Manual Handling Training for Staff – Theory Component

Self-Directed Learning Package

Metro North Health Service District
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Introduction

The Guidelines for Safer Manual Handling and training material were developed in accordance with the requirements of, and to promote legislative compliance with the Workplace Health and Safety Act 1995 and the Manual Tasks Code of Practice 2000 (now 2010).

QLD Health Managers and Supervisors are responsible for, and committed to, the prevention of injuries associated with manual handling. It has been widely recognised that there is the need to change focus from teaching employees “how to lift safely” to alternate work practices which minimise manual handling.

The Guidelines for Safer Manual Handling aim to:
- Reduce the number of injuries causing pain, loss of function, time off work and emotional costs to the worker
- Reduce the financial cost of injury to the employer and the employee
- Promote good employee / employer relations
- Encourage continuous quality improvement
- Meet Workplace Health and Safety requirements under the Workplace Health and Safety Act 2011

This self-directed learning package is designed to provide general / generic manual handling information to work areas. It does not provide in-detail information regarding specific work area tasks / duties. Please see http://qheps.health.qld.gov.au/safety/ergo/key_documents.htm for some task specific workbooks on manual handling, should these be required. Workbooks available are:

- Central Sterilising Department
- Housekeeping / Cleaning / Porterage
- Laundry
- Supply
- Gardening / General Maintenance
- Kitchen
- Office

The Statewide Healthcare Ergonomics Team has released the Manual Handling Implementation Standard OHSMS 2-35#21, which outlines the requirements for Manual Handling within QLD Health. Work is being undertaken to assist work areas in implementing the Standard within their area, and further resources are to be released by the Statewide Healthcare Ergonomics Team in the future.

It is necessary for all workers to complete the mandatory Healthcare Ergonomics eLearning package called ‘Introduction to the Prevention and Management of Musculoskeletal Disorders’. Your Manager should have details on how to access this package, and how it is to be recorded. The abovementioned eLearning package covers the generic components of Healthcare Ergonomics. Please note that the completion of this package does not mean you are competent in manual handling, as additional training is required. If you Manager is unsure of how to access this package, as well as record its completion, can your Manager please email a request for assistance to Ergo-TPCH@health.qld.gov.au for guidance.

After you have completed the eLearning package ‘Introduction to the Prevention and Management of Musculoskeletal Disorders’, it is then necessary for you to read this self-directed learning package. The Manual Handling Self-Directed Learning Package is only to be used in the interim, until the Statewide Healthcare Ergonomics Team have completed and released the eLearning package titled ‘Manual Handling Fundamentals’. Once the Manual Handling Fundamentals eLearning package is available, this will take the place of this book you are currently reading.
After you have completed your theory training and passed the theory assessment, it is necessary for your Line Manager / Supervisor to provide you with task-specific training in manual tasks performed in your environment and any equipment / aids used relating to manual handling. It is important that training is based on a Training Needs Analysis, thus ensuring it is specific to your role.

Objectives

- Define manual handling
- Outline the Occupational Health and Safety Legislation, and describe the employer and employee responsibilities under the Act
- Injury Prevention (will be completed by your Manager – includes task specific training and assessment in manual tasks performed in your environment and equipment used)

Assessment Requirements

In order to be deemed competent in Manual Handling, you must undertake **theory and practical training**. The Manual Handling Self-Directed Learning Package (book you are currently reading) will only assess you for competency in theory.

*It is necessary for Managers / Supervisors to ensure that staff are provided with practical training and assessment in the manual tasks performed within the work environment. This includes providing training and assessment in equipment used.*

This is a requirement as outlined in the Manual Handling Implementation Standard OHSMS 2-35#21. Please view this document in Attachment A for further information.

New staff are required to receive training and assessment within six (6) weeks of commencement. Until trained and assessed as competent, staff must be supervised when performing manual tasks / using equipment. Staff members are required to undertake manual handling training annually, however training will be based on a training needs analysis, linked to the worker's Performance Appraisal and Development and is therefore specific to the worker's role and the tasks they perform. In addition, training must also be provided:

- As soon as possible if returning to work following an extended time away from the duties (e.g. prolonged leave, change in work duties)
- Where manual handling performance evaluation indicates a need for further training
- When a manual handling task has been redesigned or new procedures / equipment are introduced
- When a situation arises requiring variations to usually manual handling procedures (e.g. equipment breakdown requiring use of an alternate method)
Definitions, Acts and Legislations

Definition of Manual Handling

Activities that require someone to exert force in order to grasp, manipulate, strike, throw, carry, move (lift, lower, push, pull), hold or restrain an object, load or body part.

(Manual Tasks Code of Practice 2010, Department of Justice and Attorney General)

Acts and Legislation in Manual Handling

Figure 1 displays the various Acts, Regulations, Codes of Practice and Queensland Health documents applicable to manual handling which must be followed.

Workplace Health and Safety Act 2011

Imposes obligations on people to ensure health and safety

Workplace Health and Safety Regulation 2011

If there is a regulation about a risk, a workplace must do what the regulation says

Codes of Practice:

• Manual Tasks Code of Practice 2010
• National Standard for Manual Tasks 2007
• National Code of Practice for the Prevention of Musculoskeletal Disorders from Performing Manual Tasks at Work 2007

If there is a Code of Practice you must either:
• Do what the code says; or
• Adopt and follow another way that gives the same level of protection

QLD Health Organisational Polices, Directives or Procedures

• QLD Health Occupational Health and Safety Policy OHSMS 2-21
• Manual Handling Implementation Standard OHSMS 2-35#21

These are the minimum requirements within QLD Health which must be followed

Figure 1 - Documents to consider for manual handling
Objectives of the Workplace Health and Safety Act:

- Is to prevent a person's death, injury or illness being caused by a workplace, by a relevant workplace area, by work activities, or by plant or substances used at a relevant place
- The objective is achieved by preventing or minimising a person's exposure to the risk of death, injury or illness caused by a workplace, by a relevant workplace area, by work activities, or by plant or substances for use at a relevant place

Who is obliged under the Workplace Health and Safety Act 2011?

