



Public - To be published on the Trust external website

# Lifting Operations and Lifting Equipment (LOLER) Procedure

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Status: Approved

Document type: Procedure

Overarching policy: [Health and Safety Policy](#)

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## 1 Introduction

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The Trust has a duty to protect the health, safety and welfare of staff members 'so far as is reasonably practicable' under the Health and Safety at Work Act 1974. This includes protecting them from risks associated with lifting operations and lifting equipment.

The Lifting Operations and Lifting Equipment Regulations (LOLER) 1998 place duties on people and companies who own, operate or have control over lifting equipment.

This Procedure sets out how TEWV will ensure the safety of its staff, patients and visitors when employing lifting operations and lifting equipment in the workplace.



Please refer to the [Manual Handling of Objects Procedure](#) and the [Moving and Handling of People Procedure](#) for further guidance on these subjects.

## 2 Purpose

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Following this procedure will help the Trust to comply with its legal obligations relating to lifting operations and lifting equipment:

- Health and Safety at Work etc. Act 1974
- Management of Health and Safety at Work Regulations 1999
- Lifting Operations and Lifting Equipment Regulations (LOLER) 1998
- Provision and use of Work Equipment Regulations (PUWER) 1998
- ACOP L113 2014
- The Health and Safety (Safety Signs and Signals) Regulations 1996

## 3 Who this procedure applies to

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This procedure applies to all:

- Bank, locum, permanent, fixed term contract employees (including apprentices) who hold a contract of employment or are engaged with the Trust
- Seconded staff (including students).
- Volunteers.
- Non-Executive Directors and Governors.
- Those undertaking research work within TEWV Trust.
- External contractors (including Private Finance Initiative (PFI)), agency workers, including those within the Gig economy.
- Limb workers.
- Those on honorary contracts.
- Those on work experience and other workers who are assigned to TEWV Trust.

## 4 Related documents

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This procedure describes what you need to do to implement duties under the Trust's [Health and Safety Policy](#).

This procedure also refers to:

- ✓ [Risk Assessment H & S Procedure](#)
- ✓ [Provision of Use and Work Equipment \(PUWER\) Procedure](#)
- ✓ [Moving and Handling of People Procedure](#)
- ✓ [Manual Handling of Objects Procedure](#)
- ✓ [Control of Contractors Health and Safety Procedure](#)
- ✓ [RIDDOR \(Reporting of Injuries, Diseases and Dangerous Occurrences Regulations\) Procedure](#)

## 5 Procedure

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### 5.1 Risk Assessment

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A LOLER Risk Assessment must be completed using the assessment template within Appendix 1 of the [Risk Assessment \(H&S Procedure\)](#).



A word document of the risk assessment template can be found at the following file path:  
*T:\Intranet Published Documents\Working here\Health and Safety\Health and safety toolkit\Risk Assessments and templates*

- The Trust must ensure lifting equipment is of adequate strength and stability with particular attention paid to the stress induced to its mounting and fixing points. Likewise, every part of the load and anything attached to it and used in lifting is of adequate strength.
- The Trust must ensure that all lifting equipment (including patient lifting equipment) is designed to make sure the risks are kept to a minimum and good lifting practice is followed.
- All lifting equipment procured must be subject to an initial risk assessment to determine whether any specific risks exist which require further assessment, or whether the equipment is covered by an existing risk assessment.
- The outcome of an initial risk assessment must be recorded.
- Any risk assessments undertaken in connection with a piece of equipment must be reviewed periodically, or whenever circumstances of deployment are changed in a substantive way or following a recorded incident, accident or dangerous occurrence.



Any equipment should not be used until it passes an initial risk assessment.

### 5.1.1 Lift Specific Risk Assessment

A lift specific risk assessment or a patient moving and handling risk assessment (when moving and handling people) should be completed which details the lift, equipment and staff involved.



#### **Crane Lifts**

The legal responsibilities for safe lifting operations are usually shared between the crane hirer and crane user.

When a crane is hired the responsibility for planning, supervising and carrying out lifting operations rests with TEWV staff, unless these responsibilities are explicitly undertaken by the crane hire company under a 'contract lift'.

