



Public – To be published on the Trust external website

Moving and Handling of People Procedure

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Status: Approved

Document type: Procedure

Overarching policy: Health and Safety Policy

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1 Introduction

The moving and handling of people is a regular task in our Trust, which if not done safely, can cause serious injury to service users and staff.

Poor moving and handling practice can lead to:

- back pain and musculoskeletal disorders, which can lead to inability to work
- moving and handling accidents – which can injure both the person being moved and the employee
- discomfort and a lack of dignity for the person being moved

Trust staff must take action to prevent or minimise the risk of injury. This procedure concentrates on reducing the risk from people handling.

This procedure links to [Our Journey To Change \(OJTC\)](#) for both patients and staff. By adhering to this procedure we will improve patient safety and patient dignity. We also improve experience for our colleagues by creating a safer workplace fit for purpose.

2 Purpose

Following this procedure will help the Trust to:-

- Ensure all in patients requiring assistance to move safely from one position to another will have a documented Patient Moving and Handling Risk Assessment in place. For patients in the community this may be initiated by external agencies and documented on their systems. Where TEWV staff have initiated patient moving & handling risk assessments for patients in the community they must follow this TEWV procedure.
- Provide a safe and healthy working environment for all its employees and others affected by their undertakings as required under the Health and Safety at Work Act 1974.
- Minimise musculoskeletal disorders to staff caused by manual handling tasks and comply with the requirements of the Manual Handling Operations Regulations 1992 (as amended 2004).



The aim of the procedure is to avoid physical lifting of people in all but exceptional situations. Hoists, standing aids, sliding aids and other specific moving and handling equipment should be used.



It is the staff members responsibility to ensure that mandatory checks are performed on all lifting equipment to ensure their safety before they are used as stated in the Medical Devices Policy.

3 Who this procedure applies to

This procedure is relevant to all employees within TEWV NHS FT who use Moving & Handling of People as part of their roles and responsibilities.

This procedure aligns to the Trust values, so that staff and service users affected are treated with compassion, respect, responsibility.

4 Related documents

- ✓ This procedure describes what you need to do to implement the Moving & Handling of People section of the [Health and Safety Policy](#).



The [Health and Safety Policy](#) defines roles and responsibilities relevant to procedures described in this document.

TEWV [Medical Devices Policy](#)

5 Patient Moving & Handling

5.1 New in-patients

All new In-patients who require assistance to move safely from one position to another must have a Patient Moving and Handling Risk Assessment initiated and documented on the trust approved electronic patient record where reasonably practicable within six hours of admission. This is to avoid patients being left in bed unnecessarily for long periods during the day. A personal Emergency Evacuation Plan (PEEP) will also need to be considered.

5.2 Patients in the community

Patients in the community may access staff from a range of services.

- The level of input required will be determined by individual patient needs. Moving and handling of people assessments and subsequent interventions undertaken by TEWV staff must be fully documented following the guidance in this procedure and recorded on the trust approved electronic patient record.
- On discharge the moving & handling risk assessment is handed over to the patient, their family or carers to implement and review with the advice to refer back if needs change and or they require specialist support.

- Where patients reside in a staffed home the staff in the home are responsible for developing and reviewing any moving & handling risk assessments. TEWV staff may or may not contribute to these.

5.3 Individual moving and handling needs

Where individual moving and handling needs have been identified, each patient must be individually assessed taking into account

- their preferences,
- the preferences and abilities of family and carers supporting them
- their individual needs, capabilities and circumstances,
- their rehabilitation and development needs

All with consideration to the importance of patient, carer and staff safety.

5.4 Problem solving approach

A problem-solving approach will be adopted which considers the use of a variety of handling techniques and equipment to reduce the risk of injury. Patient independence will be encouraged at all times.

5.5 Staff capabilities

Consider the capabilities of staff within the assessment – It is the responsibility of each individual to report their own health, fitness and capabilities in relation to moving and handling to their relevant manager/supervisor at the outset and subsequently if their circumstances change.

