



NHS Staff Council

**Health, Safety
& Wellbeing Group**

Musculoskeletal health in the workplace webinar.

3rd October 2023

12:00pm – 1:30pm

**Please ensure you are muted when not speaking to
avoid disrupting the session**

Please be aware this session is being recorded

**Working In
Partnership**

Speakers



Kim Sunley

Staff side chair of HSWG and Health, Safety and Wellbeing National Officer at the Royal College of Nursing



Jenny Michael

Management side chair of HSWG and Head of Health and Safety at Portsmouth Hospitals University NHS Trust



Martin McMahon

HM Inspector of Health and Safety at the Health and Safety Executive



Chris Quarrie

Specialist Policy Advisor at the Health and Safety Executive



Louise Church

Health, Safety and Wellbeing National Officer at the Royal College of Nursing



Claire Smith

Head of Organisational Development and Wellness at Health Education and Improvement Wales



Isaac Ferneyhough

Head of Moving & Handling at East Suffolk and North Essex NHS Foundation Trust

Agenda

Item	Time
Chair's welcome Jenny Michael, Management Side Chair of the NHS Staff Council Health, Safety and Wellbeing Group	12:00
Management of risk from musculoskeletal disorders - findings from the HSE inspections of NHS Trusts/Boards (2018-2022) Martin McMahon, HM Inspector of Health and Safety	12:10
New musculoskeletal health resource - key sections and high-level overview Louise Church, Health, Safety and Wellbeing National Officer Claire Smith, Head of Organisational Development and Wellness Isaac Ferneyhough, Head of Moving & Handling	12:30
MSD Risk Management in Healthcare – assessing push/pull risk for non-clinical staff Chris Quarrie, Specialist Policy Advisor	12:50
Questions & answers	13:10
Closing remarks Kim Sunley, Staff Side Chair of NHS Staff Council Health, Safety and Wellbeing Group	13:25

NHS Staff Council



Management of risk from Musculoskeletal Disorders

Findings from HSE Inspections 2018-2022

**Martin McMahon HM Inspector of Health and Safety
Health and Social Care Services Unit**

MSDs Inspections Background

- 60 NHS Trusts and Boards inspected between 2018-22 on management of Musculoskeletal Disorders (MSDs) and workplace Violence & Aggression(V&A) risk
- Aligned with HSE Health and Work priorities
- Thorough management review based on 'Plan, Do, Check, Act' principles
 - Pre visit documentation review
 - numerous levels of engagement through Board to Frontline
 - feedback directly to senior management / Directors

MSD NHS Inspections Enforcement summary

Material Breach Rate	
	MSDs
2018-19	10 (50%)
2019-20	11 (55%)
2021-22	7(35%)
TOTAL	28 (47%)

- Includes:
 - 5 Improvement Notices in 2018-19 across 2 organisations
 - 9 Improvement Notices in 2019-20 across 5 organisations
 - 6 Improvement Notices in 2021-22 across 3 organisations
- 28 (47%) of organisations inspected had enforcement taken
- Caution not to place too much weight on enforcement level trends as a small numerical change on small sample can have significant % impact
- Can be said that MSDs remain significant issue within healthcare

Analysis of issues

- Inspections identified a range of issues that can be categorised into four broad areas
 - Risk assessment
 - Training
 - Roles and Responsibilities
 - Monitoring and Review

Analysis of issues (cont.)

Risk Assessment

- Refers to the steps taken by NHS employers to conduct suitable and sufficient risk assessments to control the risk to employees from MSDs
 - assessments too generic, with high-risk areas not being identified;
 - assessments not including non-clinical workers who were exposed to the risk
 - inconsistencies in the approach to risk assessment across the same organisation.

Training

- Refers to the training on controlling risk from MSDs provided to employees
 - training too generic and lacked evidence it was based on a training needs analysis
 - where training was identified as mandatory, in practice it was optional
 - non-clinical workers exposed to the risk not included in training;
 - no suitable assessment of the competency of the trainers

Analysis of issues (cont.)

Roles and Responsibilities

- Refers to the allocation of specific roles and responsibilities within the organisation to effectively supervise and manage the risk to employees from MSDs.
 - a lack of clarity over roles and responsibilities
 - a lack of wider organisational awareness of who does what
 - inadequate provision of time and resource given to those with roles and responsibilities
 - no suitable assessment of the competence of those with specific roles and responsibilities to carry out that work.

Monitoring and Review

- Refers to conducting effective monitoring and review of existing risk control measures to ensure they are effective and that the risks to employees from MSDs are being managed
 - failure to actively monitor and review control measures to ensure they are effective
 - insufficient time and resource allocated to monitoring and review
 - failure to use available data sources (e.g. absence data, incident reporting) or engage other departments (H&S, OH, HR) in the review process
 - a lack of clarity over what should be reported and how, leading to non-reporting.

Positives

- 22 (37%) out of 60 visits had no formal enforcement action taken
 - Even where action was taken there was still compliance with other duties
- Although caution with a low sample, there was a drop in formal enforcement between campaigns in 2019-20 and 2021-22
 - 55% to 35% for MSDs
- Some innovative practice observed
 - Designing out manual handling risk when developing new hospital facility
 - Innovative IT solutions for tracking course attendance and equipment maintenance

MSDs in NHS - Plan for 2023-24

- Letter and Report to NHS Trust / Board CEOs – copy available
 - Highlight findings of 2018-22 Inspections (alongside workplace Violence & Aggression (V&A))
 - Advise of Assurance Inspection Campaign
 - HSE ebulletin - [HSE ebulletin: Managing violence and aggression and MSDs in the NHS \(govdelivery.com\)](https://www.govdelivery.com/accounts/HSE/emails/MSDs)
- Assurance Inspection Campaign (alongside management of V&A)
 - Step one – high level HSE Senior Operations Manager / NHS CEO meeting to discuss
 - Organisational measures in place to address the findings.
 - Leadership in ensuring sufficient attention, resource and priority given
 - Step two – ‘on the ground’ inspections to assess delivery and effectiveness of those measures
 - Engagement with cross section of management and workforce

New Musculoskeletal Health Resource




Louise Church - Health, Safety and Wellbeing National Officer at the Royal College of Nursing

Claire Smith - Head of Organisational Development and Wellness at Health Education and Improvement Wales

Isaac Ferneyhough - Head of Moving & Handling at East Suffolk and North Essex NHS Foundation Trust