People who have obligations for Workplace Health and Safety are:

- Everyone
- A worker
- Persons who conduct a business or undertaking, whether as employers, self-employed persons or otherwise
- Persons in control of workplaces
- A principal contractor
- Designers, manufacturers, and suppliers of plant
- Erectors and installers of plant
- Owners of plant
- Manufacturers and suppliers of substances
- Persons in control of relevant workplace areas
- Persons in control of fixtures, fittings or plant including in relevant workplace areas
- A visitor to a workplace for example a customer or sales representative

Obligations under the Workplace Health and Safety Act 2011

Employer

- Provide and maintain a safe and healthy work environment
- Provide and maintain safe plant
- Ensure the safe use, handling, storage and transport of substances
- Ensure safe systems of work
- Provide information, instruction, training and supervision to ensure health and safety

Workers and other persons

- To comply with the instructions given for workplace health and safety at the workplace by the employer and any principal contractor for construction at the workplace
- For the worker to use Personal Protective Equipment if provided by the employer, and to be properly instructed in its use
- Not to willfully or recklessly interfere with or misuse anything provided for workplace health and safety at the workplace
- Not to willfully or recklessly place at risk the workplace health and safety of any person at the workplace
- Not to willfully or recklessly injure himself or herself
What are the consequences of not complying?

- Potential for serious and permanent injury to a worker
- Potential serious injury to someone else (colleague, patient)
- Could be fined under the Workplace Health and Safety Act 2014
- Could lose my job
- Could lose professional registration
- Potential involvement of WorkCover. Depending on individual circumstances and the nature of the claim, a worker may receive a reduced income at this time
- Potential to be sued under Common Law
- Potential breach of Queensland Health Code of Conduct, resulting in possible disciplinary action
- May be called in for a supervisory interview with Supervisor or Manager


So why is a manual handling system important?

- To provide a safer working environment for staff and patients
- To reduce injury and injury severity
- To comply with organisational Policy
- To meet the union imperative
- To comply with the Workplace Health and Safety Act obligations
- To assist with quality improvement processes
- To increase skills of the workforce

(Queensland Health THINKSMART Patient Handling Trainer's Handbook)
Safe Biomechanical Principles

General principles for sound biomechanics include:

- **Stand in a stable position:** Your feet should be shoulder distance apart, with one leg slightly forward to help you balance – you may need to move your feet to maintain a stable posture.
- **Avoid twisting:** Make sure your shoulders and pelvis stay in line with each other.
- **Bend your knees:** Bend your knees slightly, but maintain your natural spinal curve – avoid stooping by bending slightly at the hips (bottom out).
- **Elbows in:** Keep your elbows tucked in and avoid reaching – the further away from the body the load is, the greater the potential for harm.
- **Tighten abdominal muscles:** Tighten your abdominal muscles to support your spine.
- **Head Up:** Keep your head raised, with your chin tucked in during the movement.
- **Move smoothly:** Move smoothly throughout the technique and avoid fixed holds.

(All Module 2 information taken from C – Queensland Health Occupational Health and Workplace Safety Unit: Healthcare Ergonomics, 2008)

Generic Lifting Techniques

The tips listed below are a guide only – not all of these techniques may apply to your manual handling situation. You should be provided with task-specific training; please see your Manager / Supervisor to arrange this.

- **Use mechanical lifting aids, if they are available (e.g. hoists, jacks, trolleys, forklifts etc).** Do not lift loads if you have access to a mechanical aid.
- **Assess the load prior to lifting.** Look for:
  - Handles (use handles to lift, if available)
  - Check if the load is equally balanced
  - Assess how heavy the load is (i.e. push / pull the load if safe to see if it is easy or difficult to move)
  - Is the load damaged, or awkward to pick up?
- **Plan the move – where are you going to?** Are there obstacles, vision issues etc.
- **Try to prevent extended your arms to access a load.** If possible, use a forwards / backwards lunge to push the load closer to you, then attempt to lift the load.
- **Use your legs to lift the load.** The quads are the strongest muscle in your body. Utilise a semi-squat position if possible, as this will encourage the use of your legs. Do not lift using your back.
- **Ensure you maintain a good posture when lifting, moving and placing loads:**
  - Maintain an "s" shape in your back. Do not bend your back
  - Keep your head up (looking forward)
- **Keep the load close to your body at all times.**
• If the load is uneven, keep the heavy end of the load close to your body (e.g. against your stomach)

• When picking up a load, face the load. Your should not be twisting or bending (i.e. awkward postures)

• When carrying loads and negotiating corners, ensure that you move your feet and face the direction of travel at all times. Do not twist your back to access or place a load to the side of you – move your feet and face the direction

• If the end position of a load is difficult to reach, then place the load in an easy-to-access area, then use a forwards / backwards lunge to put the load into position

• Ensure that you are always able to see over the load. This will assist in preventing slips, trips and falls

• Ensure you have a good grip on loads. Small grips are no good as they require a significant amount of force to be applied through the hand

• If the load is heavy, break it into small parts (if possible)

• When placing loads, try to place them at an easily accessible height, so that if they need to be moved again they can be easily accessed. A “suitable height” can vary between each person, however it is generally between shoulder and stomach height

• If a load is at ground level, where possible raise the height of the load (i.e. use a mechanical lifting aid to assist)

• Never lift a load if it is beyond your ability. Seek assistance, or do not lift the load at all
Local Manual Handling Procedures

Each Ward/Unit/Department is specific in the type of manual handling performed and the equipment/aids used. Furthermore, there may be differences in incident/hazard reporting procedures, key manual handling contacts and accessing support staff to name a few. As a result, your Manager/Supervisor will provide information on your local manual handling procedures.