5.6 Review of risk assessment

Following assessment a Patient Moving and Handling Risk Assessment must be produced for the individual which must be reviewed

- o within a year,
- o when the patient's condition and/or moving & handling needs change
- o at the point of pre-discharge if this is before the yearly review is due.

5.6.1 Updates following review

Following any review the Patient Moving and Handling Risk Assessment document must be updated with all new advice, actions or recommendations fully recorded. In the event that there is no change made to the Risk Assessment document a new date stamp needs to be added along with a new review date. This must then be made the primary patient moving and handling record.

5.7 Availability of risk assessments

Assessments must be available to all staff undertaking moving & handling of patients. This includes current and new staff, bank workers, agency staff and students.

5.8 What must be included in risk assessment

The Patient Moving and Handling Risk Assessment must have all relevant information included taking into consideration

- the number of staff required (single handed care or multiples of staff)
- the time needed
- specific equipment
- specific techniques
- specific communication.

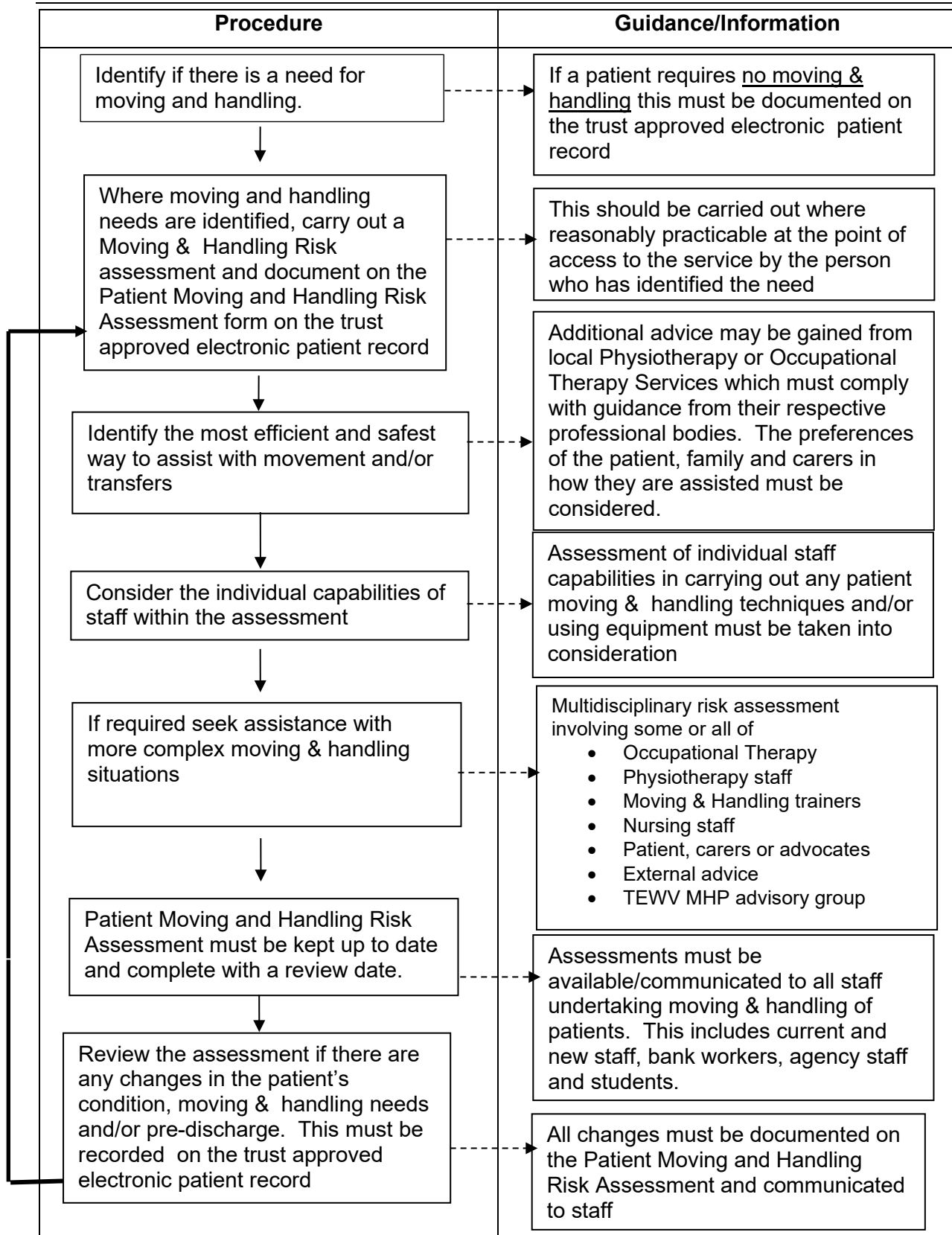
5.9 Incidents and near misses

Any incidences or near miss incidences that did or could have resulted in patient or staff injury as a result of moving and handling a patient should be reported through the trust incident reporting system as soon after the event as possible. Some incidents may also be RIDDOR reportable.

5.10 Complex moving and handling assessments

Complex moving and handling assessments are best managed via a multidisciplinary approach utilising the expert skills of a range of practitioners from Occupational Therapy, Physiotherapy, Moving & Handling trainers, some expert nursing staff, the trust moving and handling people advisory group and including patients, their carers and or advocates. On occasion it may also be necessary to seek advice from external experts for example from the National Back Exchange.

6 Flow Chart



7 Definitions

Term	Definition
