take your chin comfortably to your chest
- Be conscious of the weight distribution across your feet

- Keep your head down and lift your arms up in front of you to the horizontal position Hold this for approximately 30 seconds before going on to the next movement
- Now tilt forward from your hips about 30 degrees and hold this about 10 seconds
- Be conscious of the weight distribution across your feet and any other changes in muscle tone in your body

The stiffening reaction is stimulated in every day movements as soon as the weight of the body starts to move forward onto the pads of the toes. When one becomes aware of ones body movements it becomes easy to realise how important good posture is to prevent cumulative strain.

The ability to handle loads safely is not simply determined by the strength of the muscles

Read the clients care/assessment plan and get to know your client their needs their preferences, difficulties in the environment, equipment used, any mobility aids the client may have

Go through with your supervisor the manual handling assessment of your clients, ensure you know how to use any equipment confidently and how any mobility aids should be used (try out any aids for yourself, with the clients permission so you know what it is like and experience some of the difficulties they have) Discuss emergencies/the unexpected and plan for these

### **Principles of Safe Manual Handling**

### Preparation

Before you start make sure you know: -

- How to operate any lifting aids e.g. bath hoists you must be familiar with them all and be able to use them without endangering yourself or your client.
- The correct use and care of client mobility aids including wheelchairs.
- Clients assessment plan the advised manual handling techniques for that client and if she/he has any special requirements you need to take into account ask questions if you are unsure of anything.
- Know what to do if the clients condition changes e.g. a client that usually is able to support themselves has become weak and very unsteady
- Prepare the environment area is safe remove obstacles
- Ensure aids are clean and in good working order
- If transferring to wheelchair make sure the brakes are on and positioned correctly etc.
- prepare the client as far as possible listen to the clients preferences but safety must come first
- Wear suitable clothing and footwear

### The Move/manual handling operation

- Talk and reassure your client throughout the move
- Adopt a safe posture
- Relax
- Stand with feet apart (increase your base area)
- Balance your weight
- Keep your back straight and head up
- Keep the load/clients weight close to your the body
- Move the client towards you never away from you
- Move smoothly without jerking
- Don't rush!
- Be conscious of your body
- Coordinate if double handling give clear instructions as you move your client
- Wear suitable clothing and footwear
- Use equipment correctly/safely don't cut any corners
- Work to the care/assessment plan

The clients care/assessment plan always take in to account the clients preferences and wishes and we should as far as possible assist in the way the client prefers - but safety must always comes first

Try to maintain your clients dignity at all times - you are not moving a sack of potatoes

Be sensitive to the way the client responds too - if he/she seems in pain try to stop or to change your hold but BE CAREFUL - don't shift your grip unless you are sure that you won't over balance and make things worse. Reassure your client and get their co-operation harness the client's own strength to assist with moving

### **Afterwards**

When you have finished make sure the client is comfortable

If your client showed any pain, distress or change in their strength etc record and report as appropriate - it could be important

If you have moved the furniture put it back as it was. This isn't only to make the place look tidy: it helps people feel secure when physical things are in the usual places

### **Emergencies**

It has been said that the Manual Handling Operations Regulation allows all rules and regulations to be ignored in an emergency.

The guidance on the regulations do allow the exclusion of emergency situations. However this exclusion is not defined and has not been tested in the courts. It should be noted that this provision is not part of the manual handling operations regulation itself.

Plans made for emergencies should follow the principles of safe handling

## **Manual Handling Questionnaire**

1) What are the consequences for the client and carer if safe lifting/manual handling techniques are not used?
2) Why is it important not to drag a client when repositioning them?
3) If manual handling/lifting operations cannot be avoided what should be done by the employer?
4) What are the main 2 priorities when lifting and moving clients?
5) How can you increase you base area and stability?
6) What are the results of poor posture?
7) What do you need to know before completing manual handling operations with a client

8) When you arrive your client an elderly lady who you care for has slipped onto the floor She has managed to pull herself to her chair and is sitting leaning against it. She says she isn't hurt an feels fine and just needs a hand to get up What action do you take?
9) Your client who you assist to transfer from bed to chair is unable to support their weight. The client says he is having an off day because he hasn't been sleeping very well just lately What action do you take?
10) Complete a manual handling risk assessment on your client and check if there have been any changes since the last assessment and record - Report your findings to your supervisor on supervision

# ANSWERS Manual Handling Questionnaire

- 1) What are the consequences for the client and carer if safe lifting/manual handling techniques are not used?
- A. Client could suffer pain, injury, stress, and loose confidence and trust in the carer and feel insecure
- Carer off work with injury disabled lack of compensation if procedures not followed, prosecuted for putting client at risk
- 2) Why is it important not to drag a client when repositioning them?
- A. To avoid friction that can increase the risk of pressure sores
- 3) If manual handling/lifting operations cannot be avoided what should be done by the employer?
- A. Assessment of the remaining manual handling operations and reduction of the risk to injury by training/safe systems/provision of equipment
- 4) What are the 2 main priorities when lifting and moving clients?
- A. Make sure you don't hurt the clients and make sure you don't hurt yourself
- 5) How can you increase you base area and stability?
- A. Feet apart and distribute your weight evenly
- 6) What are the results of poor posture?
- A. Risk of falling; using much more energy than necessary and will tire quickly; unable to expand the lungs fully and cumulative strain caused by putting additional strain on the load bearing joints; the joints in the neck; all the joints of the spine, the hip joints, the knees and ankles
- 7) What do you need to know before completing manual handling operations with a client?
- A. As much as possible about your client and the recommended manual handling operations from the completed risk assessment; preferences/dislikes of the client; any equipment used; any difficulties to be aware of; and what to do in an emergency or changing situation

8) When you arrive your client an elderly lady who you care for has slipped onto the floor She has managed to pull herself to her chair and is sitting leaning against it. She says she isn't hurt an feels fine and just needs a hand to get up

What action do you take?

- A. Make your client comfortable without moving and explain that why you don't want to move her straight away she may have hurt herself more than she thinks so it would be wise to check first before moving, because moving could make an injury worse. Also you are not allowed to lift anyone on your own as you could hurt yourself (Health and Safety.... must take reasonable care) and it may not be safe for both of you Ring for an ambulance then they can assess the situation and help lift the client ring the centre for support and to report the situation
- 9) Your client who you assist to transfer from bed to chair is unable to support their weight. The client says he is having an off day because he hasn't been sleeping very well just lately What action do you take?
- A. Record and report immediately the other carers need to be aware and assistance with lifting may be required a risk assessment will need to be done. Also why is your client not sleeping? Your client needs to be encouraged to speak to their doctor there maybe some underlying problem
- 10) Complete a manual handling risk assessment on your client to check that if any changes since the last assessment and record *Report to your supervisor on supervision and discuss*