Information which should be covered includes:

- Incident/Hazard reporting
- Key contacts
- How to access support staff
- Anything else that is applicable
Computer Use

If you are required to use a computer, it is required that you complete the self-assessment checklist. The process for completing the self-assessment checklist is as follows:

2. Go through the checklist, and make changes as appropriate for you. Remember that one change may affect another, therefore trial different combinations.
3. Complete the checklist in consultation with your Supervisor (if required) – work locally to resolve issues as best as possible.
   a. Ensure the control plan is completed by yourself and your Supervisor (last page of the checklist), and ensure the document signed by yourself and your Supervisor.
   b. You may also seek assistance from your local Health and Safety Contact in completing the checklist. Ask your Manager / Supervisor who your Health and Safety Contact is.
4. Trial the changes for 1-2 weeks (if causing more pain / discomfort, cease the change and try something else). If equipment is required, it is recommended that this be trialled before being purchased. Trial these changes / trial equipment for at least one / two weeks
   a. Equipment trials must be organised through your local work area. You will need to take into consideration any Standing Offer Arrangements that are in place.
5. At the end of the trial, complete the monitor and review section (last page of the checklist). This should be done in consultation with your Manager / Supervisor.
6. If the changes assist in alleviating the pain and discomfort, continue to monitor and review as agreed with by your Supervisor.
7. If there are still issues after you complete the self-assessment checklist, please submit an incident report to your local OHS Unit. Please attach your completed and signed self-assessment checklist to the incident report.

A list of websites has been provided, which provide further information on Office Ergonomics. Please note that some of these websites may require you to have external internet access:


http://www.safety.uwa.edu.au/policies#physical
A list of keyboard shortcuts has also been provided in table 1 – please note that these shortcuts may not suit all computers, and are provided as a guide only:

<table>
<thead>
<tr>
<th>Key</th>
<th>Function Performed</th>
</tr>
</thead>
<tbody>
<tr>
<td>F1</td>
<td>Help</td>
</tr>
<tr>
<td>Ctrl + Esc</td>
<td>Open “Start” menu</td>
</tr>
<tr>
<td>Alt + Tab</td>
<td>Switch between programs</td>
</tr>
<tr>
<td>Alt + F4</td>
<td>Quit program</td>
</tr>
<tr>
<td>Shift + Delete</td>
<td>Delete Item permanently</td>
</tr>
<tr>
<td>Windows logo + L</td>
<td>Lock the computer (or can use Alt + Ctrl + delete)</td>
</tr>
<tr>
<td>Ctrl + C</td>
<td>Copy</td>
</tr>
<tr>
<td>Ctrl + X</td>
<td>Cut</td>
</tr>
<tr>
<td>Ctrl + V</td>
<td>Paste</td>
</tr>
<tr>
<td>Ctrl + Z</td>
<td>Undo</td>
</tr>
<tr>
<td>Ctrl + B</td>
<td>Bold (for Word programs)</td>
</tr>
<tr>
<td>Ctrl + U</td>
<td>Underline (for Word programs)</td>
</tr>
<tr>
<td>Ctrl + I</td>
<td>Italic (for Word programs)</td>
</tr>
<tr>
<td>F2</td>
<td>Rename object</td>
</tr>
<tr>
<td>Windows logo + M</td>
<td>Minimise all</td>
</tr>
<tr>
<td>SHIFT + Windows logo + M</td>
<td>Undo minimise all</td>
</tr>
<tr>
<td>Windows logo + E</td>
<td>Opens my computer (or, on some computers may open Windows Explorer)</td>
</tr>
<tr>
<td>Windows logo + D</td>
<td>Minimises all open windows and displays the desktop</td>
</tr>
</tbody>
</table>


<table>
<thead>
<tr>
<th>Key</th>
<th>Function Performed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ctrl + F5</td>
<td>Restore the document window size (after maximising it)</td>
</tr>
<tr>
<td>Ctrl + F10</td>
<td>Maximise the document window</td>
</tr>
<tr>
<td>Ctrl + F</td>
<td>Find (in Microsoft Word)</td>
</tr>
<tr>
<td>Ctrl + H</td>
<td>Replace (in Microsoft Word)</td>
</tr>
<tr>
<td>Ctrl + G</td>
<td>Go to (in Microsoft Word)</td>
</tr>
</tbody>
</table>


<table>
<thead>
<tr>
<th>Key</th>
<th>Function Performed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ctrl + Y</td>
<td>Redo</td>
</tr>
<tr>
<td>Ctrl + A</td>
<td>Selects all</td>
</tr>
<tr>
<td>Ctrl + S</td>
<td>Save</td>
</tr>
<tr>
<td>Ctrl + O</td>
<td>Open</td>
</tr>
<tr>
<td>Ctrl + → (i.e. the left or right arrow key)</td>
<td>Scrolls through text word-by-word</td>
</tr>
<tr>
<td>Ctrl + SHIFT + → (i.e. the left or right arrow key)</td>
<td>Scrolls through text word-by-word and highlights</td>
</tr>
<tr>
<td>Ctrl + P</td>
<td>Print</td>
</tr>
</tbody>
</table>

Taken from other un-named resource.
Theory Assessment
Manual Handling

1) List three (3) situations where manual handling training is required:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

2) What is the definition of Manual Handling?
   a) Manual handling refers to the ability of experienced staff members being able to physically
      move or support a person, body part or object, without equipment
   b) Activities that require someone to exert force in order to grasp, manipulate, strike, throw,
      carry, move (lift, lower, push, pull), hold or restrain an object, load or body part
   c) Manual Handling is when organisations are encouraged to manual handle safely by
      implementing training as the number one control measure to manual handling.