Manual Handling/Moving & Handling	These terms are used interchangeably. The Transporting of a load (including lifting, putting down, pushing, pulling, carrying or moving) by hand or by bodily force or the supporting of a load in a static posture. The load may be either animate (person or animal) or inanimate (box or trolley). Manual Handling Operations Regulations 1992, (as amended 2004).
Ergonomic Approach	Practical and scientific approach of people in relation to their working environment and concerned with the design of safe systems of work and fitting handling tasks to people to make them safer and easier to perform.
Patient lifting equipment	Hoists, Stand Aids, Slings, Flat Lifting Equipment, Lifting Slings, Emergency Lifting Sheets.
Patient non-lifting equipment	Sliding sheets and gloves, handling belt, patient turners, transfer boards
PEEP	A personal emergency evacuation plan for individuals who cannot evacuate a building independently during an emergency such as a fire.
RIDDOR	The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995.
National Back Exchange (NBE)	A charitable organisation that develops and promotes standards for moving & handling people and inanimate loads in the UK
Moving & Handling of People (MHP) Advisory Group	A group of TEWV multidisciplinary professionals with specialist knowledge around moving & handling who are members of the national back exchange

8 How this procedure will be implemented

- This procedure will be published on the Trust's intranet and external website.
- Line managers will disseminate this procedure to all Trust employees through a line management briefing.

8.1 Training needs analysis

Staff/Professional Group	Type of Training	Duration	Frequency of Training
All staff who use moving & handling of patients – All nursing, OT & physio staff and their support staff on older persons and learning disabilities wards specifically	TEWV Manual Handling of People Training	1 day face to face AND E Learning	Bi annual Annually
All staff who advise on moving & handling of patients- OT and Physio staff in the community and in patients	TEWV Manual Handling of People Training AND External Specialist/Bespoke Moving & Handling training	1 day face to face AND E Learning 2 days face to face	Bi annual Annual Bi annual
Moving & handling trainers	External train the trainers training	6 days 1 day	Initial Annual update

