

Procedures re: Moving and Positioning of People in the Community – Adult Social Care

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1.1	Jan 2013	First approved version dated 2013	AL
1.2	July 2021	Review and update of document and appendices	LW
1.3	Aug 2021	Minor amendments, applicable also to Reablement Coordinators	MA/SS
1.4	Feb 2026	Review with minor amendments	CGA/KW

Related Documents

Reference	Title	Tier

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1. Purpose

- 1.1. The procedures provide guidance for all Adult Social Care (ASC) managers and practitioners who are responsible for / involved in assessing people that we support re: moving and positioning or who are providing direct care and support in the community or who are supervising those staff.
- 1.2. The procedures provide guidance to the Care Quality Team who have responsibility for ensuring that external care agencies comply with contractual arrangements and for monitoring practice.
- 1.3. The procedures also provide guidance to external care agencies.

2. Applicability

- 2.1. The procedures apply to all Occupational Therapists responsible for undertaking moving and positioning assessments of people in the community, care homes and Resource centres.
- 2.2. The procedures apply to all staff in West Berkshire Council's Reablement Service, Maximising Independence and Locality Teams who are involved in moving and positioning of people.
- 2.3. The procedures apply to members of the Care Quality Board responsible for monitoring the practice of external care agencies.

3. Roles and Responsibilities

- 3.1. The **Service Managers within Adult Social Care** are responsible for reviewing and updating the procedures in consultation with Occupational Therapists and the Team/Registered Manager – Promoting Independence who manages the Reablement Service. The review should be carried out in accordance with the published timescale and ensuring that an up-to-date version of the procedures and accompanying forms are available on the Social Care Online System.
- 3.2. The relevant **Team Managers** are responsible for ensuring procedures are followed and implemented into practice and for ensuring that staff follow them.
- 3.3. The **Allocated Worker** is responsible for bringing concerns/issues of poor moving and positioning practice to the attention of the care provider and Care Quality Team to ensure the appropriate moving and positioning procedures are being implemented.
- 3.4. **Occupational Therapists** are responsible for assessing moving and positioning. Where equipment/technique has been recommended, a moving and positioning risk assessment must be completed (see Appendix A). They are also responsible for sharing this information with the care provider/informal carer and the supported person and for demonstrating techniques specific to the supported person / environmental/ situation.

- 3.5. **All staff** involved in moving and positioning of people in the community are responsible for familiarising themselves with the procedures and ensuring that they comply with them. This includes the completion and implementation of relevant sections of the 'Client Moving and Positioning Assessment' and following them in practice.
- 3.6. They are also responsible for ensuring that relevant information is shared with colleagues / managers to ensure that safe practice is carried out.

4. Principles and Standards

- 4.1. For all people that we support requiring staff to assist them with moving and positioning, a risk assessment must be carried out using the 'Client Moving and Positioning Assessment' form (see Appendices for Document reference) and a copy must be provided for all staff involved to follow.
- 4.2. The paperwork must be completed such that it is easy to read, understand and follow especially where care workers first language may not be English. It must also be readily accessible in the care plan for staff providing care and support.
- 4.3. Wherever possible, instructions for using equipment should be provided in both written and pictorial format, with the permission of the supported person, where their image is included. This is to minimise the risks of equipment either not being used or being used incorrectly. The form to gain permissions for this purpose can be found at (see Appendices for Document reference).
- 4.4. Wherever possible external care agencies to use a risk assessment methodology and process that meets the same standards applied within Adult Social Care.
- 4.5. External care agencies are expected to follow the Client Moving and Positioning Assessment as produced by the OT, who holds the professional expertise to ensure safe and lawful practice. Any concerns that agency staff are not adhering to these instructions should be raised without delay by completing and submitting a CQ1 form to the Care Quality team via the online documentation system.
- 4.6. Any concerns regarding the safeguarding / well-being of a supported person or carer should be raised using the relevant procedures e.g. safeguarding/whistleblowing.
- 4.7. This also includes incidents where the client moving and positioning assessment identifies that only one member of staff is required but the agency insists that they will only carry out the instructions with two members of staff.
- 4.8. Concerns about internal staff or external care agency staff not following the Client Moving and Positioning Assessment can be raised by anyone who witnesses poor, inappropriate, or unsafe practice during a visit to the home. For West Berkshire Council staff, concerns should be reported to the relevant supervisor, and appropriate action taken, which may include measures under the Council's Disciplinary Procedures. Depending on the staff member involved, concerns may