Back in work back pack



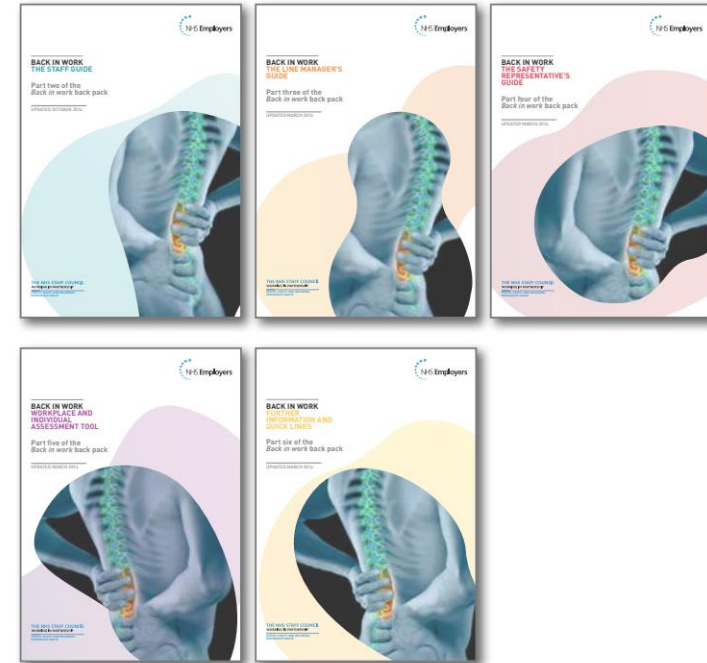
**BACK IN WORK
INTRODUCTION
AND KEY MESSAGES**

Part one of the
Back in work back pack

UPDATED MARCH 2014



**THE NHS STAFF COUNCIL
WORKING IN PARTNERSHIP**
HEALTH, SAFETY AND WELLBEING
PARTNERSHIP GROUP



The new resource



Home / Resources

Guide

Guidance on musculoskeletal health in the workplace

This updated guidance is aimed at staff at all levels of NHS organisations, to help promote, protect and support musculoskeletal health.

28 September 2023

Who is it for?

- Wide audience of professionals: health and safety teams, occupational health, ergonomists, back care professionals, employers, managers, staff and trade union representatives

What is the purpose of the resource?

- Advise and support employers and managers on:
 - preventing musculoskeletal disorders (MSDs)
 - supporting staff with pre-existing MSDs
- Inform employees how they can promote, protect and support their musculoskeletal health and where get more detailed advice
- Support managers and safety representatives to work together to prevent MSDs, ill health and injury from work

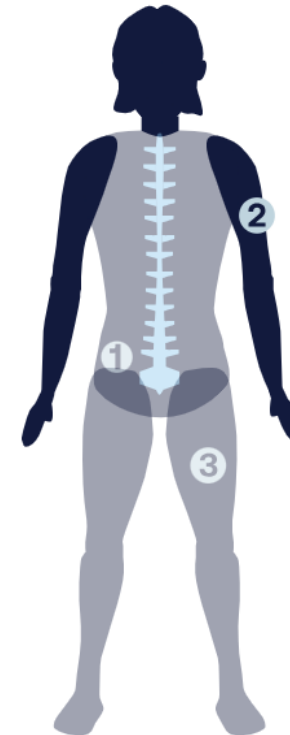
Why is managing musculoskeletal health important?

Prevention, early detection and treatment of issues is key

68,000 work related cases MSDs – 22% in human health and social care

(Source: LFS, estimated annual average 2019/20-2021/22)

Risks are not just patient handling roles



2. Tasks that increase the risk of upper limb disorders or aggravate them include:

- prolonged repetitive work
- uncomfortable or awkward postures
- lack of suitable rest breaks when carrying out tasks for a long time
- using handheld power tools/vibrating equipment for long periods of time.

Symptoms include:

- aches and pains, tenderness, weakness, tingling, numbness, cramp, burning, redness and swelling
- stiffness, pain or reduced movement in joints.

Legal requirements

Manual Handling Operations Regs 1992/

Manual Handling Operations Regulations (Northern Ireland) 1992

Hierarchy of measures

- Avoid manual handling
- Suitable and sufficient assessment of the risk of injury
- Reduce the risk of injury

Employees especially at risk

Reasonable adjustments



Risk assessment and risk management

Determine specific assessments required

Training and competency

Engagement and consultation of staff and safety representatives

- Innovation

Implementing the risk assessment

Training staff



Moving and handling of patients

Patients should be encouraged to move independently and contribute to movement

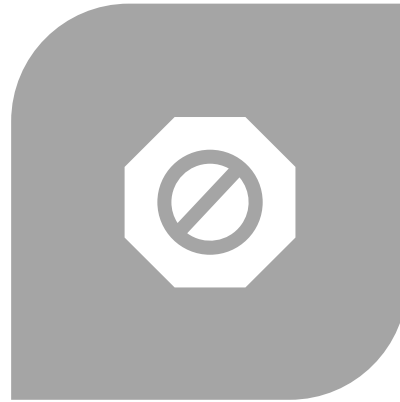
Use of and maintenance and inspection of hoists, sliding aids and specialist lifting equipment and handling aids

Bariatric patients

Employees, Managers and Employers



PROMOTE



PREVENT



SUPPORT

The role of Safety Representatives in preventing work related MSDs

Encourage members to follow protocols and procedures

Consultation

- New technology, new equipment, new ways of working
- Information for employees on risks to H&S and preventative measures
- H&S training
- H&S consequences of new technology
- Arrangements for ensuring access to competent people

Inspections of the workplace

H&S Committee

Resource: Inspection sample questions

Job design

- Risk management and procedures
- Environment
- Equipment

Organisation

Individual

INDIVIDUAL	Yes/ No/N/A	Further comments:
Are staff encouraged to report any aches/ pain/ discomfort to their line manager?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Are staff given the opportunity in appraisals/ one to ones to discuss concerns about health issues which may affect them from doing their work?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Where appropriate, are individual manual handling risk assessments undertaken with staff members?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Has the employer implemented a health ability passport or similar scheme to take into account an individual's requirements for specific workplace adjustments due	Yes <input type="checkbox"/> No <input type="checkbox"/>	

Risk management and procedures	Yes/ No/N/A	Further comments:
Are all line managers sufficiently trained in risk management and undertaking risk assessments?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Are jobs/tasks designed to eliminate or minimise manual handling?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Are repetitive actions minimised?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Is frequent or prolonged stooping, stretching or reaching above shoulder height, or sideways twisting of the body, avoided?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Are staff able to take sufficient breaks from standing for long periods of time?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Is kneeling/ bending for long periods of	Yes <input type="checkbox"/>	



Musculoskeletal Risk Management

Chris Quarrie
MSD Health Policy Team

Outline of Presentation

- Overview of the relevant regulations
- NHS Inspection Campaign review findings – points I will cover
- HSE tools for manual handling and pushing and pulling – with focus on non-clinical staff
- HSEs Risk Assessment for Pushing and Pulling Tasks
- What does good look like?
- What are HSEs expectations?
- MSD Design awards

Manual Handling Operations Regulations 1992

AVOID (Reg 4(1)(a))

- **hazardous** operations SFARP

ASSESS (Reg 4(1)(b)(i))

- any hazardous operations that cannot be avoided

REDUCE (Reg 4(1)(b)(ii))

- the risk of injury ALARP

MONITOR / REVIEW (Reg 4(2))

- to monitor risks

...any transporting or supporting of a load (including the lifting, putting down, pushing, pulling, carrying or moving thereof) by hand or bodily force.



