**RIVINGTON PRIMARY SCHOOL**

**Moving and Handling Protocol**



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**Moving And Handling Risk Assessment And Support Protocol**

**1.0 Background**

1.1 The Health and Safety at Work Act imposes a general duty upon employers to have regard to the safety of their employees and other persons such as pupils who may be affected by their acts and omissions.

1.2 The Manual Handling Operations Regulations 1992 specifically require employers to eliminate manual handling risk whenever practicable and if this is not possible, assess the remaining risks and take practical steps to reduce them.

1.3 It is recognised that manual handling can be a significant source of risk and injury and that manual handling tasks need to be systematically assessed and managed so as to reduce the risks of injury to staff whilst at the same time respecting the dignity, welfare and educational needs of children.

1.4 As the children with mobility and medical needs are increasingly accommodated within mainstream schools there is a need to ensure that the effective support measures in the form of aids/equipment and adaptations, staff training and assessments are in place.

1.5 This document sets out the steps by which this will be achieved and how staff trained as Child Handling Trainer Assessors will work with the Council's Client Handling Advisor, school staff, parents and physiotherapists/occupational therapists to ensure that effective measures are in place.

**2.0 Aims and Objectives**

2.1 The aims of this document are:-

1. to clarify roles and responsibilities;
2. to outline the procedure by which manual handling issues will be identified and managed;
3. to reduce the risk of injury through safe working procedures, appropriate equipment and training;
4. to keep assessments/arrangements under review to meet changing needs;
5. to promote access and inclusion;
6. to respect the right to dignity of children and to assist whenever practicable with therapeutic needs.

**3.0 Roles and Responsibilities**

3.1 In order to strike an appropriate balance between the needs of the child and the safety of staff, it is important that parties share information and recognise the need to balance potentially competing priorities. Therapy and educational staff should work together to develop moving and handling techniques that are safe and appropriate to the needs of both staff and children.

3.2 In broad terms, the responsibilities shall be as follows:-

* **Schools** have overall responsibility to ensure that the educational needs of a child are met and that the safety of staff and children is maintained.
* **Child Handling Trainer Assessors,** based at Lansbury Bridge School, can provide support to schools in basic child handling assessment and staff training around those arrangements.
* The Council's **Client Handling Advisor** is a further source of support in terms of assessment review for the above and fundamental assessment and training for children with complex needs.
* **Occupational Therapists/Physiotherapists** are responsible for the therapeutic needs of children, aiming to maximise their functional potential and independence.
* **Parents and Carers** can be a source of information on children's needs and should be kept informed of the outcome of the assessment process.

**4.0 The Assessments Process and Staff Training**

4.1 Ideally liaison and assessments should commence before a child enters school to enable access, staff training and equipment issues to be dealt with in a timely manner.

4.2 When a head teacher becomes aware of a new child with mobility needs or an existing child whose needs may have changed they should liaise as appropriate with any previous educational establishment, parents, physiotherapists/occupational therapists and LEA Access/Inclusion Officers to ensure that they have sufficient information concerning the child's needs.

4.3 If a child requires manual handling it is important that a thorough manual handling assessment is completed and that staff are trained in the techniques and equipment to be used.

4.4 A number of staff based at Lansbury Bridge School have been trained as Child Handling Trainer Assessors and they can be accessed via the Lansbury Bridge School Inclusion Co-ordinator, Tel (01744) 678579. When requested they can assist the schools to complete the assessment and training process using small handling aids (such as slide sheets, handling belts and transfer boards) following the procedure set out below.

4.5 If a child receives input from Occupational Therapy/Physiotherapy Service, the Child Handling Trainer Assessors will liaise with the appropriate therapist to either arrange a joint visit or obtain information about the child's physical abilities prior to completing an assessment.

* 1. The Council also retains a Client Handling Advisor to provide training in people handling issues to all staff, as well as providing support and guidance to the Child Handling Trainer Assessors. The Client Handling Advisor will also complete the assessment process in more complex cases, such as those involving the use of hoists, including the actions set out in 4.7 - 4.9 below. This service can be accessed via the Corporate Safety Team (01744) 671722/3234 or via a referral by the Lansbury Bridge School Inclusion Co-ordinator**.**

**4.7 Initial Visit**

4.7.1 During the initial visit the Child Handling Assessors will:-

1. Meet the child (or consider information concerning their needs) and relevant staff.
2. Identify environmental, physical and psychological hazards.
3. Complete a risk assessment pro forma (copy attached) for staff to record all handling tasks.

**4.8 Training and Assessment Session (usually after one week)**

4.8.1 Whenever practicable a joint visit involving Child Handling Trainer Assessors and therapy staff will be arranged. The Child Handling Trainer Assessor will:-

1. Walk through the moving and handling tasks identified by the school at the relevant locations.
2. Assess risks to handler and client and identify appropriate control measures. Record the control measures on the risk assessment pro forma.
3. Demonstrate safe handling and how to reduce risk including the use of any equipment required. If required equipment is not immediately available identify interim solutions. The aim being to ensure staff are competent in the application of the required techniques.
4. Observe the handler(s) implementing the control measures whilst carrying out **each** task.
5. Review risk assessment with Council's Client Handling Risk Assessor.
6. Ensure agreed assessment is signed both by the Assessors and all handlers from the school who have received the training. A copy to be retained by the school.
7. Leave information on suppliers of hoists, slings, etc.
8. It is good practice for the school to share the results of the assessment with parents.