9 How the implementation of this procedure will be monitored

Number	Auditable Standard/Key Performance Indicators	Frequency/Method/Person Responsible	Where results and any Associate Action Plan will be reported to, implemented and monitored; (this will usually be via the relevant Governance Group).
1	85% of staff identified as requiring Manual Handling of People training have received the training within the last 2 yrs	Monthly review through IIC- Education and Training – Workforce Development Lead	Board Integrated Performance Report
2	<p>The total number of moving & handling of people safety incidences reported</p> <ul style="list-style-type: none"> those that are RIDDOR reportable those that involve equipment failure 	Annual review of incidences – Health & Safety – Head of Health Safety & Security/ Head of Physiotherapy and policy author	Health & Safety Patient Safety Medical Devices Physical Health Group
3	The number of patient moving & handling risk assessments completed to the relevant standard and completed within last 12mths	Annual audit – Patient Moving & Handling Advisory group	Physical Health Group

10 References

[Moving and handling in health and social care - HSE](#) accessed 26.02.25

The Guide to the Handling of People, A Systems Approach 6th edition 2011

Health and Safety at Work Act 1974

The Management of Health and Safety at Work Regulations 2006

Manual Handling Operations Regulations 1992 (as amended 2004)

The Lifting Operations and Lifting Equipment Regulations 1998

The Provision and Use of Work Equipment Regulations 1998

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995.

11 Document control (external)

To be recorded on the policy register by Policy Coordinator

Required information type	Information
Date of approval	28 November 2025
Next review date	28 November 2028
This document replaces	HS-0001-012.v2.1 Moving and Handling of People procedure
This document was approved	<p>Allied Health Professions Plus Governance Group 30 October 2025</p> <p>Physical Health Group 03 November 2025</p> <p>Health, Safety, Security and Fire Group (virtual) 28 November 2025</p>
An equality analysis was completed on this policy on	16 October 2025 (ah)
Document type	Public
FOI Clause (Private documents only)	n/a

Change record

Version	Date	Amendment details	Status
1	Nov 2014	New procedure	Withdrawn
2	Jan 2018	<ul style="list-style-type: none"> added words 'moving and' pg2 Added 'Ensure that patients who do not require manual handling have this documented' Pg3 'specific moving and handling equipment' has replaced 'specialised equipment' pg3 Slips, trips and falls policy removed pg3 'Care first' removed pg4 and 5 Once the plan has been reviewed it should be clearly recorded in the locally agreed documentation system <u>and</u> the care plan itself either re-issued with "Review Completed and Date and signature" or can 	Withdrawn

		<p>be signed off by the reviewing healthcare professional has been replaced with - Following any review of the Patient Moving and Handling Risk Assessment it must be updated and all advice, actions or recommendations fully documented. This must then be made the primary patient moving and handling record pg4</p> <ul style="list-style-type: none"> • 'agency staff' has been added to point 7 on pg4 • Point 8 has been replaced with - The Patient Moving and Handling Risk Assessment must have all relevant information included taking into consideration the number of staff required (single handed care or multiples of staff), the time needed, specific equipment, techniques and communication pg4 • the words 'committee' replaced with 'group' pg9 • Update service specific risk assessments e.g. FACE, Samurai to show this has been completed - removed from pg5 point 2 in guidance. • 'agency staff' added to point 6 in guidance pg5 	
2	July 2020	Review date extended by 6 months	Withdrawn
2	July 2021	Review date extended to 30 Sept 2021	Withdrawn
2.1	13 Sept 2021	<p>Full review of document with minor wording changes</p> <ul style="list-style-type: none"> • Public – To be published on the Trust external website added to front page • 'risk assessment and handling plan' replaced with 'Patient moving and handling risk assessment' pg4,5,6 • 'on Paris' added to pg5 • 'reasonably practicable' added to pg5,6 • 'SSID' has been replaced with 'AZEUZ' pg5,6 • 'family and cares' has been added to pg5,6 • 'consideration' has been added to pg6 • 'specific' has been added to pg5 • '2006' added to pg8 • The word 'management' added to pg9 • Our Journey to Change text added • Transferred to new template 	To be withdrawn