Risk assessment and Monitoring and Review

Risk Assessment

This refers to the steps taken by NHS employers to conduct suitable and sufficient risk assessments to control the risk to employees from MSDs and V&A. Issues identified during the visits included:

- **assessments being too generic**, with high-risk areas not being identified;
- **assessments not including non-clinical workers** who were exposed to the risk;
- **inconsistencies in the approach to risk assessment** across the same organisation.

Monitoring and Review

Issues identified during the visits included:

- failure to actively monitor and **review control measures** to ensure they are effective;

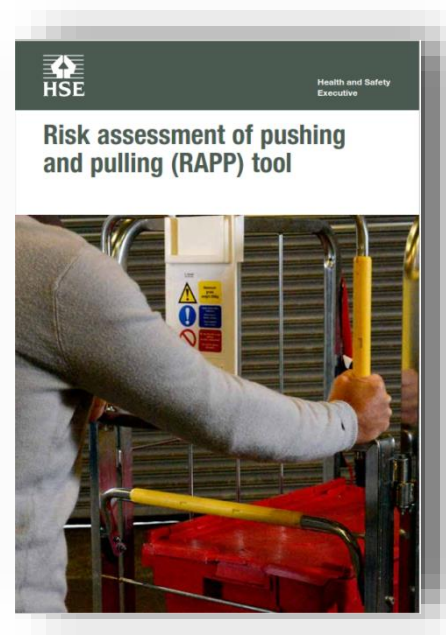
Manual Handling Risk Assessment

MAC

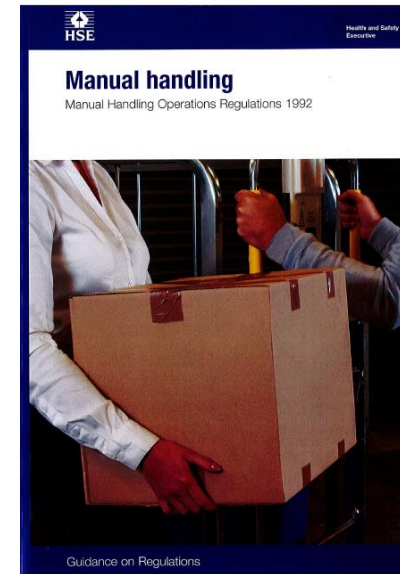


- Quick check
- Highlights high risk
- Highlights key risks
- Enables communication

RAPP



L23



- Full risk assessment
- Wide scope
- Adheres to “Schedule 1”
- Complies with European Directive 90/269/EEC

RAPP Tool – Introduction

It is intended to be used alongside the *Manual handling assessment charts (the MAC tool)*¹ which helps assess lifting and carrying operations, and follows a similar approach to that tool. It is aimed at those responsible for health and safety in workplaces and will help you to identify high-risk pushing and pulling activities and check the effectiveness of any risk-reduction measures.

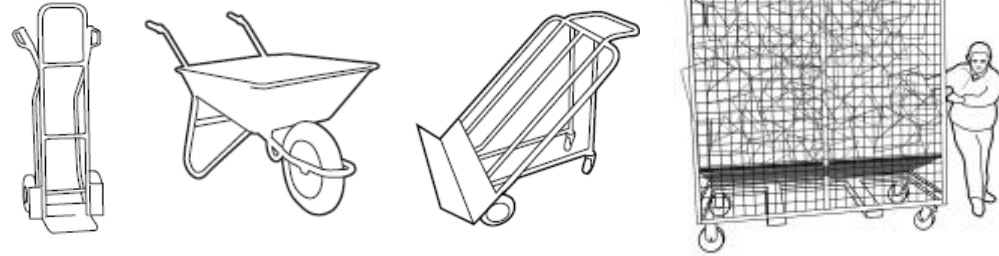
Risk assessment for pushing and pulling (RAPP)

- Think of it as the push-pull MAC
- Published September 2016
- Same principles as the MAC
 - Flow chart of risk factors
 - Assessment guide
 - Traffic light system
 - Score sheet



Where the RAPP can be used

Section A: Moving loads on wheeled equipment



Section B: Moving loads without wheels

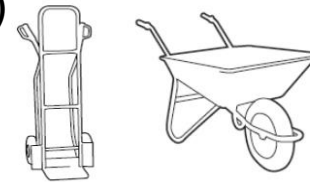


Section A – Wheeled equipment



Small (one/two wheels)

*Small with one or two wheels: eg wheelbarrows, wheelie bins or sack trucks.
With this equipment the worker supports some of the load.*



Less than 50 kg	Low G/0
50 kg to 100 kg	Medium A/2
100 kg to 200 kg	High R/4
More than 200 kg	Very high R/8
Load exceeds equipment's rated capacity (manufacturer's recommended maximum weight)	Unacceptable P

Medium (three/four wheels)

Medium, with three or more fixed wheels and/or castors: eg roll cages, Euro bins.



Less than 250 kg	Low G/0
250 kg to 500 kg	Medium A/2
500 kg to 750 kg	High R/4
More than 750 kg	Very high R/8
Load exceeds equipment's rated capacity (manufacturer's recommended maximum weight)	Unacceptable P

Large (large or on rails)

Large, steerable or running on rails: eg pallet truck or overhead rail system.



Less than 600 kg	Low G/0
600 kg to 1000 kg	Medium A/2
1000 kg to 1500 kg	High R/4
More than 1500 kg	Very high R/8
Load exceeds equipment's rated capacity (manufacturer's recommended maximum weight)	Unacceptable P

Section B – Loads without wheels



Rolling



Less than 400 kg	Low G/0
400 kg to 600 kg	Medium A/2
600 kg to 1000 kg	High R/4
More than 1000 kg	Very high R/8

Churning (loads are moved by pivoting/rolling along the base edges)



Less than 80 kg	Low G/0
80 kg to 120 kg	Medium A/2
120 kg to 150 kg	High R/4
More than 150 kg	Very high R/8

Dragging/hauling or sliding



Less than 25 kg	Low G/0
25 kg to 50 kg	Medium A/2
50 kg to 80 kg	High R/4
More than 80 kg	Very high R/8

Moving patients on beds

Food trolleys

Roll cages

Industrial bins etc.

Medium, with three or more fixed wheels and/or castors: eg roll cages, Euro bins.



Less than 250 kg	Low G/0
250 kg to 500 kg	Medium A/2
500 kg to 750 kg	High R/4
More than 750 kg	Very high R/8
Load exceeds equipment's rated capacity (manufacturer's recommended maximum weight)	Unacceptable P



A-2 Posture

Observe the general positions of the hands and the body during the operation.

