TECHNICAL REPORT

CEN ISO/TR 12296

RAPPORT TECHNIQUE

TECHNISCHER BERICHT

September 2013

ICS 13.180

English Version

Ergonomics - Manual handling of people in the healthcare sector (ISO/TR 12296:2012)

Ergonomie - Manutention manuelle des personnes dans le secteur de la santé (ISO/TR 12296:2012)

Ergonomie - Manuelles Bewegen von Personen im Bereich der Pflege (ISO/TR 12296:2012)

This Technical Report was approved by CEN on 19 August 2013. It has been drawn up by the Technical Committee CEN/TC 122.

CEN members are the national standards bodies of Austria, Belgium, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, Former Yugoslav Republic of Macedonia, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, Switzerland, Turkey and United Kingdom.



EUROPEAN COMMITTEE FOR STANDARDIZATION COMITÉ EUROPÉEN DE NORMALISATION EUROPÄISCHES KOMITEE FÜR NORMUNG

CEN-CENELEC Management Centre: Avenue Marnix 17, B-1000 Brussels

Foreword

The text of ISO/TR 12296:2012 has been prepared by Technical Committee ISO/TC 159 "Ergonomics" of the International Organization for Standardization (ISO) and has been taken over as CEN ISO/TR 12296:2013 by Technical Committee CEN/TC 122 "Ergonomics" the secretariat of which is held by DIN.

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. CEN [and/or CENELEC] shall not be held responsible for identifying any or all such patent rights.

Endorsement notice

2012 has be The text of ISO/TR 12296:2012 has been approved by CEN as CEN ISO/TR 12296:2013 without any modification.

Cont	ents		Page
Introdu	ction		V
1	Scope		1
2	Terms, definit	tions and abbreviated terms	1
3 3.1 3.2 3.2.1 3.2.2 3.3			
Annex	A (informative)	Risk estimation and risk evaluation	8
Annex	B (informative)	Organizational aspects of patient handling interventions	38
Annex	C (informative)	Aids and equipment	43
Annex	D (informative)	Buildings and environment	59
Annex	E (informative)	Staff education and training	71
Annex	F (informative)	Relevant information regarding the evaluation of intervention effectivenes	s74

Introduction

National and international statistics provide evidence that healthcare staff are subject to some of the highest risks of musculoskeletal disorders (particularly for the spine and shoulder), as compared with other jobs.

Manual patient handling often induces high loads on the musculoskeletal systems, in particular on the lower back. Manual patient handling ought to be avoided where possible 1) or be performed in a low-risk manner.

Factors such as the number, capacity, experience and qualification of caregivers can interact with the following conditions to produce an increased risk of musculoskeletal disorders:

- number, type and condition of patients to be handled;
- awkward postures and force exertion;
- inadequacy (or absence) of equipment;
- restricted spaces where patients are handled;
- lack of education and training in caregivers' specific tasks.

An ergonomic approach can have a significant impact on reducing risk from manual patient handling.

A good analysis of work organization, including handling tasks and the above-mentioned risk determinants, is extremely important in reducing risks to caregivers.

The recommendations presented in this Technical Report allow identification of hazards, an estimation of the risk associated with manual patient handling and the application of solutions. They are based primarily on data integration from epidemiological and biomechanical approaches to manual (patient) handling and on the consensus of international experts in patient handling.

The assessment and control of risks associated with other aspects of manual handling can be found in ISO 11228-1, ISO 11228-2, ISO 11228-3 and ISO 11226.

© ISO 2012 - All rights reserved

v

¹⁾ As per European Council Directive 90/269/EEC on the minimum health and safety requirements for the manual handling of loads where there is a risk particularly of back injury to workers.

Ergonomics — Manual handling of people in the healthcare sector

1 Scope

This Technical Report provides guidance for assessing the problems and risks associated with manual patient handling in the healthcare sector, and for identifying and applying ergonomic strategies and solutions to those problems and risks.

Its main goals are

- to improve caregivers' working conditions by decreasing biomechanical overload risk, thus limiting workrelated illness and injury, as well as the consequent costs and absenteeism, and
- to account for patients' care quality, safety, dignity and privacy as regards their needs, including specific personal care and hygiene.

It is intended for all users (or caregivers and workers) involved in healthcare manual handling and, in particular, healthcare managers and workers, occupational safety and health caregivers, producers of assistive devices and equipment, education and training supervisors, and designers of healthcare facilities.

Its recommendations are primarily applicable to the movement of people (adults and children) in the provision of healthcare services in purposely built or adapted buildings and environments. Some recommendations can also be applied to wider areas (e.g. home care, emergency care, voluntary caregivers, cadaver handling).

The recommendations for patient handling take into consideration work organization, type and number of patients to be handled, aids, spaces where patients are handled, as well as caregivers' education and awkward postures, but do not apply to object (movement, transfer, pushing and pulling) or animal handling. Task joint analysis in a daily shift involving patient handling, pulling and pushing or object handling and transport is not considered.

2 Terms, definitions and abbreviated terms

For the purposes of this document, the following terms, definitions and abbreviated terms apply.

2.1

aids and equipment

assistive devices eliminating or reducing the caregiver's physical effort during handling of a non- or partially cooperating patient

2.2

caregiver

individual required by his or her job specification to perform manual patient handling activities

2.3

environment

all physical conditions of the area where patients have to be handled, including space, climate and surfaces