3) List three (3) of the relevant Laws/Legislation/Acts/Codes of Practice/QLD Health
   Documents that apply to Manual handling?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

4) List three (3) obligations of your Manager/Supervisor in regards to safe manual handling?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

5) What are the obligations of workers in regards to safe manual handling?
   a) To comply with instructions given for Workplace Health and Safety at the workplace by the
      employer
   b) To use Personal Protective Equipment if provided by the employer, and to be properly
      instructed in its use
   c) Not to willfully or recklessly interfere with or misuse anything provided for Workplace Health
      and Safety at the workplace
   d) Not to willfully or recklessly place at risk the Workplace Health and Safety of any person at the
      workplace
   e) Not to willfully or recklessly injure himself of herself
   f) All of the above
6) **Who has obligations for Workplace Health and Safety?**

   a) Workers
   b) Designers, manufacturers and suppliers of plant
   c) Persons in control of workplaces
   d) Everyone
   e) Erectors and installers of plant

7) **List three (3) consequences of not complying with Legislation:**

   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

8) **List three (3) reasons why a manual handling system is important:**

   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

9) **List five (5) safe lifting tips?**

   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

Mark: _________ out of 9

Please have your answers marked by your Manager / Supervisor. Award one mark for each correct answer.

You must achieve a score of at least 80% (8 correct answers). If you do not achieve this, please speak to your Manager / Supervisor, who will identify areas which require further training. Your Manager / Supervisor will also administer a new test.
Important notice regarding documentation and maintaining competency

Congratulations! You have now finished the theoretical component of manual handling training. Please complete the theory assessment in this book (see page 12) and give to your Manager / Supervisor for marking.

You will now be required to liaise with your Manager / Supervisor to complete your task specific training. This includes demonstrations of tasks and / or equipment specific to your work area. Your Manager / Supervisor will need to sign off that you have received training in the required tasks / use of equipment, and that you are competent in their performance / use.

You are required to receive training on an annual basis, as outlined in the Manual Handling Implementation Standard OHSMS 2-35#21. You may also be required to receive training and assessment prior to your annual assessment. Please see the Manual Handling Implementation Standard OHSMS 2-35#21 (Appendix A) for further information.
Resources staff can refer to

Queensland Health documents:

Various Manual Handling resources provided by the Healthcare Ergonomics Team
http://qheps.health.qld.gov.au/safety/ergo/resources_manual.htm and

Other documents:

Workplace Health and Safety Act 1995 available from

Manual Tasks Involving the Handling of People Code of Practice 2001 available from

Manual Tasks Code of Practice 2010 available from

National Standard for Manual Tasks 2007 available from

National Code of Practice for the Prevention of Musculoskeletal Disorders from Performing Manual Tasks at Work 2007 available from
References


A - Queensland Health Occupational Health and Workplace Safety Unit: Healthcare Ergonomics, 2008, Participants Workbook: Ward/Unit Patient Handling Trainer’s Course Pre-course reading and activities, Queensland Health


C - Queensland Health Occupational Health and Workplace Safety Unit: Healthcare Ergonomics, 2011 Participants Workbook: Ward/Unit Patient Handling Trainer’s Course, Queensland Health


Appendix A

Manual Handling Implementation Standard OHSMS 2-35#21
TITLE: Manual Handling Tasks

1. PURPOSE

The purpose of this Implementation Standard (Standard) is to ensure a framework for the mandatory requirements for safe manual handling, thereby reducing the incidence and severity of musculoskeletal disorders to workers performing these tasks.

2. SCOPE

The scope of this Standard is manual handling tasks in the workplace. The scope of this Standard does not include patient handling tasks, which are addressed in OHSMS 2-22#21 Patient Handling Tasks Implementation Standard.

For the purpose of this Standard, manual handling tasks can include:
- lifting, lowering, pushing, pulling, carrying or otherwise moving, holding or restraining any item;
- repetitive actions;
- sustained work postures; and
- exposure to vibration.

For example, pushing a bed or trolley; using a computer; using a microscope; using surgical instruments or powered hand tools; cleaning; restocking; driving over rough ground; maintaining a sustained posture during a clinical procedure (e.g. suturing a patient's limb).

This Standard applies to all Queensland Health workers who are directly involved in manual handling tasks and includes all Queensland Health contractors and volunteers. This Standard must be utilised by Queensland Health workers and others (e.g. committees and contractors) who influence facility design, equipment purchases and work practices impacting on manual handling tasks.

In this Standard, injuries are referred to as musculoskeletal disorders, and do not include injury or disease caused by crushing, entrapment or laceration.

3. AUTHORISING POLICY

This Standard details mandatory actions and processes pursuant to OHSMS 2#21 Queensland Health Occupational Health and Safety Policy.
4. DETAILS

Manual handling tasks have been identified as a priority hazard exposure for the healthcare industry. The implementation of this Standard will ensure that operational requirements are met while also providing safe systems of work for healthcare workers.

Manual handling tasks are often only one part of a worker’s job. If the worker’s job involves other manual tasks, such as patient handling tasks, it is essential to assess the whole job and manage the risk associated with undertaking those activities which add to the cumulative stress on the worker’s body. For clinical situations requiring a patient or body part to be moved, handled, repositioned or supported, reference should be made to the Patient Handling Tasks Implementation Standard OHSMS 2-22#21 and to other relevant guidelines, in conjunction with this Standard.

Managing risks arising from manual handling tasks requires systematically identifying, assessing and controlling those risk factors that lead to the development of musculoskeletal disorders. Risk management for manual handling tasks should be conducted in accordance with OHSMS 1-13#21 Occupational Health and Safety Risk Management Implementation Standard.

Participation of workers during risk management of manual handling tasks is necessary. The level and formality of participation needed, depends on the level of risk and how much is known about the tasks/jobs being assessed and the ways the risk can be eliminated or controlled. Participation and risk management for manual handling tasks can occur through existing groups and processes in a workplace at any time when needed. ‘Participatory ergonomics’ is a formal approach to managing risk associated with manual handling tasks. This approach should be used in work areas that regularly perform manual handling tasks, particularly when there are numerous hazardous manual handling tasks and/or injuries and/or where the work systems involving manual handling tasks are complex. The basic concept of participatory ergonomics is to formalise a team approach involving line managers/supervisors and workers, with expert knowledge in their own tasks, in improving their workplace to improve productivity, eliminate or control manual handling risk factors and improve worker health. Training and support is provided by a facilitator (e.g. an OHS practitioner), to assist with a formal participatory ergonomics approach (refer to section 4.2 below).

