

Pro\_060

## Standard Operating Procedure – Manual Handling including Hoist

### Record of SOP development

Version	Date approved	Date for review
2021/1	September 2021	September 2023

### Responsibilities and delegations

<b>This procedure applies to</b>	CEO, managers and supervisors, workers <i>(inclusive of volunteers)</i> .
<b>Procedure approval</b>	Quality & Risk Committee

### Policy context – this policy relates to:

<b>Standards</b>	<ul style="list-style-type: none"> <li>AS/NZS ISO 45001:2018 Occupational health and safety management systems-Requirements with guidance for use</li> <li>Code of Practice – How to Manage Work Health and Safety Risks</li> <li>National Standards for Disability Services 2013</li> </ul>
<b>Legislation</b>	<ul style="list-style-type: none"> <li>Queensland Work Health and Safety Act 2011 -Queensland Regulations</li> <li>Hazardous Manual Task – Code of Practice 2021</li> <li>Manual Tasks involving the handling of people – Code of Practice 2001</li> <li>Fair Work Act (2009)</li> <li>Disability Discrimination Act (1992)</li> <li>National Disability Insurance Scheme Act 2013</li> </ul>
<b>Organisation policies</b>	<ul style="list-style-type: none"> <li>WHS Policy</li> <li>WHS Responsibilities</li> <li>WHS Risk Management</li> <li>Code of Conduct</li> </ul>
<b>Forms, record keeping, other documents</b>	<ul style="list-style-type: none"> <li>General Risk Assessment</li> <li>Participant Risk Assessment</li> <li>Risk Register</li> </ul>

**SPECIAL NOTE: IF YOU ARE UNSURE OF THE SAFETY OF A TASK SEEK  
CLARIFICATION BEFORE PROCEEDING.**

## **1. PURPOSE**

The purpose of this procedure is to ensure that risks associated with manual tasks are adequately managed in order to minimise the risk of injury or harm to workers.

## **2. SCOPE**

This SOP provides practical guidance on how to manage health and safety risks associated with manual tasks. This procedure applies to all Life Choice staff, contractors and other persons on Life Choice controlled worksites.

## **3. DEFINITIONS**

### **Hazardous Manual Task:**

A manual task that involves one or more of the following:

- high or sudden force;
- exposure to vibration;
- repetitive movement;
- repetitive or sustained force; and/or
- sustained or awkward posture.

### **Hierarchy of Control:**

The hierarchy of control is a system for controlling risks in the workplace. Guidance on this page explains the hierarchy of control and can help employers understand and use the hierarchy of control to eliminate or reduce risks at work.

### **Manual Task:**

A task that requires a person to lift, lower, push, pull, carry or otherwise move, hold or restrain any person, animal or thing.

## **4. PROCEDURE**

### **4.1 OVERVIEW**

Manual tasks cover a wide range of activities that involve using the body to move or hold an object or person. Examples of manual tasks include: Pushing a wheelchair, transferring a person, repeatative movements, entering data into a computer. Hazardous manual tasks can result in injuries to workers.

It is the aim of this procedure to assist Life Choice workers to identify, assess, control and review hazardous manual tasks in order to prevent injuries at work.

### **4.2 MANUAL TASKS**

A hazardous manual task means a task that requires a person to lift, lower, push, pull, carry or otherwise move, hold or restrain any person, animal or thing involving any, or a combination, of the following:

- repetitive or sustained force;

- high or sudden force;
- repetitive movement;
- sustained or awkward posture;
- exposure to vibration; and
- Sedentary tasks

In order to assist in identifying hazardous manual tasks, Life Choice will use a range of measures including consultation with workers, review of workplace incidents/injuries, worker's compensation data, direct observation of manual tasks and surveys. Once hazardous manual tasks have been identified, Life Choice managers, supervisors and workers will assess the risk.

The risk management process will be a collaborative one, involving workers who are directly involved in the hazardous manual task, their supervisors, managers, Workplace Health and Safety Officer & Health and Safety Representatives

#### **4.3 RISK ASSESSMENT**

The risk management process for manual tasks involves: **SEE APPENDIX A**

- Identification of the hazardous manual task;
- Assessment of the risk factors for hazardous manual tasks including posture, force, repetition, time and exposure to vibration;
- Identifying the source of the risk such as work area layout, systems of work, nature of the work or load and the work environment;
- Identifying suitable controls for the risk with reference to the hierarchy of controls;
- Provision of adequate training and awareness of issues such as fatigue management; and
- Reviewing the effectiveness of controls that have been implemented.

