

Blank Forms from Handle with Care

Forms include the following:

- Form 1: Patient handling: Risk identification tool using MSI statistics
- Form 2: Physical demands risk assessment
- Form 3: Assessing the patient's handling needs: Mobility chart
- Form 4: Work environment risk assessment

Physical demands risk assessment

Procedure assessed: _____ Date: _____

Assessment completed by: _____

Risk factor	Observations
Workers lift all or a significant portion of the patient's or resident's weight, or apply force vertically.	
Workers mainly use their arms or backs to apply force.	
Workers use forceful grips with wrists in an awkward posture.	
Workers exert force while in awkward postures (for example, stooped, twisted, reaching forward, or reaching overhead).	
Workers perform tasks with their backs in awkward postures (stooped, twisted, bent to the side, bent backward, or bent forward).	
Workers lift or pull patients or residents at a distance from them (for example, with bed rails up, arms on wheelchairs, furniture near the bed, or IV bag stands in the way).	
Workers conduct transfers or assists while in postures that may put them off balance.	
Workers pull with their arms in awkward postures (for example, behind the body).	
Workers support a body part or hold a position for a sustained period (for example, holding patients or residents away from them while cleaning them in bed).	
Workers support patients or residents while performing care tasks (for example, cleaning after toileting or removing clothing in preparation for toileting).	
Workers perform quick or jerky movements.	
Workers do not use draw sheets or low friction slide sheets during transfers or repositioning.	
Workers reposition patients with only one foot on the floor.	
Workers do not move their feet while twisting their torsos or turning their upper bodies to move patients or residents.	
Workers contact sharp or hard surfaces with parts of their bodies (for example, wrists or knees).	
Workers repeat the same motion throughout the work day (for example, repeatedly cranking manual adjustments for beds).	

Awkward postures

Use these illustrations to help you identify awkward postures when completing the physical demands risk assessment form. Circle any awkward postures you identify.

Back



Side bend



Forward bend



Twist



Extension

Shoulder



*Forward reach
higher than 45°*



Shoulder abduction



Extension



*Shoulder girdle
elevation*

Neck



Extension



Side bend

Wrist



Flexion



Extension



Deviation

Assessing the patient's handling needs: Mobility chart

Patient No. _____ Weight: _____ Named nurse: _____

Name: _____ Ward: _____

Actual or potential problems:	Date: _____

Date	Task	Desired outcomes	Equipment and techniques used

Patient classification / equipment required			
Ind	Independent	Handling sling	Easi-mover
Sup	Supervised	Slide sheet	Hand block
1/2/3	Requires assistance	Multimover	Monkey pole
		Mechanical lift (specify)	Patslide
			Other (specify)

Mobility
Bed rest
Not to be mobilized
NWB Non-weight-bearing
PWB Partial-weight-bearing
FWB Full-weight-bearing

Mobility aids
Sticks
Crutches
(Wheeled) Zimmer
Wheelchair
Other (specify)

Work environment risk assessment

Administration details

Ward (or other area, such as clinic or health centre): _____
Facility: _____
Assessment team:
Ward manager: _____ (name) _____ (signature)
Others (worker health and safety representatives, workers from area, supervisors): _____ _____
Date: _____
Date(s) reviewed: _____

Ward details

Specialty: _____	Gender of patients (check one) : Male _____
Typical age range of patients: _____	Female _____
Number of patients on a typical shift: _____	Mixed _____

Bed mobility and transfers

System of work List methods used and precautions taken to assist patients of various degrees of dependency. Which methods are used most frequently? Which are used only occasionally? (Includes moving up or down beds, moving on or off bedpans, transferring to bed seats, and transferring to bed trolleys.)	Are there any patient handling problems? (Includes moving up or down beds, moving on or off bedpans, transferring to bed seats, transferring to bed trolleys, bed bathing, and attending to patients on beds, trolleys, or examination couches.)	Additional control measures to consider for the future
	<i>See Note 1</i>	<i>See Note 2</i>

Write any needs or comments resulting from this page in the “Summary of Needs and Action Plan” at the end of the form.