also be raised with the Care Quality team, the Complaints Manager, or the Reablement Team Manager.

5. Legislation

5.1. This Policy is underpinned by Regulations 9 and 14: The Health & Social Care act 2008 (Regulated Activities) Regulations 2014 but should be read in conjunction with the following:

- The Care Act 2014
- The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- The Health and Social Care Act 2008 (Regulated Activities) (Amendment) Regulations 2015
- Mental Capacity Act 2005

5.2. The following legislation may be relevant in relation to moving and positioning:

- The Health and Safety etc at Work Act 1974 (HSWA)
- Manual Handling Operations Regulations 1992 (MHOR) (as amended 2002)
- Management of Health and Safety at Work Regulations 1999 (Amended 2006)
- Provision and Use of Work Equipment Regulations 1998 (PUWER)
- Lifting Operations and Lifting Equipment Regulations 1998 (LOLER)
- RIDDOR 2013

5.3. All relevant legislation and updates are listed on the Health and Safety Executive (HSE) website <http://www.hse.gov.uk/healthservices/moving-handling.htm>

5.4. Information on the HSE website also covers the requirements relating to risk assessment.

6. Risk Assessment

NB – the wording in 6.1 and 6.2 have been quoted directly from the HSE website and may not reflect the wording currently in use in practice.

6.1. The HSE states the following in relation to assessing risks:

Employers must reduce the risk of injury to staff and people using care services by:

- 6.1.1. avoiding those manual handling tasks that could result in injury, were reasonably practicable.
- 6.1.2. assessing the risks from moving and handling that cannot be avoided.
- 6.1.3. putting measures in place to reduce the risk, where reasonably practicable

Employees must:

- follow appropriate systems of work and use the equipment provided.

- co-operate with their employer and let them know of any problems.
- take reasonable care to ensure that their actions do not put themselves or others at risk

6.2. Two types of risk assessment are usually needed and the HSE describes these as:

Generic assessments to consider the overall needs of the setting, looking at:

- The type and frequency of moving and handling tasks.
- Overall equipment needs.
- Staffing
- The environment
- Consider the moving and handling requirements in emergency situations, such as fire evacuations or when responding to residents' falls, ensuring appropriate equipment and techniques are identified in advance.

NB: the final bullet point relates to care homes and is not covered in these procedures.

Individual assessments which consider the specific moving and handling needs of care supported people and form part of the care planning process.

- 6.3. All workers involved in assessing risks must use the 'Client Moving and Positioning Assessment' form (Appendix A), which incorporates a safer system of work. Care providers—both internal and external—are responsible for ensuring that adequate generic and individual risk assessments are included in the supported person's care plan, reflecting the risks identified by trained and competent staff.
- 6.4. The risk assessment needs to contain sufficient information regarding the circumstances / equipment needed / staff needed / environment etc such that it provides clear instructions to staff regarding practice.
- 6.5. There should be an 'enabling' approach to assessing risk which identifies what the client 'can do' to support the process as well as what they 'can't do'.

7. Procedures

Reablement Service

- 7.1. Reablement Officers and Reablement Coordinators complete the relevant sections of the 'Client Moving and Positioning Assessment'.
- 7.2. The document completed electronically and published to the carer portal of the digital social care record system in use for immediate access.
- 7.3. The forms are compiled, taking into account the needs over a 48 – 72-hour period. A complete first version will be in place by 72 hours.