All lifts performed by outside companies must be under a **contracted lift** arrangement, which must be clearly stated within the contract.

## 5.2 Before Undertaking a Lift

All lifts must:

- Have a lift plan in place.
- Employ competent staff with appropriate training.
- Be appropriately supervised and checks documented.
- Be carried out in a safe manner.

### 5.2.1 Lift Plan

A lift plan is a document produced by an appointed person and should describe how the lifting operation is to be carried out, by whom, and with what equipment.

*“For straightforward, common lifting operations, a single initial generic plan may be all that is required (e.g. fork-lift trucks in a factory), which could be part of the normal risk assessment for the activity. However, from time to time it may be necessary to review the plan to make sure that nothing has changed and the plan remains valid. Routine lifting operations which are a little more complex may, depending on the circumstances, need to be planned each time the lifting operation is carried out.” HSE: L113: Safe use of lifting equipment*

<b>Lift Type</b>	<b>Criteria</b>
<b>Basic Lift</b>	A lifting operation where there are no hazards or obstructions within the area of operation.
<b>Standard Lift</b>	A lifting operation where there are hazards, either within the working area of the operation or the access route to the operation area.
<b>Complex Lift</b>	A lifting operation which requires more than one piece of lifting equipment to lift the load, or when lifting persons, or when the operational area has exceptional hazards.

*Ref: BS7121: British Standard for Safe Use of Cranes Parts 1 and 2*

- Where lifting operations are assessed as basic or standard lifts, these may be carried out under standard lifting plans, subject to the requirements specified in any initial, or task-oriented risk assessments pertaining to the equipment in use.
- Where lifting operations are assessed as complex, such lifts should be planned by a TEWV competent person, who has adequate practical and theoretical knowledge and experience of planning lifting operations. A lifting plan should be produced and documented for the planned lift.
- Where it is necessary to move loads over areas occupied by persons, a safe system of work shall be established, which may include Permit to Work entry to areas under the load movements.



A patient moving and handling risk assessment should be documented prior to the patient lift taking place.

## 5.3 Standards and Practice

### 5.3.1 Suitability of Lifting Equipment

Prior to use of lifting equipment, staff should ensure it is suitable for the purpose for which it is to be used.



Suitability of patient lifting equipment will be fulfilled by the Medical Devices Group.

Issues to be considered when assessing suitability of equipment include:

- Safe working load of equipment.
- Ergonomic design and its compatibility with users.
- Material of manufacture and their suitability for conditions of use.
- The equipment's initial integrity.
- The place in which it will be used.
- Means of access/egress required to the area of the lifting operation.
- The need to minimise risks from slips, trips and falls from any part of the lifting equipment.
- Have adequate protection for operators from adverse environmental conditions (e.g. high winds if working outside).
- That all equipment is CE or UK CA marked and shall be accompanied by relevant certificates and declarations.



The lifting or lowering of persons by equipment which is not specifically designed for that purpose (e.g. forklift truck, telescopic handler, etc.) should not be undertaken.



Plant and equipment used for lifting and lowering of people must be inspected at 6 monthly intervals.

### 5.3.2 Marking of Lifting Equipment

- Machinery and equipment for lifting loads must be clearly marked to indicate the Safe Working Load.
- Where the Safe Working Load is dependent on equipment configuration, it shall be clearly marked to indicate the Safe Working Load for each configuration, and information on this shall be kept at, or near the equipment.
- Lifting equipment for persons must be clearly marked.
- Equipment, which is not designed for lifting persons, but which might be used in error should be clearly marked as not for lifting persons.
- Accessories for lifting shall be clearly marked to identify the characteristics necessary for their safe use (e.g. if they are part of an assembly).



All lifting equipment shall be marked with an appropriate dated tag for the equipment maintenance cycle. Users shall check before use that equipment bears an in-date tag. Any equipment not in date must not be used; the item removed from the work area and brought to the attention of the appropriate manager.