Good G/0	Reasonable A/3	Poor R/6
Torso is largely upright, and	Body is inclined in direction of exertion, or	Body is severely inclined, or worker squats, kneels or needs to push with their back against the load, or
Torso is not twisted, and	Torso is noticeably bent or twisted, or	Torso is severely bent or twisted, or
Hands are between hip and shoulder height	Hands are below hip height	Hands are behind or on one side of body or above shoulder height

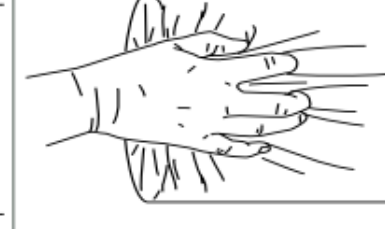
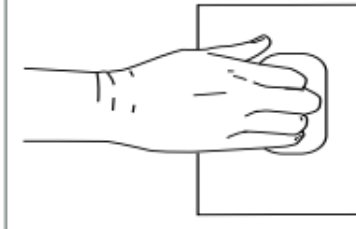




A-3 Hand grip

Observe how the hand(s) grip or contact the equipment during pushing or pulling. If the operation involves both pushing and pulling, assess the hand grip for both actions.

Good G/0	Reasonable A/1	Poor R/2
There are handles or handhold areas which allow a comfortable power grip for pulling or comfortable full-hand contact for pushing	There are handhold areas, but they only allow a partial grip, eg fingers clamped at 90°, or partial hand contact for pushing	There are no handles or the hand contact is uncomfortable





A-4 Work pattern

Observe the work, noting whether the operation is repetitive (five or more transfers per minute) and whether the worker sets the pace of work. Ask workers about their pattern of breaks and other opportunities to rest or recover from the work.

Good G/0	Reasonable A/1	Poor R/3
The work is not repetitive (fewer than five transfers per minute), and	The work is repetitive, but	The work is repetitive, and
The pace of work is set by the worker	There is opportunity for rest or recovery through formal and informal breaks or job rotation	No formal/informal breaks or job rotation opportunities are provided



A-5 Travel distance

Determine the distance from start to finish for a single trip.

- If the operation is not repetitive, do an assessment for the longest trip.
- If the operation is repetitive, determine the average distance for at least five trips.

Short G/0	Medium A/1	Long R/3
10 m or less	Between 10 m and 30 m	More than 30 m



A-6 Condition of equipment

Enquire about the maintenance programme and observe the general state of repair of the equipment (condition of the wheels, bearings and brakes).

Good G/0	Reasonable A/2	Poor R/4
Maintenance is planned and preventive, and	Maintenance occurs only as problems arise, or	Maintenance is not planned (there is no clear system in place), or
Equipment is in a good state of repair	Equipment is in a reasonable state of repair	Equipment is in a poor state of repair



A-7 Floor surface

Identify the condition of the surfaces along the route and determine the level of risk using the following criteria.

Good G/0	Reasonable A/1	Poor R/4
Dry and clean, and	Mostly dry and clean (damp or debris in some areas), or	Contaminated (wet or debris in several areas), or
Level, and	Sloping (gradient is between 3° and 5°), or	Steep slope (gradient is more than 5°), or
Firm, and	Reasonably firm underfoot (eg carpet), or	Soft or unstable underfoot (gravel, sand, mud), or
Good condition (not damaged or uneven)	Poor condition (minor damage)	Very poor condition (severe damage)



A-8 Obstacles along the route

Check the route for obstacles. Note if the equipment is moved over trailing cables, across raised edges, up or down steep ramps (gradient of more than 5°), up or down steps, through closed/narrow doors, screens or confined spaces, around bends and corners or objects. Each type of obstacle should only be counted once no matter how many times it occurs.

Good G/0	Reasonable A/2	Poor R/3
No obstacles	One type of obstacle but no steps or steep ramps	Steps, steep ramps or two or more other types of obstacle



A-9 Other factors

Identify any other factors, for example:

- the equipment or load is unstable;
- the load is large and obstructs the worker's view of where they are moving;
- the equipment or load is sharp, hot or otherwise potentially damaging to touch;
- there are poor lighting conditions;
- there are extreme hot or cold temperatures or high humidity;
- there are gusts of wind or other strong air movements;
- personal protective equipment or clothing makes using the equipment more difficult.

None G/0	One A/1	Two or more R/2
No other factors present	One factor present	Two or more factors present

Score sheet: Pushing or pulling loads on wheeled equipment

Assessor name: Date:

Company name: Location:

Detailed description:

Are there indications that the operation is high risk? (Tick appropriate box)

The operation has a history of incidents (eg company accident book records, RIDDOR reports).

The operation is known to be hard or high-risk work.

Employees doing the work show signs that they are finding it hard (eg breathing heavily, red-faced, sweating).



Discussions with employees doing the operation indicate that some aspects are difficult.

Other indications, if so, what?

Identify the type of equipment and insert the colour band and numerical score for each of the risk factors in the boxes below

Note: the total scores are for prioritising further risk control measures – they do not relate to risk of injury!

Factors	Small equipment		Medium equipment		Large equipment	
	Colour band (G, A, R)	Numeric score	Colour band (G, A, R)	Numeric score	Colour band (G, A, R)	Numeric score
A-1 Load weight						
A-2 Posture						
A-3 Hand grip						
A-4 Work pattern						
A-5 Travel distance						
A-6 Condition of equipment						
A-7 Floor surface						
A-8 Obstacles on route						
A-9 Other factors						
Total score						
Note individual capability, eg vulnerable workers, or psychosocial issues						

MSD digital tools

Free Digital MSD Assessment Tools

Free Single Assessment MAC Tool

The assessment side of the solution is available for free.



Free Single Assessment RAPP Tool



The assessment side of the solution is available for free.

[Find out more](#)

