**Staff back injuries and manual handling [QSI Refs: XR-204, XR-403]**

**Descriptor:**

A significant number of health service staff experience back problems pain or injuries during the course of their employment.

**Background:**

This audit is worth carrying out because a significant number of health service staff experience back pain or injury during the course of their employment as a direct consequence of patient handling.Poor manual handling technique may result in injury to oneself or other staff, absence from work and considerable financial consequences for individual staff members and for the employer. Risk management arrangements in this area should include risk assessments, the provision of adequate training at induction and regular updates for all staff, as well as ensuring that appropriate equipment is available to assist with the moving of patients in a proper and safe manner.

## The Cycle

**The standard:**

1. All staff members, including medical staff, involved in moving patients should undergo manual handling training, with a training update carried out regularly as stipulated by local Trust policy.

2. Handling techniques should accord with the Trust’s written policy. The policy should include advice for the manual handling of bariatric patients.

3. Risk assessments have been performed in all relevant areas of the department.

**Target:**

1. 100%

2. 100%

3. 100%

## Assess local practice

**Indicators:**

1. Percentage of staff members who have attended manual handling training and are up to date with manual handling mandatory training.

2. Percentage of patient handling episodes in which the technique used conforms to the Trust’s written policy.

3. Percentage of appropriate risk assessments have been undertaken in the radiology department

**Data items to be collected:**

1. Records of attendance at training and updates in mandatory training record.

2. Random observation of ten patient handling episodes in different area of the radiology department.

3. Documentation of risk assessments for each area.

**Suggested number:**

1. All staff members.

2. Ten randomly chosen lifting/handling episodes in the department observed by the departmental manual handling representative using a scoring system.

3. All relevant areas in Radiology Department

**Suggestions for change if target not met:**

Create and implement a departmental policy on patient manual handling including bariatric patients. This will be based on Trust policy.

Perform risk assessments. This may indicate the need for purchase of approved movement of patients and transfer aids.

Increase the number of available health care assistant staff who are trained to assist with lifting and bed transfers.

Implement a training programme with advice from the Trust manual handling co-ordinator.

Repeat date for commencing the next audit (following change): six months.

Identify departmental manual handling representative responsible for introducing change.

**Resources:**

Manual handling representative.

Approximately four hours to check departmental records, and two hours for the manual handling representative to observe and score lifting technique.

Time needed will depend on department size.

**References:**

1. Getting to grips with manual handling : a short guide. (2012). [ebook] Health and Safety Executive (HSE). Available at: <http://www.hse.gov.uk/pubns/indg143.pdf> [Accessed 8 Jan. 2018].
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4. Cowell R, Shuttleworth A. Equipment for moving and lifting patients. Prof Nurse 1998; 14: 123-30.
5. Samaei, S., Mostafaee, M., Jafarpoor, H. and Hosseinabadi, M. (2017). Effects of patient-handling and individual factors on the prevalence of low back pain among nursing personnel. Work, 56(4), pp.551-561.
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**Editor's comments:**

The risk to staff and patients from poor technique in manual handling is often underestimated. In one NHS Trust the legal costs incurred from staff claims for injury during one year exceeded the legal costs of patient-related litigation. Correct patient handling is such an important skill that it is well worth including in the annual audit programme. An audit of manual handling incidents perhaps every 3 months will help to alert to necessary changes in practice. This would not be onerous, and would ensure that all members of staff were protecting their own health as well as protecting the wider interests of the Trust.

**Submitted by:**

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