### 5.3.3 Thorough Examination and Inspection

- The Trust shall appoint a designated external competent person(s) (or body / bodies) for the purposes of providing examination and inspection services in respect of lifting equipment.
- The external competent person(s) or bodies shall follow an examination and inspection regime.
- Any lifting equipment shall be thoroughly examined prior to first use unless:
  - The lifting equipment has not been used before, and;
  - A Declaration of Conformity is available for the equipment and was made not more than 12 months before the equipment is put into service, or;
  - The equipment has been obtained from another party who have provided evidence of examination in physical form.
- Records of the examination report shall be retained for as long as the lifting equipment is in use.
- Records of examination reports for lifting accessories shall be retained for 2 years after the date of the examination report.
- Where safety depends on installation conditions, such as with mobile equipment, the equipment shall be thoroughly examined.
- After any exceptional occurrence (accident, dangerous occurrence or near miss) likely to jeopardise the safety of the equipment, or after long periods out of use, the equipment should be re-examined.
- Where appropriate (based on risk assessment findings, manufacturers maintenance instructions etc.) equipment shall also be subject to regular periodic inspections by an external competent person which should be documented.
- Following thorough examination, each item of equipment shall be marked, or tagged to show the current maintenance cycle period.

- The appointed external competent person(s) or bodies shall provide a report on the findings of the examination.
- Any equipment identified with such a defect shall not be used before the defect is rectified or the equipment replaced.
- Where equipment is “mothballed” or otherwise not used for a period of three months or more, a full examination must be undertaken before the equipment is returned to service.
- Where portable lifting equipment is relocated from one site to another, or fixed lifting equipment is moved within a site the equipment shall be treated as “new”.



#### **Patient Related Lifting Equipment Record Retention**

NHS England requires that records for patient related lifting equipment should be retained for 20 years.



#### **Defective Lifting Equipment**

Defective lifting equipment must not be used until such defects have been rectified. Defective equipment must be either locked off to prevent use, appropriate signage used, and all users informed of prohibition, or removed from the workplace to a secure location to prevent use, appropriately signed and users informed.

Defective equipment should be recorded on the incident reporting system, and the Medical Devices Group should be notified of any defective patient handling equipment.

Clinical teams managing patient lifting equipment should ensure they have provision in place to replace any defective equipment found to preserve patient safety.

### **5.3.4 Periodic Examinations Once Equipment is in Service**

Lifting equipment must also be thoroughly examined at intervals specified within LOLER or shorter intervals if the external competent person considers this appropriate, or in accordance with the intervals specified in the examination scheme for the equipment.

When lifting equipment is in service it shall be subject to regular thorough examination according to the following timescales:

- Lifting equipment for persons – at least every 6 months;
- Lifting equipment (non-persons) – at least every 12 months;
- Lifting accessories – every 6 months;

For the above, the examination is in accordance with a written examination scheme and is to identify any remedial action in good time before deterioration affects safety.

## 5.4 Equipment Failure

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Any incident involving the total or partial failure of any lifting equipment or lifting accessory must be reported as soon as practicable to the Health, Safety and Security Team [tevw.hss@nhs.net](mailto:tevw.hss@nhs.net) as they may require reporting to the Health and Safety Executive (HSE) under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR). The incidents should also be recorded on the Trust incident reporting system.

Please refer to the [RIDDOR \(Reporting of Injuries, Diseases and Dangerous Occurrences Regulations\) Procedure](#) for further guidance on RIDDOR.

## 6 Incident and RIDDOR Reporting

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Incidents must be reported to in line with the Trusts [Incident Recording and Response Policy](#).

## 7 Health, Safety and Security Team

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The Health, Safety and Security Team (which also includes a Local Security Management Specialist) provides advice and support to all staff and managers around managing risk.

Contact details for the team are [tevw.hss@nhs.net](mailto:tevw.hss@nhs.net)

## 8 Definitions

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Term	Definition
Appointed Person	<ul style="list-style-type: none"> <li>Someone who has the training, practical and theoretical knowledge, and experience required to be familiar with lifting operations.</li> <li>They should assess the lifting operation to provide planning, selection of equipment, instruction and supervision for the task to be undertaken safely.</li> <li>They should ensure that adequate inspection and examination and maintenance of the equipment has been carried out.</li> <li>Ensure that there is an effective procedure for reporting defects and incidents and taking any necessary corrective action.</li> <li>Taking responsibility for the organisation and control of lifting operations.</li> <li>Ensuring the crane supervisor is fully briefed on the contents of the method statement.</li> <li>Has the necessary authority for the performance of all these duties and in particular has the authority to</li> </ul>