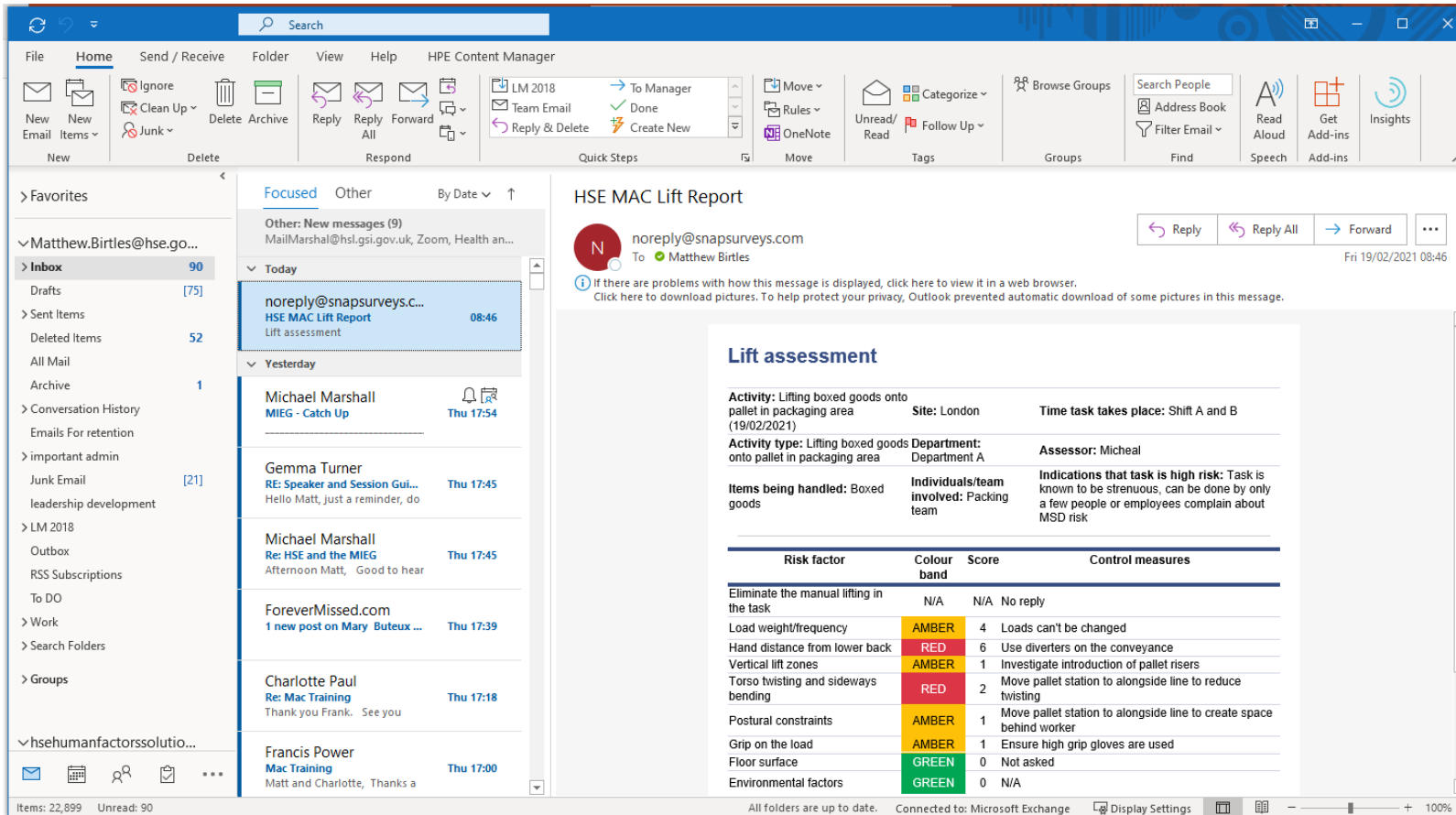
Free Single Assessment ART Tool



The assessment side of the solution is available for free.

[Find out more](#)





HSE MAC Lift Report

From: noreply@snapsurveys.com
To: Matthew Birtles

Lift assessment

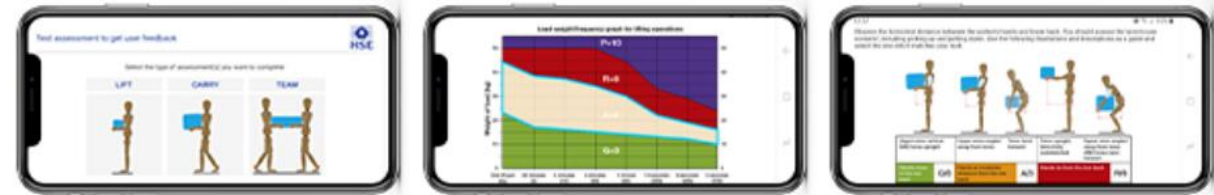
Activity: Lifting boxed goods onto pallet in packaging area
Site: London
Time task takes place: Shift A and B (19/02/2021)

Activity type: Lifting boxed goods onto pallet in packaging area
Department: Department A
Assessor: Micheal

Items being handled: Boxed goods
Individuals/team involved: Packing team
Indications that task is high risk: Task is known to be strenuous, can be done by only a few people or employees complain about MSD risk

Risk factor	Colour band	Score	Control measures
Eliminate the manual lifting in the task	N/A	N/A	No reply
Load weight/frequency	AMBER	4	Loads can't be changed
Hand distance from lower back	RED	6	Use diverters on the conveyance
Vertical lift zones	AMBER	1	Investigate introduction of pallet risers
Torso twisting and sideways bending	RED	2	Move pallet station to alongside line to reduce twisting
Postural constraints	AMBER	1	Move pallet station to alongside line to create space behind worker
Grip on the load	AMBER	1	Ensure high grip gloves are used
Floor surface	GREEN	0	Not asked
Environmental factors	GREEN	0	N/A





Snap Surveys

MSD tool report

Manual handling assessment charts (the MAC Tool)

Sample Organisation 9.1

23 January 2020

Filter: All Respondents



Executive summary

This summary report contains results for the MAC tool carried out by Sample Organisation 9.1.

The Manual Handling Assessment Charts (MAC) is a tool aimed at employers, health and safety managers and safety representatives and is used by health and safety inspectors. The tool will help you assess the most common risk factors in lifting (and lowering), carrying and team handling operations and was developed to identify high-risk manual handling. It will point you towards the factors you need to modify to control these risks.

This report summarises the scores for all the MAC assessments across your organisations, the date from this report and all individual assessments can be extracted in Excel format for further analysis. This report will enable Sample Organisation 9.1 to focus on the priority areas and make targeted improvements to successful manage manual handling risks.

Incorrect manual handling is one of the most common causes of injury at work. It causes work-related musculoskeletal disorders (MSDs) which account for over a third of all workplace injuries. (For the latest statistics, visit the HSE web page www.hse.gov.uk/statistics/casades/msculoskeletal/index.htm.)

Your performance

The following chart shows your mean scores for LIFT, Carry and Team assessments. HSE is currently developing benchmarking data which will be shown here when it becomes available.



Suggested priorities for improvements

When devising your action plan, start by focusing on the following key areas identified by the assessment's results:

- Actual risk of serious personal injury – critical
- Significant / probable / substantial – high priority
- Significant / possible / moderate – medium priority

Actual risk of serious personal injury - critical

Lift

Activity	Site	Assessor	Type	Lift score
Task 6 (30/09/2019)	Location 4	Assessor 6	Lift	20

Carry

Activity	Site	Assessor	Type	Carry score
Task 1 (30/09/2019)	Location 10	Assessor 1	Carry	23
Task 9 (30/09/2019)	Location 7	Assessor 1	Carry	21
Task 21 (21/08/2019)	Location 6	Assessor 5	Carry	23
Task 37 (28/06/2019)	Location 9	Assessor 5	Carry	15
Task 42 (20/03/2019)	Location 3	Assessor 6	Carry	21

Team

Activity	Site	Assessor	Type	Team score
Task 17 (31/08/2019)	Location 5	Assessor 6	Team	20
Task 18 (31/08/2019)	Location 5	Assessor 7	Team	21
Task 30 (28/06/2019)	Location 6	Assessor 3	Team	20
Task 34 (28/06/2019)	Location 5	Assessor 5	Team	18
Task 45 (20/03/2019)	Location 2	Assessor 6	Team	10