4.1 Risk Management
The following risk management process must be applied to manual handling tasks within all work areas who perform them, including clinical areas.

Step 1 Identify the hazards
Managers, supervisors and workers must proactively identify hazardous manual handling tasks, singly and/or combined within a job. This is achieved through consultation and collaboration.

Proactive identification of hazardous manual handling tasks in the work area must occur:
- for new tasks and services, before commencement and preferably in the planning phase;
- for existing tasks, within three months of the date of release of this Standard;
Safety for ALL

- at regular intervals thereafter, according to the level of risk in the work area; and
- when an occurrence of a musculoskeletal disorder is reported by or on behalf of a worker; or
- when planning a change to items, equipment, work areas, tasks, jobs and/or systems of work, which involve manual handling tasks; or
- when a workplace health and safety representative makes a request.

In order for a manual task to pose a risk of musculoskeletal injury to workers, a **direct risk factor** must be present. The direct risk factors are:
- **Force** - high force, jerky or unexpected forces, speed and force, sustained low force;
- **Posture** – awkward or sustained working postures; and
- **Time** – repetition, duration and frequency.

Tasks should be prioritised for risk assessment, where it is not possible to carry out the assessment at the time of identification. Gathering information and identifying direct risk factors will help determine which part of the task to focus on and to prioritise the tasks for assessment.

Hazardous manual handling tasks are to be further assessed and managed by the manager responsible for the work area, in consultation with others. This involves:
- assessing direct and contributory risk factors;
- deciding if risk elimination/controls are required and if so, the nature of the risk elimination/controls;
- implementing the risk elimination/controls; and
- monitoring the risk elimination/controls.

Refer to steps 2 to 5 below.

**Step 2 Assess the risk with existing controls**
Any identified hazardous manual handling task must be assessed to determine whether the task poses a risk of musculoskeletal disorders and the source of the risk. This involves analysing the **direct risk factors** that are present and are known to cause injury and identifying the **contributory risk factors** which are the source/s of the direct risk factor/s. The **contributory risk factors** are:
- nature/characteristics of the hazard e.g. the nature of the load being handled;
- workplace factors e.g. tools and equipment; the work area design/layout; the work environment;
- task factors e.g. work practices and systems;
- work organisational factors e.g. staffing levels; workload; and
- individual or team factors e.g. fatigue; workplace psychosocial factors.

Determine the level of implementation and effectiveness of existing controls. Guidance material and resources will be provided to support this step.

**Step 3 Decide appropriate additional controls**
Once it has been assessed that a risk of injury exists, control measures must be developed to eliminate the risk, or if this is not practicable, to minimise the risk.
The purpose is to eliminate or alter the contributing risk factors identified as the source of the direct risk factors. This must be done with regard to the hierarchy of controls, as described in OHSMS 1-18#21 Hierarchy of Controls Work Practice Directive.

Specifically, when eliminating/controlling risk associated with manual handling tasks, design/alter:
- the workplace layout;
- the workplace environment where the task is undertaken, including lighting levels, heat, cold and vibration;
- the systems of work (including work organisation) used to perform task;
- the items used in the task;
- to use mechanical equipment/aids; or
- any combination of the above.

If it is not practicable to reduce the risk using the measures in the list above, use other appropriate and relevant information, instruction, training and supervision to control the risk.

Step 4 Implement the agreed control measures
Implement the agreed control measures. Provide appropriate and relevant information, instruction, training and supervision for workers about implementing the necessary risk controls noted in the list above, to ensure that they can perform manual handling tasks without risk to health and safety. Specify how and when the agreed control measures will be evaluated and monitored and by whom.

Step 5 Monitor and review the effectiveness of controls
Monitoring and reviewing the controls implemented should be completed on an ongoing basis to ensure:
- the controls have been implemented;
- they continue to eliminate or minimise the risk of musculoskeletal disorders as far as reasonably practicable; and
- they do not result in new hazardous manual handling tasks or other hazards.

4.2 Training, assessment and supervision
All workers performing manual handling tasks must be provided with adequate information, instruction, training and supervision to ensure manual handling tasks are undertaken in the safest possible way. The training is based on a training needs analysis, linked to the worker’s Performance Appraisal and Development (PAD) and therefore is specific to the worker’s role and the tasks they perform.

Supervision and ongoing monitoring of worker compliance with safe work procedures/risk controls when undertaking manual handling tasks must be completed. Learning need and non compliance is to be managed using existing performance management and PAD processes.

The training and assessment requirements for workers who perform manual handling tasks are outlined below:
1. **Generic manual handling tasks training and assessment** (Orientation): training and assessment must be completed within six weeks of commencement, and include:
   - Musculoskeletal disorders prevention/management:
     - Legislative and organisational requirements;
     - Risk management process; and
     - Musculoskeletal disorder prevention, signs and symptoms.
   - Manual handling fundamentals:
     - Principles to be applied to manual handling tasks; and
     - Principles of the use of equipment commonly found in healthcare settings.

Existing workers can be assessed for recognition of prior learning, with any additional training and assessment to be prioritised for implementation within six months of approval of this standard.

2. **Work area/job specific training and assessment** (Induction): local work area specific training and assessment must be completed within six weeks of commencement in the work area. This may include on the job or small group training, with topics to include:
   a. administrative arrangements, including incident/hazard reporting and ongoing training and assessment requirements/PAD;
   b. safe work procedures/control measures for hazardous manual handling tasks; and
   c. maintenance, cleaning and storage of manual handling equipment.