	<p>stop the operation if they consider there is a danger if the operation were to continue.</p> <ul style="list-style-type: none"> <li>• Duties but not responsibilities may be delegated to another person where appropriate.</li> </ul>
Lift Supervisor	<ul style="list-style-type: none"> <li>• Person who controls the lifting operation and ensures they are carried out in line with the appointed persons lift plan.</li> </ul>
Competent Person	<ul style="list-style-type: none"> <li>• Person who has such practical and theoretical knowledge and experience of the lifting operation to be carried out safely.</li> <li>• This would normally be externally provided.</li> </ul>
Lifting Equipment	<ul style="list-style-type: none"> <li>• Work equipment for lifting or lowering loads and includes any attachments used for anchoring, fixing or supporting it.</li> </ul>
Lifting Operation	<ul style="list-style-type: none"> <li>• An operation concerned with lifting or lowering a load.</li> </ul>
Lift Plan/Method Statement	<ul style="list-style-type: none"> <li>• Document produced by the appointed person to describe how the lifting operation is to be carried out, by whom and with what equipment.</li> <li>• Patient moving and handling risk assessment.</li> </ul>
Load	<ul style="list-style-type: none"> <li>• Includes a person or persons, or any materials lifted.</li> </ul>
Accessory for lifting	<ul style="list-style-type: none"> <li>• Lifting equipment for attaching loads to machinery or equipment for lifting. E.g. Slings, lifting eyes, etc.</li> </ul>
Thorough examination	<ul style="list-style-type: none"> <li>• An examination carried out by an external competent person.</li> </ul>

## 9 How this procedure will be implemented

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

## 9.1 Training needs analysis

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Staff/Professional Group	Type of Training	Duration	Frequency of Training
<p>None identified for this Procedure</p> <p>Please refer to the Moving and Handling of Patient's Procedure for patient handling requirements</p> <p>Please refer to the Manual Handling of Objects Procedure for any requirements for that procedure.</p>			

## 10 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	Compliance with the legal requirements outlined within the Management of Health and Safety at Work Regulations 1999. <i>NB. There are a number of questions listed in the audit template that are assessed for compliance.</i>	<p><b>Frequency:</b> Annual rolling audit programme.</p> <p><b>Method:</b> Risk Assessment audits will be undertaken for a sample of all teams utilising a standard audit template via an internet-based audit platform. Results are collated and discussed at Health, Safety, Security and Fire Group (HSSF GROUP) with a report to be submitted to the appropriate committee.</p> <p><b>Responsible:</b> Undertaken by members of the Health and Safety Team</p>	Implementation and monitoring are directed by the Executive Risk Group and devolved to the HSSF Group.

## 11 References

- ✓ Health & Safety at Work Act 1974
- ✓ Management of Health and Safety at Work Regulations 1999 (MHSWR)
- ✓ Managing for Health and Safety HSG65
- ✓ HSE website: Consulting employees whose first language is not English (hse.gov.uk, accessed 1<sup>st</sup> June 2022)
- ✓ HSE website: Young people at work (hse.gov.uk, accessed 1<sup>st</sup> June 2022)
- ✓ HSE website: Diversity in the workplace - New to the job (hse.gov.uk, accessed 1<sup>st</sup> June 2022)
- ✓ Lifting Operations and Lifting Equipment Regulations 1998 (LOLER)
- ✓ HSE website: Lifting Operations and Lifting Equipment Regulations 1998 (LOLER)
- ✓ BS7121: British Standard for Safe Use of Cranes Parts 1 and 2
- ✓ L113: Safe use of lifting equipment

## 12 Document control (external)

To be recorded on the policy register by Policy Coordinator

Date of approval	26 January 2026
Next review date	26 January 2029
This document replaces	n/a – new document
This document was approved by	EFM DMT
This document was approved	14 January 2026
This document was ratified by	Health, Safety, Security and Fire Group
This document was ratified	26 January 2026 – virtual approval (to be formally minuted March 2026 meeting)
An equality analysis was completed on this policy on	24 November 2025
Document type	Public
FOI Clause (Private documents only)	n/a