Significant / probable / substantial - high priority

Lift

Activity	Site	Assessor	Type	Lift score
Task 15 (30/09/2019)	Location 7	Assessor 6	Lift	18

Carry

Activity	Site	Assessor	Type	Carry score
12345 (23/01/2020)	Location 5	Assessor 4	Carry	8
Task 1 (30/09/2019)	Location 10	Assessor 1	Carry	23
Task 4 (30/09/2019)	Location 5	Assessor 6	Carry	9
Task 6 (30/09/2019)	Location 8	Assessor 3	Carry	9
Task 29 (28/06/2019)	Location 2	Assessor 5	Carry	17
Task 30 (28/06/2019)	Location 4	Assessor 5	Carry	18
Task 41 (28/06/2019)	Location 2	Assessor 6	Carry	18
Task 44 (20/03/2019)	Location 8	Assessor 8	Carry	21

Team

Activity	Site	Assessor	Type	Team score
Task 3 (30/09/2019)	Location 1	Assessor 6	Team	19
Task 5 (30/09/2019)	Location 1	Assessor 6	Team	20
Task 10 (30/09/2019)	Location 4	Assessor 7	Team	21
Task 13 (30/09/2019)	Location 2	Assessor 5	Team	14
Task 24 (31/08/2019)	Location 8	Assessor 4	Team	20
Task 28 (31/08/2019)	Location 1	Assessor 4	Team	22
Task 28 (28/06/2019)	Location 6	Assessor 5	Team	21
Task 35 (28/06/2019)	Location 8	Assessor 3	Team	17
Task 46 (20/03/2019)	Location 8	Assessor 6	Team	20

Significant / possible / moderate - medium priority

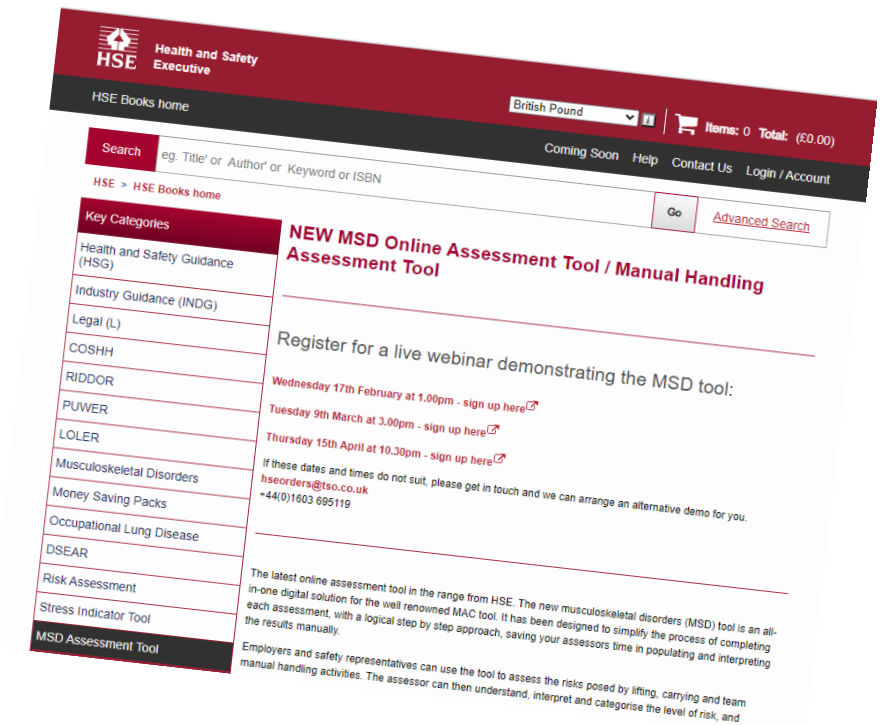
Lift

Activity	Site	Assessor	Type	Lift score
Task 7 (20/09/2019)	Location 1	Assessor 4	Lift	14
Task 15 (30/09/2019)	Location 7	Assessor 6	Lift	18
Task 20 (31/08/2019)	Location 4	Assessor 6	Lift	12
Task 36 (28/06/2019)	Location 5	Assessor 5	Lift	12
Task 49 (20/03/2019)	Location 6	Assessor 4	Lift	14

Carry

Activity	Site	Assessor	Type	Carry score
12345 (23/01/2020)	Location 5	Assessor 4	Carry	8
Task 25 (31/08/2019)	Location 6	Assessor 7	Carry	10
Task 39 (28/06/2019)	Location 4	Assessor 5	Carry	18
Task 41 (28/06/2019)	Location 2	Assessor 6	Carry	18
Task 43 (20/03/2019)	Location 8	Assessor 8	Carry	14
Task 44 (20/03/2019)	Location 8	Assessor 8	Carry	21

- Get the tools free
- Videos of tools in action
- Example MAC tool for you to try
- Price list for Premium version



So, what does good look like?

Electric powered beds – useful for bariatric patients, navigating corridor gradients

