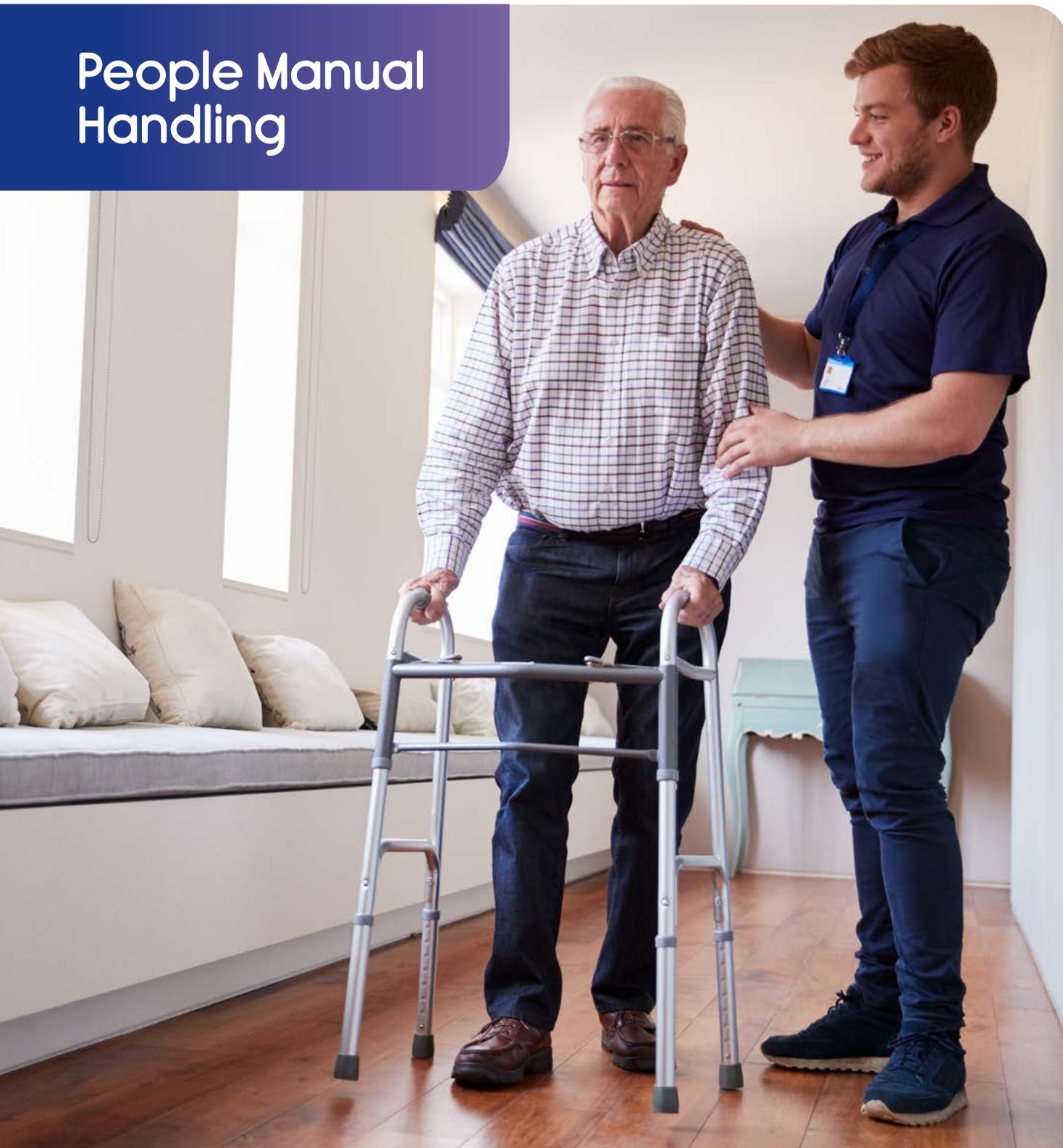


People Manual Handling





In the spirit of reconciliation Premium Health acknowledges the Traditional Custodians of country throughout Australia and their connections to land, sea and community. We pay our respects to their elders past, present and emerging and extend that respect to all Aboriginal and Torres Strait Islander peoples today.