As always, the risk management process involves communication and consultation throughout to ensure an effective outcome.

#### **4.4 SAFE MANUAL HANDLING TECHNIQUE**

Safe Manual Handling/ Lifting Technique requires the following:

- Always assess the load and treat all items as if they are going to be heavy or awkward;
- When lifting, keep the natural curves in your back, bend from the knees, keep the load close and make sure you have a good grip;
- Use the semi squat lift. This is achieved by sticking your butt out, allowing your knees to bend, keep the load close to your body, keep your spine towards the horizontal and look up towards the horizontal and push through your heels and breath as you lift;
- Keep the load in between knees and shoulders and if that's not possible raise yourself up with equipment;
- If something is too heavy to lift by yourself use a trolley or lifting aid. Don't forget work mates are here to help you out too so you can always call for a team lift;
- Make sure you always have a clear path and clear vision of where you are going before you start any manual handling task.

## 5. HOIST TRANSFERS

### 5.1 Preparation for a specific transfer

Prior to moving a person, check the following aspects of the planned transfer:

- Check the participant profile and carry out a pre-movement risk assessment
- Plan the movement, including the order of specific tasks and who will carry out each task
- Get equipment ready: If equipment is to be used, ensure the equipment is available in good order with any required accessories in place and ready to use
- Prepare the environment: Position furniture, check that route and access ways are clear and that the destination is ready
- Prepare the participant: Tell the participant what will happen, gain their permission, and let them know what they are expected to do. Ensure that the participant's clothes and footwear are appropriate for the task, and that they have any aids they need.

### 5.2 Applying a sling: SEE APPENDIX B

- Roll the participant on to their side
- Fold sling in half with labels and handles on the outside
- Position sling from the base of the spine upwards
- If the sling has a neck seam, align seam with base of participant's neck
- There should be a gap between the sling and the participant's body so that when they roll back their spine is in the middle of the sling
- Take upper leg strap and feed the loop under the participant's neck
- Fold the upper shoulder loop/clip into the sling and roll entire upper portion of sling into space behind participant's back. Roll participant on to back
- Take the loop or clip from under participant's neck and pull smoothly towards you and down in the direction of the legs using a lunge; the sling should unroll underneath the participant
- Both carers pull the sling towards themselves to remove the creases
- You may need to adjust the head support for comfort.

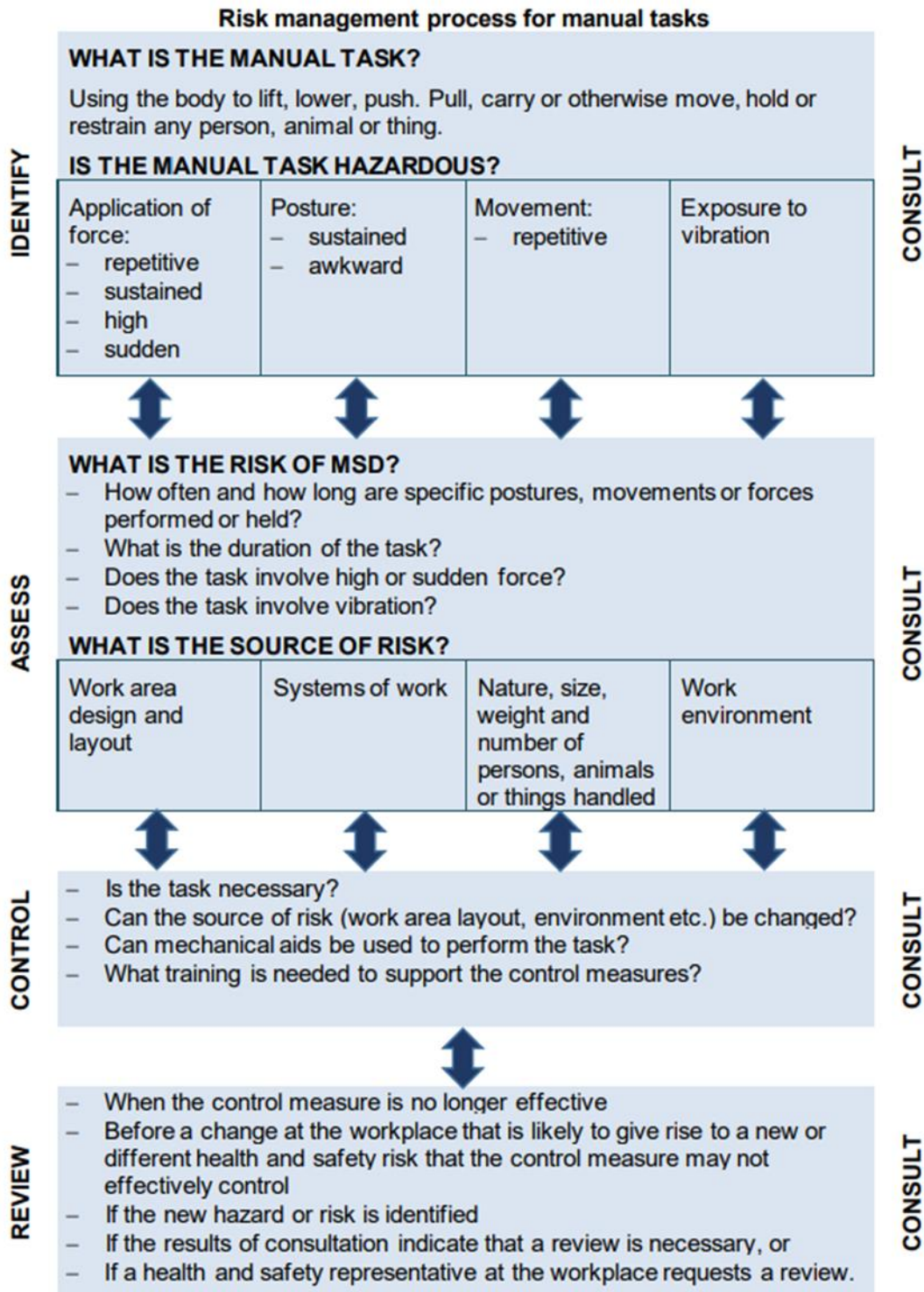
### 5.3 Hoisting a participant from bed to chair: SEE APPENDIX C