v3	28 Nov 2025	<p>Full review of document</p> <ul style="list-style-type: none"> ○ Title page – Manual handling of people procedure changed to Moving & Handling of People Procedure ○ 2. Purpose reworded (main changes in italics) - Ensure all <i>in patients</i> requiring <i>assistance to move safely from one position to another</i> will have a documented Patient Moving and Handling Risk Assessment in place. Removed the need for all in patients to have a moving & handling risk assessment Added - <i>For patients in the community this may be initiated by external agencies and documented on their systems. Where TEWV staff have initiated patient moving & handling risk assessments for patients in the community they must follow this procedure.</i> ○ Pg 4 blue box – replace manual lifting with <i>physical lifting</i> ○ Throughout – ‘agreed documentation system i.e. PARIS & Azeus’ replaced with ‘<i>trust approved electronic patient record</i>’ ○ 5. Patient Moving & Handling – changed from bullet pointed list to numbered list ○ 5.1 – added <i>patients who require assistance to move safely from one position to another. Added This is to avoid patients being left in bed unnecessarily for long periods during the day.</i> ○ 5.2 – Reworded - <i>Patients in the communityand recorded on the trust approved electronic patient record.</i> <p>Added 2 new bullet points to 5.2</p> <ul style="list-style-type: none"> ○ <i>On discharge the moving and handling risk assessment is handed over to the patient, their family or carers to implement and review with the advice to refer back if needs change and or they require specialist support.</i> ○ <i>Where patients reside in a staffed home the staff in the home are responsible for developing and reviewing any moving & handling risk assessments. TEWV staff may or may not contribute to these.</i> ○ 5.3 Replaced Manual Handling needs with <i>Moving & Handling needs</i> Added <i>All with consideration to....</i> ○ 5.6 – Added 5.6.1 <i>Following any review the Patient Moving and Handling Risk Assessment must be updated with all new advice, actions or recommendations fully</i> 	Approved
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		<p><i>documented. In the event that there is no change made to the Risk Assessment a new date stamp needs to be added along with a new review date</i></p> <ul style="list-style-type: none"> ○ <u>5.8</u> – narrative bulleted ○ <u>5.9</u> – new addition covering incident reporting and RIDDOR ○ <u>5.10</u> – new addition covering seeking advice for complex moving & handling assessments ○ <u>6. Flow Chart</u> – reference to documentation systems changed <i>to trust approved electronic patient record</i>. Reference to back care advisory service for complex cases removed as this no longer exists replaced with <i>MDT risk assessment</i> ○ <u>7. Definitions</u> – <ul style="list-style-type: none"> ○ Added <i>transfer boards and patient turners</i> to patient non lifting equipment rather than naming specific brands of equipment ○ Added RIDDOR, National Back Exchange and TEWV Moving & Handling of people advisory group ○ <u>TNA revised</u> ○ <u>Audit revised</u> and put in new template <p>Summary of changes: following organisational restructure no longer have a back care advisory service and governance groups updated; electronic patient record and incident reporting systems change.</p>	
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Appendix 1 - Equality Impact Assessment Screening Form

Please note: The Equality Impact Assessment Policy and Equality Impact Assessment Guidance can be found on the policy pages of the intranet

Section 1	Scope
Name of service area/directorate/department	Therapies Directorate
Title	Moving & Handling of People Procedure
Type	Procedure/guidance*
Geographical area covered	Trustwide
Aims and objectives	To ensure the safety of service users and staff when service users require assistance to move.
Start date of Equality Analysis Screening	25 February 2025
End date of Equality Analysis Screening	16 October 2025

