

MANUAL HANDLING WHEN HOME VISITING - SCH

PRACTICE GUIDELINE[®]

DOCUMENT SUMMARY/KEY POINTS

- This document outlines guidelines for Child and Family Health Team staff the processes for reducing the potential of manual handling risks for staff who are home visiting.:
 - Manual Handling injuries occur in all settings and are one of the most costly and common causes of injury. All employees must identify, assess and reduce manual handling risks
 - Child and Family Health staff should comply with the SCHN manual handling policies and attend annual, mandatory, manual handling education.
 - Child & Family Nurses should adhere to the Community Health Home Visiting Procedures, for example:

Obtaining relevant information from the carer prior to the home visit by completing the Pre Home Visit Risk Assessment form and conducting ongoing assessments of the situation.
 - Child and Family staff should take only the required equipment on a home visit and carry it in the specifically allocated bags. Staff should carry no more than two bags at a time. If more equipment is needed, staff should make an extra trip to the car to carry the extra materials. All equipment should be carried close to the body.
 - Home visiting equipment should be stored for transport in the boot of the car, not on the back seat or floor at the front of the car.
- All staff should adhere to the Professional Dress Code Guidelines

Approved by:	SCHN Policy, Procedure & Guideline Committee	Original endorsed by SCHN HCQC
Date Effective:	1 st April 2013	Review Period: 3 years
Team Leader:	Nurse Unit Manager	Area/Dept: Child & Family Health, SCH

CHANGE SUMMARY

- Updated document to reflect transition from SESIAHS to Sydney Children's Hospitals Network.
- Review of compliance with new Work Health and Safety Legislation.
- Replaces SESIH C&AH GL-005

READ ACKNOWLEDGEMENT

- **Read & Acknowledge – SESIH Child and Family Staff** working off-site (Randwick Hospitals Campus) are required to read and notify local manager when they have read and understand this document.
- All Child and Family Staff are to participate in annual mandatory manual handling education.

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Preamble

Background

To communicate to Child and Family Health staff the process for reducing the potential of manual handling risks for staff who are home visiting.

Principles

Manual Handling injuries occur in all settings and are one of the most costly and common causes of injury. All employees must identify, assess and reduce manual handling risks.

Definitions

Manual Handling means any activity requiring the use of force exerted by a person to lift, lower, push, pull, carry or otherwise move, hold or restrain a person, animal or thing.

Responsibilities

This work practice involves:

- Child and Family Health Nurses (CFHN)
- Child and Family Nurse Unit Managers (CFNUM)
- Child and Family Allied Health Staff.

Work practice

1. Child and Family staff should comply with the SESIAHS Manual Handling Policy and attend annual, mandatory, manual handling education.
2. Child & Family Nurses should adhere to the Community Health Home Visiting Procedures, for example:

Obtaining relevant information from the carer prior to the home visit by completing the Pre Home Visit Risk Assessment form and conducting ongoing assessments of the situation.
3. Child and Family staff should take only the required equipment on a home visit and carry it in the specifically allocated bags. Staff should carry no more than two bags at a time. If more equipment is needed, staff should make an extra trip to the car to carry the extra materials. All equipment should be carried close to the body.
4. Home visiting equipment should be stored for transport in the boot of the car, not on the back seat or floor at the front of the car.
5. All staff should adhere to the Professional Dress Code Guidelines.
6. On arrival at the home, staff should assess the entrance for any possible hazards. If hazards are identified, such as extensive building renovations, extensive gardening work, badly broken steps or excessively steep incline, the parent should be given an appointment at a local Early Childhood Clinic (E.C.C.) in place of a home visit.

7. Once inside the house the Child & Family Nurse should ask the carer to clear a space on a bench/table of a suitable height to weigh the baby or if the nurse is comfortable with kneeling on the floor, ensure there is available space on the floor for the equipment.
8. If the carer is unable to provide a suitable bench/table of the correct height or the floor is unsuitable, the nurse is to request that the baby be weighed and examined at another time at the Early Childhood Clinic.
9. If the carer is unable to undress or carry the baby to the scales, the nurse will organise a clinic appointment at another time.
10. The Child & Family Nurse is not to weigh or examine the baby on unsuitable surfaces.

References

1. Work Health and Safety Act 2011 No 10
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2. Work Health and Safety Regulation 2011
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3. SCHN Manual Handling NSW MoH Policy Directive PD2005_224 coversheet
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4. NSW MoH PD2005_224 "Manual Handling Incidents - NSW Public Health Services - Policy/Best Practice Guidelines Prevention" http://www0.health.nsw.gov.au/policies/PD/2005/PD2005_224.html
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<http://www.seslhd.health.nsw.gov.au/.../SESLHNPD76-OHS-StaffWorkingOffsite-RiskMgt.pdf>
6. SESLHD - SESLHDHB-016 – "Safety When Working Offsite"
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7. CHW Home and Community Visiting: Risk Management Procedure
<http://chw.schn.health.nsw.gov.au/o/documents/policies/procedures/2006-8146.pdf>

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