- 7.4. Once the visits have been completed the carbonised document is returned to the office. A care plan and needs assessment is produced and published on the digital social care record system, with an exported copy held on the I: Drive. Those who are accessing the reablement service are offered a paper or electronic copy.
- 7.5. The risk assessment is held as a handwritten document on file in the office and as a typed copy on the I: Drive. A copy of which, including the Safer Work Plan are given to the supported person.
- 7.6. Reablement Officer continually reviews the client moving and positioning assessment. If an OT assessment is required, the Reablement staff must refer to the relevant ASC Team.
- 7.7. All Reablement staff must follow the instructions on the 'Client Moving and Positioning Assessment' to ensure that appropriate care and support is provided to the supported person.

Occupational Therapists

- 7.8. Where an OT assessment is required, the care agency is informed by the OT and invited to attend. If the care agency is not able to attend, then the OT will complete the assessment and inform the agency via telephone or secure email.
- 7.9. OTs will demonstrate techniques to care agency staff and informal carers to ensure that they are providing care and support in accordance with the moving and positioning assessment. This includes the safe use of equipment, the correct moving and positioning manoeuvres and the number of staff needed. An informal carer competency checklist can be used where appropriate (Appendix D).
- 7.10. A copy of the client moving and positioning assessment is sent to both the care agency and the supported person, and the expectation is that this is placed in the care plan by the agency and communicated to care workers.

Care Quality Team

- 7.11. The Care Quality Team will collate all service deficiencies and report to the Care Quality Board who will decide whether action needs to be taken with the provider to improve practice.
- 7.12. The Care Quality Officer should seek advice where necessary from the OT who carried out and completed the 'Client Moving and Positioning Assessment' before contacting the agency or to discuss actions proposed by them.

8. Record Keeping

- 8.1. Reablement and staff in ASC teams use different electronic client record systems. These are not compatible, and staff may have access to one or both systems, but information cannot be shared across the systems currently.

- 8.2. This means that all documents need to be recorded in both reablement systems, on the I: Drive and the online system. Service Deficiency forms are recorded on Social Care Online System.
- 8.3. Reablement will save all documents to the shared folder: I:\Adult Social Care\Customers\Home Care\Risk Assess Forms\Forms. The care plan is also held on the reablement systems.
- 8.4. Blank copies of the forms can also be found in the folder (see Appendices for Document reference).
- 8.5. All records must be completed accurately and in sufficient detail to inform other workers of the requirements / issues.

9. Training and Assessing Competency

- 9.1. All staff, whether working for West Berkshire Council or an external care agency, should be adequately trained in moving and positioning. This will be at different levels according to job role and responsibilities, in accordance with the Training Matrix for all West Berkshire Council staff.
- 9.2. All West Berkshire Council ASC staff who carry out moving and positioning must also have their practice observed and be deemed competent to practice by a member of staff who holds a certificate in moving and positioning training.

Training

- 9.3. All OTs, OTA's and Reablement staff who carry out the client moving and positioning assessments must first have undertaken the training provided by a credited training provider. This is in addition to the training that OTs receive as part of their professional qualification.
- 9.4. All new OTs, OTA's and Reablement Officers must undertake the 1-day ASC course 'Moving and Positioning of People including Hoists Foundation'.

The competence of all OTs/Reablement staff should be confirmed by:

- 9.5. Being observed in practice by a trained OT/Reablement Officer or Coordinator who will complete section three of the Observation and Competency Assessment form, see Appendices for Document reference before they conduct moving and positioning assessments on their own.
- 9.6. This should also be undertaken for new OTs and Reablement Officers in the event that there is a delay in the 'Moving and Positioning of People including Hoists Foundation' training being available.
- 9.7. External agencies can access moving and positioning training provided by West Berkshire Council. If they provide their own training, we expect the content and quality to be equivalent to West Berkshire Council's training.