- Lie participant as flat as can be tolerated
- Apply sling, and record the size and type selected in the participant's care plan
- Ensure the path to chair is clear
- Lower the sling bar to participant's chest area; the sling bar must be managed at all times during the procedure to minimise the risk of the bar swinging into the participant
- Attach sling to the sling bar and slowly hoist the participant just above the surface on which they are lying
- Encourage the participant to move around in the sling and get comfortable; this will facilitate confidence and comfort – check sling loops again at this point to ensure they are all on safely
- Move the hoist over to the chair
- When lowering, place one hand underneath the sling bar to protect the participant from it. If the participant is unable to reposition themselves in the chair, a second person must assist in positioning the chair while the participant is being lowered
- Remove the sling from the sling bar and take the hoist away before removing the sling
- To remove the sling, reverse the steps. The sling must be removed to protect the participant's skin integrity

#### **5.4 Hoisting from the floor: SEE APPENDIX D**

- This technique uses a hoist (mobile or ceiling hoist) and a sling. If a mobile (floor) hoist is used, it must be suitable for lifting participants from the floor.
- Move the hoist into position – it is best to bring the hoist in from the participant's head end. If this is not possible, come from the feet end. The participant's feet and legs will have to be lifted over the hoist legs so the sling bar can be positioned above the participant's chest
- Lower the boom to its lowest position so it is easy to attach the sling
- Attach the sling
- The participant's bed should be brought to the area
- Hoist the participant from the floor and position them on the bed
- Remove the sling by tucking as much as possible of the sling underneath the participant on one side and either sliding it out from the other side or rolling participant away from it.







## APPENDIX A






## APPENDIX B

1. Roll client on to their side and fold sling	2. Position sling from base of spine upwards, feed upper leg strap under client's neck
	
3. Fold the upper shoulder loop/clip into sling and roll upper portion of sling into space behind client's back	4. Flatten roll and turn client on to their back
	
5. Locate loop from under client's neck	6. Take the loop and pull smoothly towards you using a lunge
	
7. Both carers pull the sling towards themselves to remove the creases	8. Complete sling positioning, crossing leg loops between legs
	

## APPENDIX C

<p>1. Lower sling bar above client's chest</p>	<p>2. Attach sling to bar. Using hoist, slowly raise the client above the surface on which they are lying</p>
	
<p>3. Hoist client off mattress</p>	<p>4. Move hoist so client is over chair</p>
	
<p>5. Keep a hand on the sling bar whilst lowering the client</p>	<p>6. Remove the sling from sling bar and move before removing the sling from the client</p>
	

## APPENDIX D

1. Apply the sling to the client	2. Move the hoist into position
	
3. Lower the sling bar and attach the sling	4. Hoist the client from the floor
	
5. Move hoist to transfer client over bed	6. Lower client to bed
	

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