ANGUS
Health & Social Care
Partnership

People Manual Handling – Position Statement

Angus Health and Social Care Partnership

Version Number:	**1.1**	**Owner:**	Allison Taylor
Issue Date:	February 2025	**Review Date:**	February 2026

Version History

Version	Issue Date	Description	Author
1.1	February 2025	Page 10 – Personal Assistants Addition to sentence The direct payment recipient can access people manual handling training, on behalf of their personal assistant(s) through Organisational Development where capacity allows; however, they would need to meet any costs associated with this from their personal budget.	P Reid

Introduction

This position statement is for all social care staff employed either by the local authority or an externally commissioned provider delivering manual handling in a person's home or in a building-based service (for example, care home, day care, supported accommodation). It is also for unpaid carers and personal assistants employed directly by families, for example, through a direct payment.

The principles of this position statement should also be adhered to by NHS Tayside staff in line with their own policy and operational guidance.

Summary and Purpose of this Position Statement

The purpose of this paper is to set out the minimum standards in relation to the manual handling of people which is expected by Angus Health and Social Care Partnership (AHSCP), and which is in line with the Angus Care Model. Services are also expected to meet other relevant policy and guidance in relation to manual handling. The paper will also outline the standards for unpaid carers and personal assistants.

Please refer to the **Glossary of Terms** on page 13 which provides definitions and **Legislation** on page 15 which references key legislation which is used throughout this Position Statement.

AHSCP need assurance that all **Services** involved in people manual handling are:

- complying with the Scottish Manual Handling Passport Scheme (SMHPS) 2014 to ensure conformity in service delivery for practical and theory
- undertaking individual assessments to determine the number of carers required and will be flexible in how packages of care are delivered. This could include care by one person
- eliminating the practice of unsafe lifting, ie, 'controversial handling'
- delivering safe manual handling practice in line with policy and guidance
- receiving training during induction and ongoing refresher training to maintain knowledge, skills and confidence
- working together effectively and appointing a lead Service where there are more than one involved with an individual
- reporting and investigating any manual handling incidents

AHSCP need assurance that **unpaid carers and personal assistants** involved in people manual handling are:

- competent in undertaking the manual handling tasks asked of them
- eliminating the practice of unsafe lifting, ie, 'controversial handling'

- follow manual handling plans and risk assessments to ensure safe manual handling practice

- reporting any manual handling concerns to the caseholder/duty worker

It is important that people receiving services which involve manual handling have a positive experience.

Service Standards

To ensure we are delivering high levels of care the following Service Standards are in place:

- ***Competence***
  Individuals undertaking manual handling are competent to do so. Employers have suitable and sufficient training and systems to identify specific learning needs of employees, ensure employees complete modules contained within the SMHPS Scheme, that employees are up to date with their knowledge and that training activity is recorded and kept up to date. Employers must ensure that employees are assessed as competent and confident in manual handling prior to working with people who use our services.

- ***Person-Centred***
  People are supported to maximise their aspirations and potential and in doing so optimise their independence and life choices.

- ***Safety***
  Eliminate avoidable injury or harm to people and employees when undertaking manual handling. Employers have appropriate manual handling documentation that meets the minimum criteria identified in **Section 3C** of the SMHPS Scheme.

- ***Quality***
  It is important that Service Standards and the SMHPS are adhered to and that there are systems in place to audit, monitor and review manual handling arrangements, ethos of continuous improvement and customer satisfaction levels are high. AHSCP recognise that Services can adhere to the SMHPS without being registered to the scheme, however AHSCP encourages all Services involved with manual handling to register with the SMHPS to ensure ongoing compliance with the scheme.

- ***Effective***
  Documented management arrangements are in place to adequately control the risks from manual handling activities and there is management commitment and support to adhere to the manual handling position statement in Angus.

Delivery of Care Methods

One of the key challenges facing adult social care in Angus is the availability of social care packages. The culture around manual handling has typically been that this must be by two people, irrespective of the assessment or equipment in place. Requesting double up care packages as the default four times a day when a hoist is required has a major cost implication and within the current context of an increasing number of service users and limited financial and staff resources, it is more important than ever that we challenge and fully understand our decision-making process. In addition to this, our building-based Services are also reporting similar challenges in relation to staff resources and finances.