**Criterion referenced assessment** must be completed within six weeks of commencement, and annually thereafter. The assessment procedure should address the skills and knowledge necessary to perform the task/s safely, at a level of detail appropriate to the exposure of the worker to risks arising from manual handling tasks and the worker's identified needs.

Refresher training can occur at any time when a need is identified through training needs analysis or PAD process.

In addition to the above, training and assessment must be provided to workers:
   - as soon as possible if returning to work following an extended time away from the duties (e.g. prolonged leave, change in work duties);
   - where manual handling performance evaluation indicates a need for further training;
   - when a manual handling task has been redesigned or new procedures/equipment are introduced; and
   - when a situation arises requiring variations to usual manual handling procedures (e.g. equipment breakdown requiring use of an alternate method).

Training and assessment records, including training and assessment dates, content, participant details, participant/trainer signatures and assessment achieved must be documented appropriately to ensure a structured system for tracking each worker's training and assessment status. A system of centralised record keeping for manual handling training and assessment at a district/facility level is highly desirable and
should be worked toward. Records are to be kept in accordance with approved
records management procedures.

Managers and supervisors:
In addition to the above, training for line managers and supervisors should facilitate
effective supervision of workers and the implementation and maintenance of safe
systems of work for manual handling tasks.

Contract workers (e.g. agency, labour hire), students:
As a minimum, contract workers and students must provide evidence that they have
been trained and assessed as competent in general manual handling tasks prior to
commencement. These workers must be provided with information on work area/job
specific procedures/equipment and supervised when performing hazardous manual
handling tasks, until they are assessed as competent in their tasks.

Participatory ergonomics work teams (identified areas of need):
In work areas/job tasks identified as high risk of manual handling injury, work teams
should be established to address the manual handling risks. Work area specific,
scenario based training in participatory ergonomics for work teams (currently under
development) will support the implementation of this Standard in these areas. This
training will focus on developing a higher level of practical skill for the work team
members, in the assessment and control of risk factors and implementation of risk
controls for manual handling tasks specific to the work area.

4.3 Communication/Consultation
Consultation between people in the workplace including managers, workers, Occupational
Health and Safety (OHS) practitioners, OHS representatives, purchasing officers and
others, is essential for developing accurate information and must occur at all stages of
program planning, implementation and review, including during risk management.

Consultation must offer all stakeholders a genuine opportunity to contribute to any
decision making process. Examples include:
• identifying hazardous manual handling tasks and risk factors;
• deciding on control strategies and monitoring the effectiveness;
• trialling and purchasing new equipment;
• altering the workplace design or work procedures; and
• identifying worker requirements for information, instruction or training.

4.4 Reporting
Risk management activities should be reported according to prescribed arrangements. In
particular, it is recommended that the Workplace Health and Safety Committee consider
its reporting requirements, in order to effectively monitor the management of risk
associated with manual handling tasks and the implementation of this Standard.

Records must be maintained for all activities associated with the implementation of this
Standard, and in accordance with document control procedures for the workplace. This
will include documentation relating to risk assessments conducted, the controls
implemented and the evaluation of the control measures; training; equipment
maintenance; design modifications to equipment or work processes; and activities relating
to monitoring and reviewing the overall manual handling program (e.g. audits conducted).
5. DEFINITIONS

Contributory Risk Factors: are the underlying causes of the hazard or event. These include: nature/characteristics of the hazard; workplace factors; task factors; individual or team factors; and/or work organisational factors.

Criterion-Referenced Assessment: involves the process of judging knowledge and skills in terms of stated criteria.

Direct risk factors: are the immediate causes of a hazard or event.

In the case of manual handling tasks, the direct risk factors that are known to cause musculoskeletal injury include force (high force, jerky or unexpected forces, speed and force, sustained low forces); posture (repetitive or sustained awkward postures); and time (frequency, repetition and duration).

Hazardous Manual Handling Tasks: are defined in the National Code of Practice for the Prevention of Musculoskeletal Disorders from Performing Manual Tasks at Work, as those which involve any of the following:
- repetitive or sustained application of force;
- repetitive or sustained awkward posture;
- repetitive or sustained movement;
- application of high force including jerky or unexpected forces;
- exposure to sustained vibration in combination with any of the above;
- handling of live people or animals (out of scope of this Standard); or
- handling of loads that are unstable, unbalanced or difficult to grasp or hold.

Item: includes any inanimate object such as products, equipment, containers, hand tools, powered tools, trolleys, packaging, or substances.

Manual Handling Equipment: an item, designed to assist a worker, for the purpose of lifting, lowering, pushing, pulling, carrying or otherwise moving, holding or restraining any item, and/or, controlling vibration. The equipment may include components which impact on the manual handling task, for example, castors, handles, controls.

Manual Handling Tasks: for the purpose of this Standard, manual handling tasks can include:
- lifting, lowering, pushing, pulling, carrying or otherwise moving, holding or restraining any item;
- repetitive actions;
- sustained work postures; and
- exposure to vibration.

Manual Tasks: Manual tasks encompass a wide range of activities that require a person to use their physical body (muscloskeletal system) to perform work. Within Queensland Health, manual tasks include both manual handling tasks and patient handling tasks.

Participatory Ergonomics: the involvement of people in planning and controlling a significant amount of their own work activities, with sufficient knowledge and power to influence both processes and outcomes in order to achieve desirable goals.
6. REVIEW AND AUDIT

This Standard will be reviewed in October 2012 or in light of changes to legislation, changes to organisational activity, or in light of Queensland Health’s occupational health and safety performance.