### Change Record

Version	Date	Amendment details	Status
v1	28 Nov 2025	New document	Final for publication

## Appendix 1 - Equality Analysis Screening Form

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

Section 1	Scope
Name of service area/directorate/department	Health & Safety, EFM
Title	Lifting Operations and Lifting Equipment (LOLER) Procedure
Type of document	Procedure
Geographical area covered	Trust wide
Aims and objectives	<p>The objectives of this procedure are to:</p> <ul style="list-style-type: none"> <li>• Comply at all times with the Health and Safety at Work etc. Act 1974 etc., the Management of Health and Safety at Work Regulations 1999, Lifting Operations and Lifting Equipment Regulations (LOLER) 1998 and all other relevant statutory provisions.</li> <li>• Manage health and safety effectively to improve the quality of patient care, visitors and working conditions of staff and others.</li> </ul>
Start date of Equality Analysis Screening	3 November 2025
End date of Equality Analysis Screening	24 November 2025

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

	<ul style="list-style-type: none"> <li>• <b>Religion or Belief</b> (includes faith groups, atheism and philosophical beliefs) <b>NO</b></li> <li>• <b>Pregnancy and Maternity</b> (includes pregnancy, women who are breastfeeding and women on maternity leave) <b>NO</b></li> <li>• <b>Marriage and Civil Partnership</b> (includes opposite and same sex couples who are married or civil partners) <b>NO</b></li> <li>• <b>Armed Forces</b> (includes serving armed forces personnel, reservists, veterans and their families) <b>NO</b></li> </ul>
Describe any negative impacts	There will be times when health and safety has to take priority and this may have an impact on a person's protected characteristics. TEWV would however always try and mitigate as much as possible any negative impact whilst ensuring health and safety legislation is followed.
Describe any positive impacts	Procedure is in place to reduce risk to all staff, patients, visitors, contractors etc.

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.)	Health & Safety at Work Act 1974 Management of Health and Safety at Work Regulations 1999 (MHSWR) Lifting Operations and Lifting Equipment Regulations (LOLER) 1998
Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the protected groups?	Yes
If you answered Yes above, describe the engagement and involvement that has taken place	Programme of site visits have been undertaken where concerns have been discussed and documented. These have been considered while reviewing the procedure. Trustwide consultation.
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	N/A
Describe any training needs for patients	N/A
Describe any training needs for contractors or other outside agencies	N/A

**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
<b>1.</b>	<b>Title</b>		
	Is the title clear and unambiguous?	Yes	
	Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	
<b>2.</b>	<b>Rationale</b>		
	Are reasons for development of the document stated?	Yes	
<b>3.</b>	<b>Development Process</b>		
	Are people involved in the development identified?	Yes	
	Has relevant expertise has been sought/used?	Yes	
	Is there evidence of consultation with stakeholders and users?	Yes	
	Have any related documents or documents that are impacted by this change been identified and updated?	Yes	
<b>4.</b>	<b>Content</b>		
	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	
<b>5.</b>	<b>Evidence Base</b>		
	Is the type of evidence to support the document identified explicitly?	Yes	
	Are key references cited?	Yes	
	Are supporting documents referenced?	Yes	
<b>6.</b>	<b>Training</b>		
	Have training needs been considered?	Yes	
	Are training needs included in the document?	Yes	
<b>7.</b>	<b>Implementation and monitoring</b>		
	Does the document identify how it will be implemented and monitored?	Yes	

	<b>Title of document being reviewed:</b>	<b>Yes / No / Not applicable</b>	<b>Comments</b>
<b>8.</b>	<b>Equality analysis</b>		
	Has an equality analysis been completed for the document?	Yes	
	Have Equality and Diversity reviewed and approved the equality analysis?	Yes	25 November 2025
<b>9.</b>	<b>Approval</b>		
	Does the document identify which committee/group will approve it?	Yes	
<b>10.</b>	<b>Publication</b>		
	Has the policy been reviewed for harm?	Yes	No harm
	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	