OUR PROMISE

“

**Premium Quality,
without compromise.
It's the Premium Health
promise.**



Phillipa Wilson

Founder & Managing Director of Premium Health

**Our Trainers are
Experienced Nurses
and Paramedics**

Passionate about sharing
their experience

**Premium Quality
Programs**

We pride ourselves on the depth
of our course content and the
quality of our training materials

**Innovative Techniques,
Empowering Outcomes**

Methods remembered for years
to come

**Specialised Training,
Contextualised to
Your Workplace**

Relevant and customised to
workplaces

© PREMIUM HEALTH 2022
PUBLISHER: PHILLIPA WILSON

This booklet is copyright. Apart from any fair dealings for purposes of private study, criticism, or review, as permitted under the Copyright Act, no part may be reproduced by any process without written permission. Enquiries should be made through the Managing Director.

Welcome to your course and Premium Health.

The aim of this resource is to provide the essential knowledge and skills required in your training.

We select our Premium Health trainers and assessors carefully. All are either nurses or paramedics with appropriate training qualifications, technical expertise and experience.

PEOPLE MANUAL HANDLING

WHAT YOU NEED TO KNOW ABOUT YOUR COURSE	6	PRINCIPLES OF SAFE LIFTING AND MOVING OF LOADS	13
MANUAL HANDLING	7	SUPPORT FOR CLIENTS "ABLE TO ASSIST" ...	14
Why is safe manual handling so important?.....	7	ASSISTANCE VERSUS PROMPTING	15
What is the impact of a manual handling injury?.....	7	SAFE AND EFFECTIVE TECHNIQUES USED IN HANDLING CLIENTS WHO ARE SEMI-DEPENDENT "ABLE TO ASSIST"	15
NATIONAL WHS LEGISLATION	8	Sit to stand transfer	15
LEGISLATIVE FRAMEWORK	8	Getting off the bed	16
RISK MANAGEMENT	10	Getting off the floor.....	16
Identify the risks.....	10	Walking a client.....	16
Risk assessment.....	10	HIGH-RISK MANUAL HANDLING TASKS FOR SEMI-DEPENDENT "ABLE TO ASSIST" CLIENTS	17
Controlling risks	11	CONCLUSION	18
HIERARCHY OF CONTROLS	12		

WHAT YOU NEED TO KNOW ABOUT YOUR COURSE

Welcome

Welcome to your workshop and Premium Health. The aim of this resource is to provide the essential knowledge and skills you require to recognise the manual handling tasks performed in your workplace, the ways in which these tasks may lead to injuries and safe work practices required to minimise the risk of these injuries occurring.

Evaluation of the program

Your feedback is important to us as we use this as part of our continuous improvement cycle. Please undertake our evaluation which will be discussed with your trainer during the course.

Premium Health's customer service

We offer you an on-going service in relation to your course and invite you to call our office on **1300 721 292** or email us on customerservice@premiumhealth.com.au.

For more information about Premium Health and our health care, mental health and first aid courses, please access our website www.premiumhealth.com.au

MANUAL HANDLING

Manual handling means using your body to exert force to handle, support or restrain an object, including people or animals.

It is not just lifting or carrying heavy objects; it includes lifting, pushing, pulling, holding, lowering, throwing, carrying, packing, typing, assembling, cleaning, sorting and using tools.

The term is not limited to handling heavy objects – pruning plants, stacking items onto a shelf, helping a client into a bath and even using a keyboard. In the context of this training, this workshop is specifically about manual handling of people who are semi-dependent; they rely on someone or something for support.

Client in this workshop is interchangeable and applies to the person you support; the resident, customer, patient or carers' (unpaid/volunteer) loved one.

Workplace – includes any place in which support is provided.

The health and wellness of both you and your client are important when carrying out any task that involves physical effort, like moving from one surface to another or shifting in a bed or from a seat.