7. RELATED INFORMATION

More detailed information and guidance is contained in:

- OHSMS 2-22#21 Patient Handling Tasks Implementation Standard
- OHSMS 1-13#21 Occupational Health and Safety Risk Management Implementation Standard
- OHSMS 1-18#21 Hierarchy of Controls Work Practice Directive
- OHSMS 1-5#21 Occupational Health and Safety and Injury Management Accountabilities and Responsibilities

8. BUSINESS CONTACT

Any requests for further information or clarification regarding this Implementation Standard should be referred to the Principal Occupational Health and Safety Consultant, (Healthcare Ergonomics) via Ergonomics@health.qld.gov.au

9. DOCUMENT CONTROL

Version 1 April 2009 - Draft for Consultation – Not Yet Approved
Version 2 November 2009 - Approved for Release by OHS Steering Committee
Appendix B

Computer Workstation Self-Assessment Checklist
Computer Workstation Self-Assessment Checklist

The following checklist is provided to assist you with setting up and assessing your own workstation ergonomics.

- Once you have completed the self-assessment checklist, record any problems identified, corrective actions taken and recommendations in the relevant section and report these to your Supervisor / Line Manager. Allow yourself at least a week with your new set up to determine if you are gaining benefits from the changes.
- Provide a copy of this completed checklist to your Supervisor / Line Manager.
- Your supervisor should then complete the control plan and both of you should sign off on the assessment.
- You may need to ask your supervisor, a fellow staff member or a Workplace Health and Safety Officer (WHSO) for help in checking your posture whilst you make adjustments.

Name: ____________________________ Date: __________________

Section 1: Daily tasks

<table>
<thead>
<tr>
<th>Daily Tasks</th>
<th>Question</th>
<th>Yes/No</th>
<th>Possible Solutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minimise tired muscles by taking frequent short breaks from an activity and by doing simple exercises during those breaks to aid recovery.</td>
<td>Are your daily tasks varied to help overcome repetitive and prolonged activities?</td>
<td>Yes/No</td>
<td>Break up long periods of continuous computer use by performing alternative tasks that require you to stand and walk away briefly from your computer.</td>
</tr>
<tr>
<td></td>
<td>Do you take rest breaks or short work pauses regularly?</td>
<td></td>
<td>Take regular short breaks to relax hand postures, look away from the computer or stand and stretch your legs.</td>
</tr>
<tr>
<td></td>
<td>Do you change your posture and stretch regularly?</td>
<td></td>
<td>Vary your posture as much as possible. Stand or walk about, or do some stretches at least every 30 minutes.</td>
</tr>
</tbody>
</table>

Actions taken (list any adjustments you have made) and Recommendations (what recommendations would you make to improve your workstation ergonomics?)
# Computer Workstation Self-Assessment Checklist

## Section 2: Chair

### Chair

Adjust your chair:
- Adjust chair height so that your elbows are by your side and level with the desk or slightly above the desk.
- Adjust the height of the backrest to support the inward curve in your lower back.
- The backrest angle is adjusted to a comfortable position, for most people this will be an upright or slightly reclined position (see images below for options for varying sitting postures).

> If your feet are not flat on the floor, use a footrest.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes/ No</th>
<th>Possible Solutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are your feet on the floor or foot rest so that your knees are at 90° (right angles) and hips slightly above the knees?</td>
<td></td>
<td>Provide a footrest. Adjust back rest angle or seat tilt angle.</td>
</tr>
<tr>
<td>Is your bottom well back in the seat with your lumbar spine (lower back) supported?</td>
<td></td>
<td>Adjust the backrest of your chair to support the curve in your lower back.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If your chair does not adequately support your lower back after adjusting it, provide an alternative chair* that supports your lower back.</td>
</tr>
<tr>
<td>Do you have adequate leg support so that 2-3 fingers fit between the chair and the back of your knee?</td>
<td></td>
<td>If the seat is too deep – provide an alternative chair* with a shorter seat pan.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If the seat is too shallow – provide an alternative chair* with a longer seat pan.</td>
</tr>
<tr>
<td>Can you get close to the workstation without hindrance?</td>
<td></td>
<td>Remove the arm rests. Provide a chair with adjustable height arm rests.</td>
</tr>
<tr>
<td>Counter work – Is there a chair appropriate for sit/stand work?</td>
<td></td>
<td>Provide a sit stand stool or high 'counter / drafting' type office chair, with a foot support ring.</td>
</tr>
</tbody>
</table>

**Actions taken (list any adjustments you have made) and Recommendations (what recommendations would you make to improve your workstation ergonomics?)**

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*Discuss options for a more detailed seating assessment with your Supervisor/Line Manager.

Name: ____________________________ Date: ____________________________

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### Computer Workstation Self-Assessment Checklist

#### Section 3: Desk

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes/No</th>
<th>Possible Solutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is there sufficient room on your desk to set up your computer correctly?</td>
<td></td>
<td>Remove clutter from your desk to allow adequate workspace.</td>
</tr>
<tr>
<td>Are frequently used items within comfortable reach?</td>
<td></td>
<td>Rearrange your desk so that frequently used items are closer.</td>
</tr>
<tr>
<td>Is the area underneath your desk free from stored items that would reduce leg room and freedom of movement?</td>
<td></td>
<td>Do not store items under the desk - this will affect the leg clearance at the workstation.</td>
</tr>
</tbody>
</table>

Actions taken (list any adjustments you have made) and Recommendations (what recommendations would you make to improve your workstation ergonomics?)

#### Section 4: Monitor

Position your monitor directly in front of you, with the monitor approximately one arm’s length away from you. The top of the monitor should be level with or slightly below eye level to avoid having to tilt the head back to look up at the screen. (N.B. If you wear bifocals you will need the screen lower).

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes/No</th>
<th>Possible Solutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the top of the monitor (toolbar) at eye level when you are seated in the chair and looking straight ahead? (get someone to check while you are keying)</td>
<td></td>
<td>Adjust monitor height. Discuss the need for task specific spectacles with your Optometrist.</td>
</tr>
<tr>
<td>Is the monitor located directly in front of you at approximately an arm’s distance when seated?</td>
<td></td>
<td>Reposition the monitor on the desk.</td>
</tr>
<tr>
<td>Is there glare on the screen?</td>
<td></td>
<td>Reduce glare by re-positioning the monitor parallel to the windows, decreasing overhead lighting, using window shades, tilting the screen or using an anti-glare filter.</td>
</tr>
</tbody>
</table>

Actions taken (list any adjustments you have made) and Recommendations (what recommendations would you make to improve your workstation ergonomics?)