In the community, there is a steady requirement for double up care packages due to increasing complexity of needs of individuals supported to live at home and we want to ensure that people get the right level of care they need and that carers supporting them are safe to do so. We also need to create flexibility within our approach so that we are able to support people getting out of hospital in a timely manner as well as supporting those in the community and preventing people having to have an unnecessary care admission due to lack of available services. AHSCP must ensure that all Services involved with people manual handling have accurate knowledge on equipment and manual handling techniques and are open to being flexible in their approach to how care can be delivered.

AHSCP are of the view that the provision of any manual handling must be underpinned by an assessment that outlines how care will be delivered for individuals. This therefore means that manual handling can be delivered by one person or multiple people.

AHSCP are aware that there are various terms that can describe manual handling and the delivery of this by one person. These include:

- Single Handed Care
- Risk Assessed Care
- Care by One Person
- Prescribing Proportionate Care

AHSCP will therefore refer to people manual handling practice as **risk assessed care** as this takes into account the variances in how care can be delivered without emphasising that care by one person is a new concept.

AHSCP recognise the benefits and increased flexibility that arises from having care delivered by one person however fully understands that this will not support everyone.

There are some lifts and handling techniques that are recognised as dangerous. Dangerous lifts cause injuries to staff and people/ clients. These lifts are unsafe even if the weight of the person/ client is within the numerical guidelines, which are given in the Manual Handling Operations Regulations 1992 (as amended 2002).

There are 5 main lifts in this group, and everyone involved in the manual handling of people must be aware of them, as they have been considered unacceptable for many years. These are as follows:

1. The drag lift
2. The orthodox lift
3. Lifting with the patient's arm around the neck
4. Australian lift
5. Lifting from the front with the patient's arm around the neck

(The Guide to the Handling of Patients, Revised 6th Edition)

These "controversial lifts" should not be used in any circumstances. Employees should neither participate in such unsafe practices nor condone them, by failing to report unsafe practice to their line manager.

Collaborative Working

It is recognised that people prefer to have continuity of care by one provider, however there are situations where Services may have to be delivered by more than one provider. This may be due to capacity issues, decline in service user's health etc. AHSCP understand the challenges faced by providers of working jointly to deliver care but remain committed to identifying ways of overcoming any issues.

AHSCP have developed Guidance on Joint Delivery of Care at Home Services which acknowledges that the main provider for the person will take the **lead role** if assistance is required from another provider. The main provider should ensure they are proactively informing the allocated caseholder should this way of working arise so decisions can be made on whether any longer-term changes are required to the person's care package.

AHSCP expect all providers to adhere to the consistent approach for manual handling in Angus.

AHSCP expects manual handling Plans and Risk Assessment documentation to be accessible by the providers involved in the delivery of the person's care package.

Equipment

AHSCP have a service level agreement with Dundee Council, Dundee Health and Social Care Partnership and NHS Tayside to support the delivery, collection and maintenance of equipment loaned to people in their own home in Angus.

Equipment can be delivered to enable people to be as safe and independent as possible within their home or it can also be provided to support people who are delivering care. Occupational Therapy and Nursing staff are responsible for working within the agreed criteria for the provision of equipment and for reviewing the suitability of any provision.

AHSCP are committed to ensuring there is a range of equipment available to support the delivery of safe manual handling. AHSCP will continue to work jointly with colleagues in Dundee to review the need for new equipment items to be considered as stock items.

AHSCP will ensure that full assessments are undertaken in relation to manual handling and the provision of equipment.

Equipment provision in Care Homes is informed by the COSLA Protocol for Provision of Equipment in Care Homes.

AHSCP expect Services to work together and recognise the need for any additional training on specific items of equipment.

Glide sheets will be provided by AHSCP following an assessment of need by an occupational therapist or a nurse from AHSCP.

AHSCP are committed to ensuring that Services providing equipment items and advising on safe use and manual handling practices are competent to do so.

AHSCP have reassurance from The Dundee and Angus Equipment Service that all items of equipment loaned by them in Angus that require servicing and maintenance will be correctly managed and thus ensuring that AHSCP are compliant with Health and Safety legislation including the Provision and Use of Work Equipment Regulations 1998 (PUWER) and the Lifting Operations and Lifting Equipment Regulations 1998 (LOLER).