Hazardous manual handling involves:

- repetitive or sustained application of force, awkward postures or movements
- tasks that people would find difficult due to the degree of force applied (high force)
- exposure to sustained vibration
- manual handling of live people or animals
- manual handling of unstable loads that are difficult to grasp or hold

The Manual Handling Regulations define manual handling as being any activity requiring the use of force exerted by a person to lift, push, pull, carry or otherwise move, hold or restrain any object. This can incorporate “material” manual handling and the manual handling of “people”.



WHY IS SAFE MANUAL HANDLING SO IMPORTANT?

As most employment involves some form of manual handling, most workers including employers and employees are at risk of a manual handling injury. Injuries in Health, Aged Care, Rehabilitation, and Disability services remain a major work health and safety issue due to the necessity to handle people physically.

According to Safe Work Australia statistics on work-related musculoskeletal disorders, there were 36% serious claims due to body stressing. This occurs when muscles, tendons and ligaments or bones are placed under stress and can arise from a single trauma or multiple events over time. 79% of injuries, resulted from muscular stress while lifting, carrying, putting down or handling objects; 35% of claims involved the back, 20% to shoulder, 7% to knee and 7% to forearm and wrist.

	BACK	SHOULDER
Aged care sector	26%	60%
Nurses and midwives	29%	16%
Personal care attendants and nursing assistants	28%	22%

Statistics indicate that almost all professionals that are involved in client handling will at some time during their career develop a soft tissue injury, and it is when they continue to cause injury to this soft tissue, that permanent and sometimes irreversible damage occurs.

WHAT IS THE IMPACT OF A MANUAL HANDLING INJURY?

An injury that results from manual handling can have a significant impact on both employers and their workers. For an individual, an injury may not only lead to pain and the potential for ongoing disability but may also cause loss of income and may directly impact the person's future working options. Also, an injury can have an impact on person's life outside of work, including personal relationships.

If employees are injured at work, employers could be faced with an increase in compensation claims. As a result, this will directly impact insurance premiums, increasing the cost for employers, including hiring and training new staff members to perform the work in an injured employee's absence.

When colleagues are injured, this impacts the morale of the other employees.

NATIONAL WHS LEGISLATION

The Australian Government has identified Work Health and Safety (WHS) as a priority area for reform. One of the critical elements of the reform agenda is harmonisation.

Harmonisation is moving towards one national set of Work Health and Safety laws to reduce the incidence of death, injury, and disease across Australia.

Safe Work Australia is responsible for developing model work health and safety laws in partnership with state and territory governments. Employers and workers, who are represented as Safe Work Australia Members. These laws consist of the WHS Act, supported by model WHS Regulations and model Codes of Practice that can be readily adopted around Australia.

Safe Work Australia is also responsible for developing a national compliance and enforcement policy to complement the harmonised work health and safety laws. This aims to ensure a nationally consistent approach to compliance and enforcement.

The Commonwealth, Queensland, NSW, NT, and ACT enacted laws that reflect the model Work Health and Safety Act 2011 effective 1st January 2012. Tasmania passed their WHS Act, with implementation on 1st January 2013 as did South Australia. Currently, Victoria and WA continue to operate under their own legislation and Codes of Practice. Victoria's legal framework for WHS is the Occupational Health and Safety Act 2004.



LEGISLATIVE FRAMEWORK

Whether the State you are employed follows the Work Health and Safety (WHS) or Occupational Health and Safety (OHS) legislations, they are both laws which principally govern health and safety in the workplace

When addressing the risks of hazardous manual handling tasks, the provisions in both sets of laws are effectively the same. Both Acts require employers to provide their workers with a working environment that is safe and without risk to health. A workplace includes any place where employees or self-employed people work.

For home care workers and direct support workers, their workplace may include the client's home. The duty (legal obligation) of the employer extends to conditions in a client's home, in so far as the employer has control over those conditions. The control of the conditions in a client's home is limited than it might be in a more conventional workplace controlled by an employer such as a hospital or residential care facility.

Employers are also required to provide employees with safe and healthy systems of work and enough information, instruction, training, and supervision to enable them to perform their work safely.