- 9.8. Any concerns regarding the quality of the training if agencies are not accessing that offered by West Berkshire Council should be referred to the Care Quality team.

Assessing Competency

- 9.9. The 'Observation and Competency Assessment' form (Appendix C) must be used to assess competency. This is in 3 Sections:
- To be signed at beginning of training session re: ability to undertake physical handling techniques
 - Confirmation that training has taken place.
 - Observation in practice by moving and positioning assessor.
- 9.10. A copy of the form should be held on the staff member's supervision file, and they should be re-assessed on an annual basis: evidence of which should be recorded and held on file.
- 9.11. All Reablement Officers must be observed on an annual basis providing training to other staff to ensure that they are competent to provide the training. This must be carried out by staff who have received training in observing training practice and who is qualified in the subject.
- 9.12. All staff who complete Moving and Handling training are required to keep their knowledge and skills up to date. It is the responsibility of each individual to ensure their training remains current.

10. Customer Consent for use of images

- 10.1. In the event that a member of staff undertaking the client moving and positioning assessment feels that a photograph of the equipment being used with a client would assist care staff to use it correctly / safely, they must complete a consent form at Appendix B.

11. Health and Safety supporting Information.

- 11.1. **The Health and Safety Executive** provide a range of information and guidance documents in relation to moving and positioning on their website:
<http://www.hse.gov.uk/healthservices/moving-handling.htm>

Hazards, Physical Risks and Action Plan

	Y/N	Risk	Description and action plan
Could client's height cause a problem?			
Could the client's weight cause a problem?			
Does the client have functional limitations of upper/lower limbs?			
Are there any orthopaedic considerations?			
Does the client experience pain?			
Are there any concerns with the condition of the client's skin? e.g. tissue viability			
Does the client have any sensory impairments?			
Does the client have communication issues?			
Does the client experience seizures/involuntary movements? (Epilepsy/Parkinsons)			

Are there "attachments" to consider e.g. IV/catheters/oxygen cylinders/PEG?			
Does the client wear appropriate clothing and footwear?			
Does the client have poor head control / sitting balance?			
Does the client have any continence issues?			
Other			

Psychological Risks and Action Plan

	Yes/No	Risk	Description and action plan
Is the client cooperative/compliant?			
Does the client have difficulty following and retaining instructions?			
Is the client anxious/nervous?			
Does the client display challenging behaviour? (Verbal / physical)			

Does the client have issues with drugs or alcohol?			
Other			

Environmental Risks and Action Plan

	Yes/ No	Risk	Description and action plan
Is the space restricted?			
Is the lighting adequate?			
Is the temperature comfortable?			
Is the ventilation adequate?			
Is the bed/chair/toilet/commode an appropriate height?			
Is there a risk of slips/trips/falls? i.e. stairs/steps/rugs/wires.			
Are there uneven surfaces/torn carpet/loose rugs etc?			
Are there any pets present in the premises?			

General condition (hygiene / infestation) - comments			
Other			

Fire Risks and Action Plan

	Yes/ No	Risk	Description and action plan
Has the client had a Fire? Safety Check?			

Client Moving and Positioning Plan

List Methods used and precautions taken, number of staff involved, frequency of task, equipment used, and any further precautions taken. If using a hoist detail hoist type and sling type and size.

Client Moving and Positioning Plan

	Who could be harmed by the assessed risk?
WBC Worker	
Client	

Please detail supporting documents provided.

e.g. diagrams and instructions, sling care guidelines

Carers	
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Passed To

Date

DD	MM	YYYY
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Please Contact

Millbrook for mechanical equipment breakdowns on 0344 893 6960 West Berkshire Adult Social Care on 01635 503050 for any other issues arising.

 Please now manually change the status of this form to 'Closed' on the form screen



Consent form for use of photographs for moving and positioning purposes.