Section 2	Impacts
Who does the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?	Trust staff and patients
Will the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan impact negatively on any of the protected characteristic groups? Are there any Human Rights implications?	<ul style="list-style-type: none"> • Race (including Gypsy and Traveller) NO • Disability (includes physical, learning, mental health, sensory and medical disabilities) NO • Sex (Men and women) NO • Gender reassignment (Transgender and gender identity) NO • Sexual Orientation (Lesbian, Gay, Bisexual, Heterosexual, Pansexual and Asexual etc.) NO • Age (includes, young people, older people – people of all ages) NO

	<ul style="list-style-type: none"> • Religion or Belief (includes faith groups, atheism and philosophical beliefs) NO • Pregnancy and Maternity (includes pregnancy, women / people who are breastfeeding, women / people accessing perinatal services, women / people on maternity leave) NO • Marriage and Civil Partnership (includes opposite and same sex couples who are married or civil partners) NO • Armed Forces (includes serving armed forces personnel, reservists, veterans and their families) NO • Human Rights Implications NO (easy read human rights - Google Search)
Describe any negative impacts / Human Rights Implications	
Describe any positive impacts / Human Rights Implications	Wherever possible dependent upon available workforce with the relevant skills we can accommodate patient preferences about who assists them to move especially where there may be cultural sensitivities.

Section 3	Research and involvement
What sources of information have you considered? (e.g. legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.)	Moving and handling in health and social care - HSE accessed 26.02.25 The Guide to the Handling of People, A Systems Approach 6 th edition 2011 Health and Safety at Work Act 1974 The Management of Health and Safety at Work Regulations 2006 Manual Handling Operations Regulations 1992 (as amended 2004) The Lifting Operations and Lifting Equipment Regulations 1998 The Provision and Use of Work Equipment Regulations 1998 The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995.
Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the protected groups?	Trustwide consultation for major revision

If you answered Yes above, describe the engagement and involvement that has taken place	
If you answered No above, describe future plans that you may have to engage and involve people from different groups	

Section 4	Training needs
As part of this equality analysis have any training needs/service needs been identified?	No
Describe any training needs for Trust staff	
Describe any training needs for patients	
Describe any training needs for contractors or other outside agencies	

Check the information you have provided and ensure additional evidence can be provided if asked

Appendix 2 – Approval checklist

	Title of document being reviewed:	Yes/No/ Not applicable	Comments
1.	Title		
	Is the title clear and unambiguous?	yes	
	Is it clear whether the document is a guideline, policy, protocol or standard?	yes	
2.	Rationale		
	Are reasons for development of the document stated?	yes	Review and update required
3.	Development Process		
	Are people involved in the development identified?	N/A	
	Has relevant expertise has been sought/used?	N/A	
	Is there evidence of consultation with stakeholders and users?	N/A	
	Have any related documents or documents that are impacted by this change been identified and updated?		The new version will need to be added to the health and Safety Policy
4.	Content		
	Is the objective of the document clear?	yes	
	Is the target population clear and unambiguous?	yes	
	Are the intended outcomes described?	yes	
	Are the statements clear and unambiguous?	yes	
5.	Evidence Base		
	Is the type of evidence to support the document identified explicitly?	N/A	
	Are key references cited?	N/A	
	Are supporting documents referenced?	yes	
6.	Training		
	Have training needs been considered?	no	None required
	Are training needs included in the document?	no	None required
7.	Implementation and monitoring		

	Title of document being reviewed:	Yes/No/ Not applicable	Comments
	Does the document identify how it will be implemented and monitored?	yes	
8.	Equality analysis		
	Has an equality analysis been completed for the document?	yes	
	Have Equality and Diversity reviewed and approved the equality analysis?	yes	
9.	Approval		
	Does the document identify which committee/group will approve it?	yes	Allied Health Professions plus group Physical Health Group HSSFG
10.	Publication		
	Has the document been reviewed for harm?	yes	
	Does the document identify whether it is private or public?	yes	public
	If private, does the document identify which clause of the Freedom of Information Act 2000 applies?	n/a	