The Dundee and Angus Equipment Service will continue to provide Out of Hours Cover for Serviceable Equipment and will maintain written records relating to servicing information and have access to historical information relating to individual items (where possible).

Documentation

AHSCP expect internal Services to use the approved risk assessment and manual handling plan documents as these are compliant with the manual handling passport scheme. The risk assessment and manual handling plan can be viewed on the M&H website.

AHSCP recognise partners will have their own risk assessment and manual handling plan documentation. Where possible, information is to be shared to support the delivery of care.

Manual Handling Assessment

There may be occasions where AHSCP and the provider's assessments are different. For example, AHSCP has assessed as one carer, and the provider has assessed that 2 carers are required. A meeting will be arranged with the provider and the caseholder/OT to understand the rationale for the outcome of the respective assessments and to identify if any training or additional/alternative equipment is required. The service user and their family/POA will be kept updated on the outcome of the meeting by the caseholder/OT.

Website

AHSCP have developed manual handling web pages which are accessible via the following link: https://manualhandling.angushscp.scot/

The pages contain information, guidance and videos which are designed to support anyone involved with or receiving manual handling.

Training

To support the delivery of care in different ways, AHSCP want to ensure that everyone involved with manual handling are competent and confident in their role. The SMHPS (SMHPS) is the recognised framework for Manual Handling and all Services operating in Angus must ensure compliance with this and adherence to the training standards.

Table 1

Module A	Requirements of the legislation	E-Learning/ Theory
Module B	Inanimate Load Handling	E-Learning / Theory
Module C	Chair Moves which includes sit to stand, walking and the use of wheelchairs	Practical
Module D	Bed Moves which includes divan beds, hospital beds, changing tables or plinths	Practical
Module E	The use of hoists which includes stand aid (active), full body (passive) and tracking hoists	Practical
Module G	Handling babies and young children under 8 Please note - Module G only requires to be undertaken where Services are delivering care to babies and young children under 8.	Practical
(Please note Angus do not have a need to train Module F – Lateral Transfers which is referred to in the SMHPS 2014).		

AHSCP is developing a Memorandum of Understanding with Angus Council which will detail AHSCP's requirement for support and training in relation to manual handling.

AHSCP recognise that manual handling training can be covered by e-learning / theory modules (Module A and B) and practical training for the other modules.

AHSCP are supportive of Services working together to ensure the timely access to training. Angus Council Organisational Development Team can deliver training, at a cost, and where capacity allows, to external providers. The training can also be delivered outwith Angus Council premises. Attending such training would allow attendees access to e-learning modules and training materials as well as practical training sessions. External providers may also be able to support other providers with training which is in line with the SMHPS.

Internal / *External Care Providers

AHSCP recognise that all Services will have their own people manual handling policies and we will request copies as part of our monitoring process. AHSCP also expect Services to monitor and evidence quality checks which have been completed in relation to the delivery of training by their trainers and the manual handling practice of employees.

All employees who undertake people manual handling as part of their role must be signed off as completing the theory and practical modules before undertaking any people manual handling activities which may pose a risk to them or others.

Providers must also ensure that all employees receive any additional training which may be required to ensure their employees are competent and confident in undertaking all people manual handling activities expected of them e.g. care by one or more carers (i.e. risk assessed care).

Employees involved with people manual handling must refresh their training annually (both e-learning/theory and practical components).

**External Care Providers – includes Care Homes, Care at Home, Day Care, Supported Accommodation and any other commissioned Service where manual handling is undertaken.*

Unpaid Carers

AHSCP want unpaid carers to feel confident when they are involved with people manual handling.

Unpaid carers may deliver sole care to the person, or they may support the person in addition to a provider. Unpaid carers must be confident in the tasks they will need to undertake. AHSCP recognise that unpaid carers may not always need to complete the SMHPS training (*refer to Table 1 on page 8*).

AHSCP will support unpaid carers with instruction and demonstration of prescribed equipment. Where further training needs are identified the cost of the training will be met by AHSCP.