Name	ID number
Address	Date completed
<p>West Berkshire Council would like to use photographs of you in relation to the use of equipment for moving and positioning. A copy of the photograph will be placed in your care plan so that carers know how to use equipment safely.</p> <p>The photograph will <u>not</u> be used for any other purpose and must not be removed from the care plan. This will be made clear to all staff, carers, family members etc.</p> <p>This form is valid for the duration of the time you need the equipment. Please advise the care agency if you wish to withdraw your consent or make any changes to this form at any time it is in place.</p> <p><i>(In accordance with the UK GDPR and the Data Protection Act 2018, we require your consent before taking or using any photographs)</i></p>	
<p>Are there any concerns about the client’s capacity to consent to the use of photographs for these purposes?</p>	
No - Please ask customer to complete form	Yes – please complete capacity assessment and record best interests’ decision in the box below
<p>Details of MCA/best interest decision.</p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div>	

I have read and understood the information contained in this form and confirm that I consent to my image being used as outlined in this form.

Name.....

Signature: Date.....

	Competency	Competent	Not competent
1	Before the start of any assistance with moving and positioning procedure, were the needs of the supported person established?		
2	Was equipment checked as safe and ready for use?		
3	Was consent sought from the individual?		
4	Was the environment prepared, and any hazards removed?		
5	If there was a risk, they were not able to deal with, did they seek assistance before moving and handling?		
6	Did they move the individual according to the Care Plan / Risk Assessment?		
7	Did they communicate with the individual and any other carer and encourage the individual to contribute to the move as far as they were able?		
8	Did they position the individual avoiding undue pain and discomfort, enable maximum independence, ensure self-respect and dignity?		
9	Did they observe the individual throughout the move and stop the activity if needed?		
10	Did they use appropriate equipment and technique?		
11	Did they return equipment and materials to its designated location and leave the area clean and tidy?		
12	Was mechanical equipment put back on charge?		
13	If there was a risk, they were not able to deal with, did they seek assistance before commencing?		
	Action Plan	By when	By whom
	Staff name		
	Signature		
	Assessor's name		
	Signature		
	Date agreed for re-assessment (where deficits identified)		

Appendix D Informal Carer competency checklist

Informal carer moving and positioning competency checklist.

Name of client	
Name of informal carer	
Age of informal carer	
Relevant health conditions/diagnoses of informal carer	
Relevant experience of moving and positioning	
Equipment provided for use with client	List all equipment provided for moving and positioning below:
Is the informal carer the sole carer or in addition to formal care package?	
Has a copy of the moving and positioning assessment been provided?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Can the informal carer check equipment is in safe working order? <ul style="list-style-type: none"> • Equipment within service date. • Breaks in working order. • Slings are intact (no holes/frayed material/illegible labels) • Who to contact in case of equipment breakdown. 	

<p>Observation of informal carer moving and positioning client</p> <ul style="list-style-type: none"> • Repositioning in the bed (use of bed levers/sliding sheets/using functions of the bed) • Lying to sitting in bed 	<p>Date of observation:</p>
<ul style="list-style-type: none"> • Inserting/removing slings • Sit to stand. • Transfer from bed to commode/chair/shower chair/wheelchair. • Hoisting from bed to commode/chair/shower chair/wheelchair. 	
<p>Has the informal carer been offered Moving and Positioning training through West Berkshire Council?</p>	<p>Yes <input type="checkbox"/> Date of attendance:</p> <p>No <input type="checkbox"/></p>
<p>Discussion re carers positioning and back care</p>	<p>Comments:</p>
<p>Does the informal carer feel confident/competent in moving and positioning the client using the appropriate equipment?</p>	<p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p>

I certify that at this present time, I feel competent and confident with moving and positioning tasks detailed above. I understand that if circumstances change, I will inform Adult Social Care on 01635 503050.

Name:

Signature:

Date.....