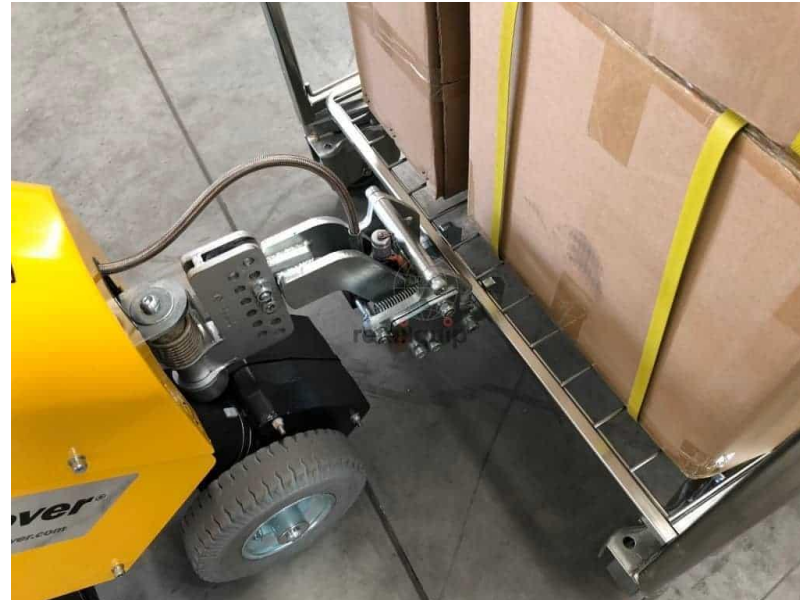


Electric powered meal trolleys



Master mover

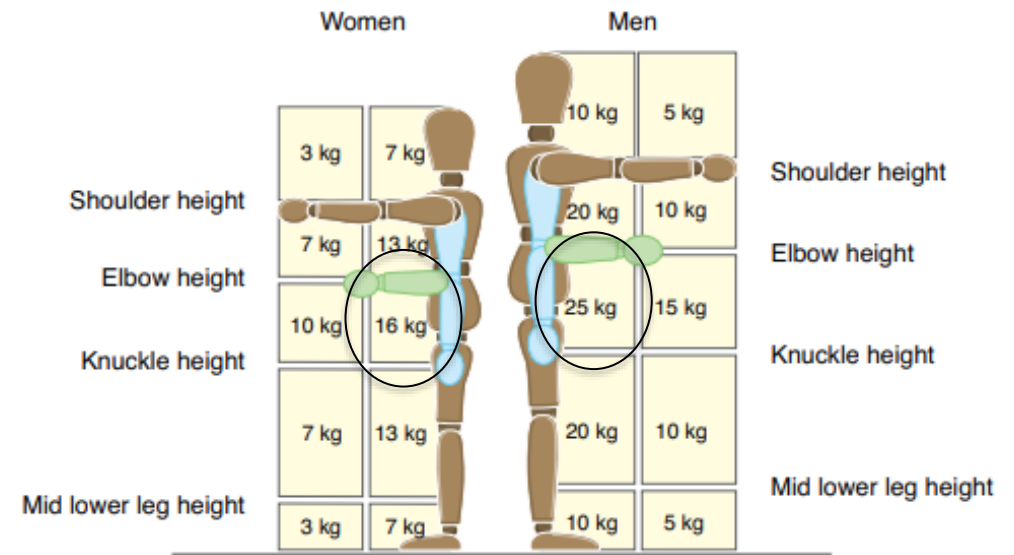
Device for moving roll cages and other items



Storage Some simple advice

- Store heavier items at or around waist height
- Keep lighter items positioned lower or higher on shelving if applicable
- Keep storage areas decluttered as not to create postural/trip issues
- Wedge doors open to prevent double handling
- Always adopt the correct handling technique

Lifting and lowering risk filter



What is a HSE Inspectors expectations?

- An effective MSD risk management system that includes (but not exclusive to)

Effective risk assessment and effective risk control measures

Competence of staff at all levels

Employee consultation during risk assessment AND risk control

Regular monitoring/review of controls measures

Regular cross departmental engagement (e.g. between H&S department, HR department and Occupational Health) to help establish any potential areas of concern

Click to add text

RESEARCH AND
GUIDANCE FROM



'Risk-Reduction through design' Award – MSDs

Client: Royal Mail
Designer: Internal staff and K. Hartwall

BEFORE



Due to a change in the mail mix, the containment arrangements in the existing design needed supplementary sleeves to be fitted/removed above shoulder height. This prompted a more radical redevelopment of the roll containers first introduced in 1991. Large scale operation trial conducted with 180 of the final prototypes

MSD Design Awards

Client: County Durham and Darlington NHS Foundation Trust
Designer: Diane Hindson (staff member CDDFT)

BEFORE



Poor compliance with patient bed repositioning that involved 3 types of movements

MSD Design Awards

Client: Airbus UK
Designer: HTL

BEFORE



Assembly of the A350 wingbox involved access to overhead and awkward fastener locations when bolting inside and outside the tank. Electric tooling equipment varied in weight depending on the diameter of the fasteners. The combination of weight, access restriction and location meant awkward postures, fatigue and risk of musculoskeletal injuries.

<https://www.hse.gov.uk/news/msd-awards.htm>

"The new design is more comfortable when filling on it."



Smooth sides to prevent tipping, and transparent top to show the size of visibility when partially loaded container. A new caster design compound to reduce wear.

Monitoring level water hydrants

"As a company we don't want anyone to be hurt or made unwell by what we do, but we also want to give our customers really good quality water. Having the van mounted standpipe is a great win for everyone. We get the monitoring we want for water quality without risking back injuries across the team. Having this solution, driven by Arto, is a fantastic example of the best solutions coming from people doing the job." (Arto refers to Anthony Skellett, a Severn Trent network maintenance technician on one of the maintenance cleaning teams, whose idea it was.)



"The new design is more comfortable when filling on it."



"A collaborative effort between Airbus & HTL group sourced and developed from the oil & gas sector, and trialled a small, lightweight, and low maintenance hydraulic tooling solution to reduce the impact of lower load weight and size of tools which operators lift and support during bolting. This was measured and confirmed during bolting observations to reduce the risk of musculoskeletal issues with potential to reduce absenteeism associated with this task. Also contributed to lower risk of operator pinch points/finger bruising. Airbus are currently looking at the opportunity of being transferred to other Airbus group sites."

BEFORE

- The challenge was that operatives were manually lifting large numbers of frozen garnish blocks per shift, each weighing 10kg-15kg, and manually breaking them.
- The risks from this include manual handling accidents, as well as back and arm strains.

AFTER

- The team identified a vibratory sieve and trialled it for use in breaking frozen blocks. In addition, lifting tables and conveyors were used to design a new automated workstation layout.
- This solution has proven successful, and since the introduction of the sieve there have been no reports of manual handling injuries related to the activity of breaking frozen blocks.
- The design has resulted in several other benefits, including reduction in processing time and wastage.

BEFORE

- Maintenance teams used standpipes as part of the process to flush water out of water hydrants and monitor and collect water quality data.
- The challenge was that the existing standpipes were heavy and cumbersome and had to be lifted off vans and mounted onto the water hydrants at every testing location to do the tests, an operation that happened up to 20 times a day. The nature of some of the water hydrants also increased the awkwardness of the lift when positioning the standpipes onto the hydrants.

AFTER

- A collaborative effort between Severn Trent Water and manufacturer Langhams to develop an adapter allowing the heavy standpipe to be mounted inside the van for both transit between locations and during the hydrant water flushing operations at each location.
- Using the adapter eliminates manual handling of the standpipe.
- Further benefits of the adapter allow the workforce to operate more efficiently as the overall job time is reduced.

BEFORE

- Previous gas cylinder filling rigs had little ergonomic design consideration, so the cylinders remained fixed at waist height.
- The challenge was that taller filling operatives were adopting poor postures to enable them to perform tasks including filling various sizes of gas cylinder bottles.
- Risk factors included upper limb disorders and potential lower back discomfort.
- Because of the fixed installation, workers were placing smaller cylinders on wooden blocks to raise them - a potential

AFTER

- The company engaged Mid-Anglia Engineering who designed the initial solution following consultation with them.
- A trial of the solution resulted in further modifications, and the final design included hydraulic arms installed at the end of each rig, with a floor plate attached to larger cylinders. This design allows the rig to be fully height adjustable.
- Benefits include allowing operatives to fill the gas cylinders at a comfortable height.