Under the Acts, employees also have specific obligations, including:

- to take reasonable care for their health and safety
- to take reasonable care for the health and safety of others that could be affected by their actions or omissions
- to co-operate with their employer, and WHS/OHS policy and procedures

In the context of Support Workers who may work on their own without direct supervision, employers rely on:

- the skills and experience of the workers; and
- that workers always follow the designated safe working procedures.

The **Safety Regulations** specify obligations for employers and employees whose work involves *any activity requiring the use of force exerted by a person to lift, push, pull, carry or otherwise move, hold or restrain any object which also includes any person.*

The Regulations are supported by the **National Codes of Practice**. These documents provide practical guidance on how to achieve the requirements specified by the Regulations. The provisions of the Code are not mandatory – but guidelines for best practice.



THE OHS MANUAL HANDLING FRAMEWORK

OCCUPATIONAL HEALTH AND SAFETY ACT 2004

Requires employers to provide a safe working environment, safe systems of work and instruction and training



OCCUPATIONAL HEALTH AND SAFETY REGULATIONS 2017

Specifies obligations for employers in relation to manual handling tasks



COMPLIANCE CODE: HAZARDOUS MANUAL HANDLING 2019

This compliance code provides practical guidance on how to comply with obligations under Victoria's occupational health and safety legislation to manage risks associated with hazardous manual handling.

THE WHS MANUAL HANDLING FRAMEWORK

WORK HEALTH AND SAFETY ACT 2011 (21/3/2016)

Requires employers to provide a safe working environment, safe systems of work and instruction and training



WORK HEALTH AND SAFETY REGULATIONS 2017

Specifies obligations for employers in relation to manual handling tasks



QLD ONLY

CODE OF PRACTICE 2019

How to Manage Work Health and Safety Risks

CODE OF PRACTICE 2019

Hazardous Manual Tasks

CODE OF PRACTICE 2012 (1/7/2018)

Manual Tasks involving the Handling of People

THE OSH/WHS MANUAL HANDLING FRAMEWORK

OCCUPATIONAL SAFETY AND HEALTH ACT 1984 (3/10/2018)

Requires employers to provide a safe working environment, safe systems of work and instruction and training



OCCUPATIONAL SAFETY AND HEALTH REGULATIONS 1996 (2/07/2019)

Specifies obligations for employers in relation to manual handling tasks



CODE OF PRACTICE MANUAL TASKS 2010

Provides guidance on how to comply with the manual handling regulations

In addition to the legislation, the **Australian Nursing Federation ANMF Safe Patient Handling** (formerly known as “No Lift” policy) is implemented widely in all healthcare sectors, including disability, aged care, acute, rehabilitation and community. It is an industry policy that states that “the manual lifting of people must be eliminated in all but exceptional circumstances, e.g. life-threatening situations.”

The “Safe Patient Handling” policy advocates for people to actively participate in their own transfers as able, and encourages equipment to be used to reduce the risk of injury, e.g. hoists, slide sheets, etc. The implementation of a “Safe Patient Handling” policy is considered best practice.

RISK MANAGEMENT

The OHS, OSH and WHS Regulations require an employer to take three steps in dealing with manual handling tasks performed at their workplace:

- (1) Identify tasks involving hazardous manual handling.
- (2) Undertake a risk assessment to work out what has the potential to cause harm.
- (3) Control risks to ensure that any likelihood of an employee suffering a musculoskeletal disorder is either eliminated or reduced.

IDENTIFY THE RISKS

When identifying risks, we consider the potential risks to employees, visitors, or others within a workplace.

Risk identification involves looking at the tasks that are completed by a person within a workplace as part of their typical day to day activities. Risks can sometimes include visitors and others, who are not employees of the workplace i.e., clients, children, etc.