Note 1

Here are examples of questions to ask:

- Is there enough room to move freely with good posture?
- Is there enough room to use a hoist?
- Is the furniture around the bed easy to move?
- Are workers stooping or twisting?
- Are workers lifting?
- Are there straight-lifting hip-injury or spinal-injury patients?
- Are brakes and wheels in good working order?

Note 2

Here are examples of possible control measures:

- Get height-adjustable beds or couches.
- Get profiling beds.
- Put only the most independent patients in fixed-height beds.
- Sit patients on one-way slide aids.
- Use specialist mattresses.
- Label defective items for maintenance.
- Use handling aids (hoists, slide or transfer aids, monkey poles, or rope ladders).
- Use patient hand blocks.

Handling aids

List the handling aids used or available in your ward and whether you own them or borrow them regularly. If possible, refer to brand names.

- Examples of handling aids**
- Monkey poles
 - Slide aids (small/long sheet, or cushion)
 - Rope ladders
 - Patient hand blocks
 - Standing and raising aids
 - Mechanical lifts
 - Ceiling lifts
 - Transfer boards
 - Turning discs

Name of handling aid	How many?	Is it based on your ward?	If not, where is it borrowed from?	Is it in good working condition? Does it include attachments?	Is it suitable? If not, why?	Are slings and other attachments available?	Are changes, repairs, or additional attachments needed?	Has it been serviced in the last six months?

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Toileting and bathing

System of work List methods used to assist patients of various degrees of dependency. Which methods are used most frequently? Which are used only occasionally?	Are there any patient handling problems?	Additional control measures to consider for the future
<p style="text-align: center;"><i>See Note 1</i></p>	<p style="text-align: center;"><i>See Note 2</i></p>	

Write any comments or needs resulting from this page in the “Summary of Needs and Action Plan” at the end of the form.

Note 1

Here are examples of questions to ask:

- Is there enough room to move freely with good posture?
- Is there enough room to use a hoist?
- Are workers stooping or twisting?
- Are workers lifting?
- Are there convenient assistive devices such as grab rails?
- Are commodes adequate?
- Is the floor slippery?

Note 2

Here are examples of possible control measures:

- Use a hoist (standing hoist sling lifter).
- Wheel the commode over the toilet.
- Use a raised toilet seat.
- Move the toilet or move the partition wall for more space.
- Widen the doorway.
- Install or move grab rails.
- Modify the door to open outward.
- Change the floor covering.

Seats, wheelchairs, and commodes

System of work List methods used to assist patients of various degrees of dependency. Which methods are used most frequently? Which are used only occasionally? (Includes sit-to-stand, stand-to-sit, and repositioning in seat.)	Are there any patient handling problems?	Additional control measures to consider for the future
See Note 1	See Note 2	

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Note 1

Here are examples of questions to ask:

- Are seats too low or too deep?
- Do arms get in the way?
- Can you get close with the hoist?
- Are brakes or wheels defective?
- Are there enough wheelchairs?
- Is the floor slippery?

Note 2

Here are examples of possible control measures:

- Use a hoist (standing hoist sling lifter).
- Use a slide board.
- Use a turning disc.
- Sit the patient on a one-way slide aid.
- Sit or kneel by the patient rather than stooping.
- Change the type of seats used.
- Modify the door to open outward.
- Label defective items for maintenance.

Transfers from floor level

Are falls to the floor frequent? Are patients frequently at floor level? List methods used and precautions taken to reduce risks associated with falling and fallen patients.	Are there any patient handling problems?	Additional control measures to consider for the future
	See Note 1	

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Note 1

Here are examples of questions to ask:

- Are uniforms and footwear adequate?
- How many workers are there and what are their fitness and skill levels?
- Can a mechanical lift be used to lift the patient?
- If a manual lift is medically contraindicated, what other control measures or techniques are available?

Manual handling concerns (other than patient handling)

Describe the handling and movement issue	Are there any manual handling problems?	Additional control measures to consider for the future
	See Note 1	

Write any comments or needs resulting from this page in the “Summary of Needs and Action Plan” at the end of the form.

Note 1

Here are examples of questions to ask:

- Do workers handle laundry?
- Do workers handle food containers?
- Are heavy or awkward objects placed too high, too low, or too far from workers?
- Do workers carry equipment?
- Are there difficulties with other departments or services?

