

IT'S YOUR LIFE. IT'S YOUR CHOICE.



# Moving and Handling

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# Introduction

- Basic Back Care
- Legislation
- Mobility Gallery
- Risk Assessment

## Basic Back Care

- **33% or 1/3** of all Accidents reported to the HSE, happen whilst people are moving and handling.
- If we take Health and Social Care in isolation this figure rises to;- **54% >1/2**

# **The Four Principals of Safer Moving and Handling.**

- 1. Avoid**
- 2. Spine in line**
- 3. Mobile stable base**
- 4. Keep loads close**

# Legislation

## Manual Handling Operations Regulations

- **Employer's responsibilities:-**
  - Avoid all unnecessary Handling tasks.
  - Assess the risk.
  - Reduce the risk.
  - Provide adequate information.
  - Re assess.
- **Employees' responsibility;-**
  - Use the safe systems of work provided by your employer.

## Arjo Mobility Gallery, (A) Albert



- Albert is able to perform daily activities independently without assistance. It is possible that he will need special aids or appliances.  
As a rule there is no risk of physically overloading the carer.  
Albert requires careful monitoring.
- **Characteristics**
  - Ambulatory, but may use a cane for support
  - Independent, can clean and dress himself
  - Can tire quickly
  - Stimulation of abilities is very important

## Arjo Mobility Gallery, (B) Barbara



- Barbara is partly capable of performing daily activities independently.  
The assistance she requires is not physically demanding for the carer.  
It may consist of verbal support, feedback or indications, but light physical assistance is also possible, this can be given in combination with smaller aids or adaptations in the environment (walking aids, grips and handles).  
Barbara's remaining capacity should be stimulated.
- **Characteristics**
  - Uses walking frame or similar
  - Can support herself to some degree
  - Dependent on carer who is present in demanding situations
  - Not physically demanding for carer
  - Stimulation of remaining abilities (e.g. ambulation) is very important

## Arjo Mobility Gallery, (C) Carl



- Carl is not capable of performing daily activities without assistance, but is able to contribute to the action or perform part of the action independently. The assistance would, if given without special precautions, lead to the risk of physically overloading the carer. It will be necessary to use equipment that will reduce the risk to the carer to safe levels. Carl is able to actively contribute to the movement and it is important for him to maintain or improve this capacity. This may involve transfers using a standing and raising aid. It is important to stimulate remaining capacity and slow down deterioration of mobility.
- **Characteristics**
  - Sits in wheelchair
  - Is able to partially bear weight on at least one leg
  - Has some trunk stability
  - Dependent on carer in most situations
  - Physically demanding for carer
  - Stimulation of remaining abilities is very important



## Arjo Mobility Gallery, (D) Doris



- Doris is not capable of performing daily activities independently or to contribute to this actively in any substantial or reliable way. The assistance needed will, without special precautions, result in a risk of physically overloading the carer. It is necessary to use equipment that eliminates this risk. In spite of this it remains important to activate Doris as much as possible. The assistance provided is likely to involve a hoist and sling. The prevention of the risks associated with immobility, e.g. good skin care, are important as is slowing down the deterioration of her mobility.

- **Characteristics**

- Sits in wheelchair
- No capacity to support herself at all
- Cannot stand unsupported and is not able to bear weight, not even partially
- Dependent on carer in most situations
- Physically demanding for carer
- Stimulation of remaining abilities is very important

## Arjo Mobility Gallery, (E) Emma



- Emma is not capable of performing daily activities independently or contributing to them actively. The assistance in this case will, without special precautions, result in a risk of physically overloading the carer. It is necessary to use equipment that eliminates this risk. In Emma's case it is no longer considered important to stimulate her to contribute to the movement and become active. In some cases, such as people in the terminal stages of cancer or Alzheimer's dementia, this active contribution may even be undesirable. Promoting or stimulating mobility and activating her are no longer goals of the care plan. Providing optimum care and/or prevention of the complications of immobility, e.g. good skin care, are given priority. Transfers will in this case be performed with a hoist and sling. The aim is to avoid complications caused by long-term confinement to bed and make her as comfortable as possible.

### **Characteristics**

- Passive resident
- Might be almost completely bedridden
- Often stiff, contracted joints
- Totally dependent
- Physically demanding for carer
- Stimulation and activation is not a primary goal

# Moving and Handling Risk Assessment

- Moving and Handling procedure,
- Slips and Falls procedure,
- Moving and Handling Risk Assessment form,
- Guidance notes