Unpaid carers will be given instruction and a demonstration on the safe use of equipment where this is required. This will cover the basic operation of equipment as well as any required manual handling techniques to ensure the person and themselves are safe.

Where equipment is required, the demonstration will be delivered by the prescriber of the equipment, for example an OT. The prescriber will work with unpaid carers and assess their capability to undertake safe people manual handling practice by observation. AHSCP expect prescribers of equipment to make informed decisions on the suitability of unpaid carers to undertake people manual handling practice. Where this is deemed safe, prescribers will outline safe manual handling practice in the manual handling plan/risk assessment. Where it is deemed unsafe for unpaid carers

to undertake people manual handling, they will be informed of the reasons for this and will be supported to consider other options available.

AHSCP would expect unpaid carers to undertake the SMHPS training if the level of care they are providing is considered complex or they are to work alongside a carer who is either employed by Angus Council, NHS Tayside or an external provider.

The decision on whether unpaid carers require training will lie with the prescriber of equipment, however care management or the unpaid carer themselves may identify a need for people manual handling training.

Unpaid carers can access people manual handling training through Organisational Development where capacity allows by emailing Alwayslearning@angus.gov.uk; and AHSCP will meet any costs associated with this. Please note that a minimum of 3 people is needed for the course to take place.

If Organisational Development do not have capacity, alternative training may be identified for unpaid carers from another training provider and AHSCP will meet any costs associated with this.

Where unpaid carers are seeking advice on a piece of equipment, they can contact the prescriber.

AHSCP expect unpaid carers to be included in the person's reviews to ensure they have an opportunity to raise any manual handling concerns.

Personal Assistants

Personal assistants are employed by people who have chosen SDS Option 1 (Direct Payment).

AHSCP want to support people who employ personal assistants to understand manual handling practices to enable them to recruit the right person to meet their health and wellbeing needs.

AHSCP expect personal assistants to undertake manual handling training in line with the SMHPS, as well as refresher training (at least annually both e-learning/theory and practical components).

The direct payment recipient can access people manual handling training, on behalf of their personal assistant(s) through Organisational Development where capacity allows; however, they would need to meet any costs associated with this from their personal budget.

AHSCP expect personal assistants to be included in the person's reviews to ensure they have an opportunity to raise any manual handling concerns.

AHSCP may request evidence of personal assistants' undertaking of manual handling training.

Incident Reporting

All Services must record and report any manual handling incidents. In addition to this, commissioned services must also report any incidents to AHSCP.

The allocated caseholder/ Service should be informed of any manual handling incidents / near misses / accidents on the day of the incident or the day it becomes known to the Service. In addition to this a written report must be submitted within 24 days to the caseholder/ Service. The report should highlight any areas of concern, controls put in place to mitigate any risks and learning arising from the incident (if applicable).

Monitoring

AHSCP recognise that all Services involved with manual handling have a shared responsibility to ensure people's experiences are positive and that there is compliance with the SMHPS Scheme and the content of this position statement.

Any concerns arising, should be acted upon by caseholders/ Services and relevant others should be included to resolve any matters. Communication and joint working are key to ensuring high standards of care are being delivered in Angus.

Governance

AHSCP has a Senior Planning Officer to oversee care at home services. In addition to this AHSCP also work with the Procurement & Commissioning Team to ensure provider compliance.

Any provider concerns about specific people in relation to manual handling should be raised with the allocated caseholder. If these issues remain unresolved or highlight wider concerns the allocated caseholder and/or provider should seek guidance from their line manager. It may be necessary to organise a meeting to address such issues and involvement of the Senior Planning Officer/Contracts Officer may be required.

Service Leads/Heads of Service will be kept fully updated on any Service issues relating to manual handling.

AHSCP has a provider quality screening process which reviews feedback from AHSCP staff who are responsible for organising packages of care and recording information on Eclipse. Any direct communication is actioned by the Senior Planning Officer / other as required.

The AHSCP Health and Safety group meets regularly where Services can report and review any Health and safety issues that have arisen, and this would include any issues from manual handling incidents.