**4.9 Review Visit (After about one month)**

4.9.1 The Child Handling Assessor will return to site to:-

* Assess, through observation of each task, whether the procedure is being carried out properly and is still appropriate.
* Check if any problems have arisen and whether handler is comfortable with procedures.
* The school should also contact Lansbury Bridge School Inclusion Co-ordinator if at any time:-

1. They have any concerns about handling procedures
2. There are any significant changes in the child.
3. There are any significant changes in the tasks.
4. There are any changes in staffing/environment.

* A further review will be carried out at 6/12 months, or earlier if staff encounter changes to the child or environment, by arrangement between the Headteacher and Lansbury Bridge Inclusion Co-ordinator. This session would also be used for a formal refresher training session.

**5.0 Lifting Equipment**

5.1 It is the school's responsibility to ensure that lifting equipment is serviced, inspected and maintained on an annual basis or more frequently, if this is advised by the equipment supplier. Advice on equipment service and inspection can be obtained from the Corporate Safety Team on Tel (01744) 671722/3236.

5.2 All lifting equipment and lifting accessories, such as slings, shall be inspected for obvious damage prior to use by staff.

5.3 Where there are concerns about equipment, is shall be removed from use pending inspection by a competent person and/or the supplier.

**6.0 Accidents and Injuries**

6.1 Any injury, no matter how trivial involving a child or member of staff from a manual handling task shall be reported and recorded in accordance with the school accident reporting procedure as set out in the Health & Safety Corporate Procedure; Accident Reporting Procedure for Schools (CORP 002(E)). It is also important that near misses, i.e. incidents which did not result in injury, such as failure of equipment, are also reported.

6.2 St Helens Council has established a fast track physiotherapy referral system for employees who have sustained musculo-skeletal injuries arising from employment. The scheme is voluntary, but can secure rapid and cost free access to physiotherapy services. Any employee sustaining an injury has the opportunity to utilise this service via either the Head teacher or the Authority's Occupational Health Nurse Advisor who can be contacted on (01744) 677022.

**7.0 Record Keeping**

7.1 It shall be ensured that the school maintains the following information:-

1. A risk assessment for each child which encompasses all relevant manual handling tasks.
2. A record of staff who have completed manual handling training.
3. Site training provided by equipment suppliers and manufacturers
4. An inventory of handling equipment held by the school.
5. Records of maintenance, test and examination for all lifting equipment and lifting accessories.
6. A record of staff inductions.

**ASSESSMENT FOR POTENTIAL RISKS ARISING FROM LIFTING, ASSISTING OR MOVING CHILDREN**

Note: This Risk Assessment should be read in conjunction with the school's Policy Document covering lifting, assisting or moving.

**Name of Pupil:**

**Name of Person(s) completing Risk Assessment:**

**Date of Risk Assessment: Review Date:**

|  |  |
| --- | --- |
| **Tasks** | **Control Measures** |
|  |  |
|  |  |
|  |  |
|  |  |
| "*I have been fully consulted in respect of the contents of this assessment"* | **Signature of Handler(s):** |
| *"A moving and handling assessment has been carried out and the above control measures are required to comply with the 'Manual Handling Regulations Operations 1992"* | **Signature of Assessors:** |
| *"I have received this risk assessment and agree the Control Measures detailed"* | **Signature of Council Client Handling Assessor:** |

**Child's Name: School:**

|  |  |  |  |
| --- | --- | --- | --- |
| **PHYSIOLOGICAL HAZARDS** | **YES** | **NO** | **COMMENTS** |
| Could child's height cause a problem? |  |  |  |
| Could child's weight cause a problem? |  |  |  |
| Does the child have swollen/fixed/flaccid limbs? |  |  |  |
| Does the child have good state of feet? |  |  |  |
| Is skin condition good? |  |  |  |
| Is child easy to hold? |  |  |  |
| Is the child at risk of pressure sore? |  |  |  |
| Is the child in pain when moving? |  |  |  |
| Is the child's hearing satisfactory? |  |  |  |
| Is the child's sight satisfactory? |  |  |  |
| Is the child's speech satisfactory? |  |  |  |
| Does the child suffer from fits/involuntary movements? |  |  |  |
| Is the child stable/co-ordinated? |  |  |  |
| Are there 'attachments' to consider e.g. IVIs/catheters/oxygen cylinders etc? |  |  |  |
| Is the child wearing appropriate clothing and footwear? |  |  |  |

**Child's Name: School:**

|  |  |  |  |
| --- | --- | --- | --- |
| **PSYCHOLOGICAL HAZARDS** | **YES** | **NO** | **COMMENTS** |
| Is the child co-operative? |  |  |  |
| Is the child predictable? |  |  |  |
| Is the child able to follow instructions? |  |  |  |
| Is the child anxious? |  |  |  |
| Is the child prone to mood swings? |  |  |  |
| Does the child display challenging behaviour? |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **ENVIRONMENTAL HAZARDS** | **YES** | **NO** | **COMMENTS** |
| Is working space adequate? |  |  |  |
| Is lighting adequate? |  |  |  |
| Is the temperature comfortable? |  |  |  |
| Are there constraints on posture? |  |  |  |
| Is the bed/chair/changing table the correct height or capable of adjustment? |  |  |  |
| Are slip/trip/fall hazards present? |  |  |  |