HSE – Risk Reduction through Design Awards 2023

Winning Nomination

**MSD
Design
Awards
2023**



Employer | Zebra Technologies Europe Limited
(Preston)

Designers | Zebra Technologies

Title | Reduction of manual handling of
printed rolls and boxes

“ The new layout has helped reduce the amount of lifting I have to do throughout the day. In addition, with the new equipment, I can control the lifting range to suit my height and this has all but reduced the need to bend during the operation. I feel the new layout has taken a lot of the stress and strain out of the task for the operators and made it a safer operation. ”



BEFORE



← Photo 1 Operator lifting roll from press, bending and twisting to place roll onto pallet

→ Photo 2 They pack box and lift from packing line onto pallet on the floor



- The operator lifts the finished roll off the printing press and then, by bending and twisting down, places the finished rolls onto the pallet which is located at ground level (photo 1).
- A full pallet is then taken by pallet truck to the packing area to be boxed. The operator then lifts the rolls from the pallet onto the packing line.
- The box then goes through the packing machine and is sealed. The operator lifts the sealed box from the packing line, bending and twisting to place it down onto the pallet at ground level (photo 2).
- Each roll weighs up to 8kg, with typically 2 rolls per box. Employees lift around 50 boxes per pallet and complete 2 pallets per shift.

AFTER

→ Photo 3 Operator lifts roll from press and boxes at same height



← Photo 4 They lift box and turn to place onto pallet at same height as packing line

- Operators were consulted and process design changes made. The boxing machine was moved adjacent to the packing line to reduce the lifting tasks.
- The maintenance team designed a cradle that fits onto the existing boxing machine which allows the whole unit to raise, lower and tilt to suit each of the operator's needs to help reduce and address musculoskeletal issues.
- The finished roll emerges from the printing press and the operator takes off the roll (photo 3) and places it directly into the box, where it is sealed by the packing machine and emerges on a short conveyor.
- The operator transfers the sealed boxes onto an adjustable pallet lifter (photo 4) to keep the manual handling at the same height. Following successful trials, the new layout was rolled out to 11 printing presses.

HSE – Risk Reduction through Design Awards 2023

Commended Entry

**MSD
Design
Awards
2023**



Employer | Barrett Steel Shoreham
Designers | In-house – Barrett Steel Shoreham
Title | Moving Trailer Loading Platform

“ The task is now so much simpler and easier to complete, it now takes seconds to move and has taken all the weight and the issues of the platform away. ”



Chartered Institute
of Ergonomics
& Human Factors

BEFORE



← Between 2 and 4 operators required to manoeuvre loading platform alongside trailer

→ Due to herringbone block paving the wheels of the platform were prone to often becoming stuck



- Previously between 2 and 4 operators were required to manoeuvre the full-length platform. The wheels were prone to seize and would often become stuck when trying to move the platforms.
- The platforms weighing up to 600kg were difficult to manoeuvre due to the herringbone block paving brick flooring which could lead to potential musculoskeletal injuries.
- When pulling one end in, the other end would swing out, making it challenging and strenuous for the operator to position the platform tight to the trailer edge.
- This task would be performed by operators at least 4 times per shift at each location.

AFTER



← Rails were sunken into the floor of the warehouse

→ Task is now a 1 operator activity where the platform can be easily moved.



- The operators and the in-house design team were engaged in the designing of a solution and helped with the trialling of the project and giving feedback on any issues or improvements needed.
- A rail track was designed for the platform to run on. A locking drop bolt was included to prevent movement when in use.
- The platform is easily manoeuvred into position by 1 person. The fall from height risk is reduced.
- The platform has improved safety and efficiency by mitigating the manual handling issues and ensuring there is no gap between the trailer and platform.

Questions & Answers

Supporting NHS staff with domestic violence and abuse

This publication is designed to give organisations information when developing a domestic violence and abuse policy.

Health, Safety and Wellbeing Group
21 November 2022



Workplace health and safety standards

www.nhsemployers.org
enquiries@nhsemployers.org
@nhsemployers

HEALTH, SAFETY AND WELLBEING PARTNERSHIP GROUP

NHS Employers

Tackling bullying & harassment in the NHS

18.7% of staff experienced bullying or harassment in the last year from colleagues.
12.4% of staff experienced bullying or harassment in the last year from their managers.
18% of staff experienced acidity in the workplace.
Staff who are bullied have a 18% decrease in their performance and a 20% decrease in how they help others.

Disproportionate impact
BME staff are more likely to experience bullying or harassment.
24.3% of disabled staff reported bullying or harassment in the last year.
BME and gay staff are more likely to experience bullying or harassment than heterosexual staff.

Costs to the NHS
Toxic behaviour costs the NHS more than £2bn a year.
If bulimic NHS workers left their jobs, it would mean a loss of £2.67m.
The cost of replacing those staff would be £251.9m.
Sickness presentations due to bullying costs £164.4m a year.

What is the impact?

On the organisation	On the individual
<ul style="list-style-type: none"> Greater risk of human error Poorer patient care Reduced productivity Lower morale Increased absenteeism Reduced teamwork 	<ul style="list-style-type: none"> Anxiety and depression Disengagement and isolation Reduced confidence Take the message home with you

What can my organisation do?

- Promote NHS's culture and respect toolkit to meet the People Plan's vision.
- Create policies to develop and promote a positive culture.
- Appoint a leader to work with your freedom to speak up groups.
- Monitor organisational data to identify patterns to target interventions.

What can my manager do?

- Identify early warning signs and challenge inappropriate behaviours.
- Responsibly to complete enquiries, ensuring effective wellbeing conversations are held.
- Engage and involve stakeholders colleagues.
- Provide training on inappropriate behaviour and its impact.

What can I do?

- Ask the individual to stop.
- Speak to your manager, senior colleague or after action rep.
- Keep a record of the incident.
- Speak up when you see staff in vulnerable situations.
- Report the incident to your freedom to speak up guardian.

THE NHS STAFF COUNCIL WORKING IN PARTNERSHIP HEALTH, SAFETY AND WELLBEING PARTNERSHIP GROUP

Menopause at work

March 2020

SHIFTWORK IN HEALTHCARE



Patient care depends upon the delivery of many NHS services working in shift patterns. Poorly managed shift systems can impact on the health, safety and wellbeing of staff and patients, but organisations and individuals can help mitigate the risks

What impact could poorly managed shift work have?

On your organisation:

- Poorer patient care and safety
- Reduced productivity
- Increased absenteeism

On an individual:

- Poor work-life balance
- Fatigue and sleep deprivation
- Increased risk of developing a long-term condition or being involved in an accident

EMPLOYERS CAN TAKE ACTION, AND:

- Follow healthy shift patterns e.g. prevent rotating time limits to consecutive nights
- Allow adequate breaks within and between shifts
- Consult with staff and reps on any changes and reviews to shift patterns

You can act now and make these changes:

- Have agreed protocols to cover unplanned shifts
- Ensure staff have access to healthy food
- Consider the needs of vulnerable workers, such as young or aging workers and new and expectant mothers
- Seek support if you are suffering from sleep deprivation
- Raise any concerns about risks such as the impact of fatigue on patient safety
- Take extra care when driving after night and extended shifts

THE NHS STAFF COUNCIL WORKING IN PARTNERSHIP HEALTH, SAFETY AND WELLBEING PARTNERSHIP GROUP

For further advice go to: www.nhsemployers.org/hswpg

NHS Employers

The health, safety and wellbeing group's (HSWG) resources can be found on the [NHS Employers](http://www.nhsemployers.org) website.



Thank you.