Key Contacts

Angus Health and Social Care Partnership	Allison Taylor, Team Manager (OT) TaylorAJ@angus.gov.uk Pauline Reid, Senior Planning Officer ReidPJ@angus.gov.uk
Angus Council	Johanna Hutcheon Team Leader (Procurement & Commissioning Team) HutcheonJ@angus.gov.uk
First Contact Occupational Therapy Service	Tel: (01241) 465274 Email: FirstContactOT@angus.gov.uk
Organisational Development – Angus Council	Pierre Bernard Organisational Development Facilitator BernardP@angus.gov.uk
Dundee and Angus Equipment Service	Tel: (01382) 307631 Email: elms.stock@dundeecity.gov.uk Outwith office hours (5pm-8.30am Monday to Sunday): Tel: the Dundee Health and Social Care Partnership Social Care Response Team on (01382) 432260.

Glossary of Terms

Caseholder
The person (case manager, home care assessor, OT) who is appointed by the AHSCP to assess and review the needs of the service user and respond to any queries arising in relation to the services they receive.

Commissioned Services
Care providers who deliver commissioned services in Angus – this includes Care Homes, Supported Accommodation, Care at Home (SDS Option 2 and 3 providers) and Day Care.

Demonstration
The prescriber of equipment will ensure that all people involved in the use of equipment will be shown how to use it. The demonstration will cover how to use and operate the equipment, any emergency features on the equipment as well as safe manual handling practices, for example, for a standaid the prescriber will go through the handset controls, the emergency function and how to fit slings. The demonstration may also include the safe manual handling techniques of how to fit and remove a sling with the person.

Duty Worker
The person who acts as the main contact for the locality care management team where there is no allocated caseholder/caseholder is unavailable and considers, and acts upon, any requests received

Employee
Anyone working under the direction of an employer of multiple staff

Internal Care Provider
Angus Council Enablement and Response Teams

Lead Role
The provider who delivers the majority of the person's care.

Manual Handling
The Manual Handling Operations Regulations 1992 (as amended) defines manual handling as:

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

The load can be a person or an inanimate object. The regulations provide a general framework in relation to moving and handling and require the following:

" to avoid hazardous moving and handling operations so far as reasonably practicable"

and where it is not reasonably practicable to:

"assess any hazardous manual handling operations that cannot be avoided and reduce the risk of injury so far as is reasonably practicable".

Person
The person being moved ie babies, children, young adults, adults or older people.

Personal Assistant
Anyone who is employed by the **person/** or family member through a SDS Option 1 (Direct Payment) to support the **person**.

Prescriber
Anyone who has assessed the service user as requiring a piece of equipment. This can be an occupational therapist, physiotherapist or nurse.

Risk Assessed Care
This term accounts for the variances in how care can be delivered without emphasising that care by one person is a new concept. All people manual handling is underpinned by Assessment which determines the number of carers required.

Services
Anyone involved with people manual handling who are employed by Angus Council or NHS Tayside and work for Angus Health and Social Care Partnership, or external providers who are delivering services in Angus

The SMHPS Scheme (SMHPS) 2014
The SMHPS Scheme 2014 covers all manual handling activities in Health Boards and Local Authorities.

It clarifies the minimum requirements for manual handling education arrangements across these sectors and by doing so, promotes national consistency. It provides a platform for achieving our integration strategy goals for adult health and social care.

A revision will be made to the SMHPS to include a module on Children (Module G). In Angus, Module F Lateral Transfers is not taught as part of the training programme.

Unpaid Carer
You are a `Carer' if you provide care for another person, but not if that is solely due to age (under 18 years), or if you are caring because you have a contract or voluntary role.

Legislation

- Health and Safety at Work Act (1974)- requires employers to provide information, instruction, training and supervision to employees

- Management of Health and Safety at Work Regulations (1999)- management arrangements, training on recruitment, when risks change and repeated as appropriate

- Lifting Operations and Lifting Equipment Regulations (1998) (LOLER)- lifts planned/executed safely; supervised by competent people; systems for thorough examination and inspection of lifting equipment

- Manual Handling Operations Regulations (1992) as amended 2002 - unavoidable hazardous manual handling (MH) operations assessed; risk of injury reduced; underlying risks recognised by employees; tasks, individual capability, load, environment, safe working systems and use of equipment considered

- Provision and Use of Work Equipment Regulations (1998) (PUWER) - employees trained in use, risks and precautions of work equipment