Name: ____________________________ Date: ____________________
## Computer Workstation Self-Assessment Checklist

### Section 5: Document Holder

<table>
<thead>
<tr>
<th>Document Holder</th>
<th>Question</th>
<th>Yes/No</th>
<th>Possible Solutions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Position your document holder between the keyboard and monitor or beside the monitor at the same height as the screen, so as to avoid bending or twisting the neck.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Do you spend a large proportion of your day transcribing from paper documents to the computer?</td>
<td>Yes/No</td>
<td>Provide a document holder.</td>
</tr>
<tr>
<td></td>
<td>Actions taken (list any adjustments you have made) and Recommendations (what recommendations would you make to improve your workstation ergonomics?)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section 6: Keyboard and Mouse

- Position your keyboard directly in front of you.
- The keyboard should be a comfortable distance from the edge of the desk to allow the forearms to be supported.
- Your mouse should be as close as possible to the edge of the keyboard.
- When using the keyboard & mouse, keep your wrists straight and shoulders relaxed.

<table>
<thead>
<tr>
<th>Keyboard and Mouse</th>
<th>Question</th>
<th>Yes/No</th>
<th>Possible Solutions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Is your keyboard positioned centrally in front of you and in-line with the monitor?</td>
<td>Yes/No</td>
<td>Reposition the keyboard on the desk.</td>
</tr>
<tr>
<td></td>
<td>Is the keyboard at a comfortable distance from the edge of your desk?</td>
<td>Yes/No</td>
<td>Position keyboard to allow the forearms to be supported.</td>
</tr>
<tr>
<td></td>
<td>Is your forearm supported on the desktop when using the keyboard and mouse?</td>
<td>Yes/No</td>
<td>Position the keyboard flat or only slightly sloped to avoid a cocked wrist position.</td>
</tr>
<tr>
<td></td>
<td>Is the mouse as close as possible to the edge of the keyboard?</td>
<td>Yes/No</td>
<td>Position the mouse as close to and preferably level with the keyboard.</td>
</tr>
<tr>
<td></td>
<td>Do you use keyboard shortcuts to reduce mouse use?</td>
<td>Yes/No</td>
<td>Consider using keyboard shortcuts to minimise time spent using the mouse.</td>
</tr>
</tbody>
</table>

Actions taken (list any adjustments you have made) and Recommendations (what recommendations would you make to improve your workstation ergonomics?)

Name: ________________________________  Date: ________________

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### Computer Workstation Self-Assessment Checklist

#### Section 7: Telephone Use

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes/No</th>
<th>Possible Solutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Repeatedly reaching for the telephone which is too far away may result in strain on the shoulder, neck and arm. Do not cradle the telephone between your head and shoulder.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is your telephone in an ideal position on your desk?</td>
<td></td>
<td>Keep the telephone close at hand so that you can reach without stretching.</td>
</tr>
<tr>
<td>Do you spend a large proportion of your day on the telephone whilst simultaneously writing or keying?</td>
<td></td>
<td>Avoid tilting the head/neck to cradle the telephone on your shoulder. Use your hand to hold the receiver. Use a headset or the speaker function.</td>
</tr>
</tbody>
</table>

**Actions taken (list any adjustments you have made) and Recommendations (what recommendations would you make to improve your workstation ergonomics?)**

#### Section 8: Laptop

Laptop computers are intended to be used for short periods of time.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes/No</th>
<th>Possible Solutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is your laptop only used for short periods of time (less than one hour?)</td>
<td></td>
<td>If using for long periods (i.e. over 2 hours) then it is recommended that the laptop be used with:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• A docking station, separate monitor, keyboard and mouse; or</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• A laptop stand (to raise the height of the screen), separate keyboard and mouse.</td>
</tr>
</tbody>
</table>

**Actions taken (list any adjustments you have made) and Recommendations (what recommendations would you make to improve your workstation ergonomics?)**

### Additional Notes/Comments/Questions

(if you think of anything extra during your self assessment note them below to discuss with your Supervisor or Occupational Health and Safety Officer)

Name: ____________________________  Date: ____________________________
### Computer Workstation Self-Assessment Checklist

<table>
<thead>
<tr>
<th>Date of self-evaluation</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Surname</td>
<td>Given Names:</td>
</tr>
<tr>
<td>Position Title</td>
<td>Class/Level</td>
</tr>
<tr>
<td>Dept/Location</td>
<td>Contact No</td>
</tr>
<tr>
<td>Supervisor / Line Manager</td>
<td>Contact No</td>
</tr>
</tbody>
</table>

Where hazards or risks have been identified, complete the following control plan:

<table>
<thead>
<tr>
<th>Recommendation/Control</th>
<th>Control Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>What needs to be done</td>
<td>Approved by</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Acknowledgment of Assessment and Recommendations

<table>
<thead>
<tr>
<th>Employee's Signature</th>
<th>Line Manager's Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee's Name</td>
<td>Line Manager's Name</td>
</tr>
<tr>
<td>Date: ____ / ____ / ____</td>
<td>Date: ____ / ____ / ____</td>
</tr>
</tbody>
</table>

**Responsibility**

It is the responsibility of the work area to organise and implement the agreed recommendations/controls. If you need further assistance to evaluate your workstation, discuss with your Supervisor/Line Manager options for a more detailed assessment.

### Monitor & Review

Once agreed recommendations have been implemented, Supervisors/Line Managers should review and monitor these to check their effectiveness and to identify if any new concerns have arisen.

<table>
<thead>
<tr>
<th>Review date</th>
<th>Outcome of review</th>
<th>Review completed by</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Occupational Health and Safety Management System**

**Better Practice Guidelines**

Document Index No. OHSMS 2-36-24/35

Version 1 - Date: August 2003

Review: August 2009