Risks can also be identified by reviewing:

- workplace incident reports
- client care plans
- job safety analysis sheets
- verbal handovers
- manual handling risk assessments of tasks

RISK ASSESSMENT

Once tasks are considered as a risk, a more detailed assessment is conducted to examine whether the activity involves:

- repetitive or sustained application of force
- repetitive or sustained awkward posture
- repetitive or sustained movement
- application of high force
- exposure to sustained vibration
- manual handling of live people or animals
- manual handling of loads that are unstable, unbalances or difficult to hold

Assess further factors as to whether there is a likelihood of a musculoskeletal injury in performing a task through damage to the muscles or skeleton such as sprains, strains, bruising, broken bones, hernias.

If a task or a problem at your workplace presents a risk to health and safety; you need to contact your supervisor. Ask if this has been identified as a risk and if any modifications are in place to control it.

If there is no control, you can complete a risk assessment to determine the risk and likelihood of the task causing an injury.

Completing a Workplace Incident Report including 'near misses' (incidents that could have led to an injury) and actual injuries, helps future control of these risks.

CONTROLLING RISKS

Risk control or minimisation requires the use of the Hierarchy of controls. Removing the risk completely or creating safer ways to complete the task. Where you are not able to eliminate the risk, you must reduce it as far as practicable.

Practicable = weighing up the following:

- severity of the hazard or risk in question
- state of knowledge about the hazard/risk and any ways of removing or reducing that hazard/risk
- availability and auditability of ways to remove or reduce that hazard/risk
- cost involved in removing or reducing that hazard/risk

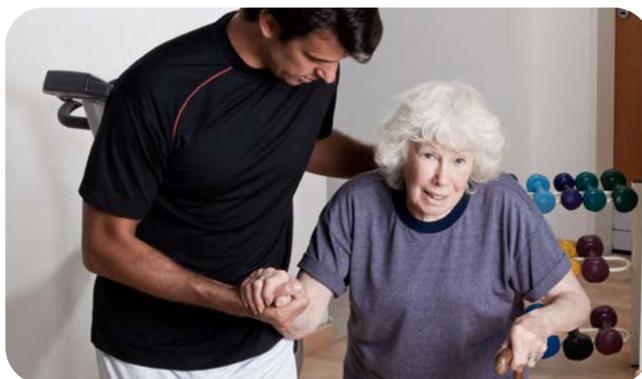
To eliminate or reduce manual handling risk, the client should be encouraged to move themselves as much as is able. In people manual handling training, "able to assist" refers to clients who can understand and follow instructions to physically participate in the process. If clients are unable to participate, they are classified as "dependent" or "full assist" clients.

Premium Health has a separate Advanced People Manual Handling training course for those workers supporting dependent clients.

When supporting a client who requires minimal physical support, use available equipment to assist them and reduce the risk of injury.

Such equipment can include:

- hand/grab rails
- modified/specific chair
- dining chair with lockable wheels
- leg lifter
- bed stick (attached to the side of the bed, this allows them to help themselves to sit up on the side of the bed)
- bed-rope (attached to the middle of the foot of the bed allows them to raise themselves from a lying to a sitting position)
- walking aids such as a frame or stick



When using specific equipment such as mechanical aids, or associated accessory/consumables such as ropes which have the lifespan, check the health care plan for regular maintenance - wear and tear.

Keep manuals for walking aids (frames etc) safe and handy so instructions and maintenance can be reviewed. Staff training in how to use and maintain the equipment, should be conducted by an occupational therapist or physiotherapist.

Avoid working positions that involve:

- extended reaches with the arms because of the demands they place on the shoulder joint (arms make up about 13% of our body weight)
- raising arms out from the sides of the body
- movements or actions which bend the wrist up or down or cause the hand/wrist to move from side to side without moving the forearm.
- lifting while sitting
- lifting from the floor or above shoulder height
- extending your neck by looking up or bending the neck back when lifting from overhead
- bending the neck forward or backward
- excessive walking or forceful contact of the feet and legs with hard surfaces
- sustained stooping, leaning backward or leaning sideways
- unnecessary tasks
- movements where your shoulders are not kept in alignment with the hips so that we do not twist our spine while doing a manual handling task
- using manual handling equipment that you have not been instructed to use, as it may put undue force on our bodies

HIERARCHY OF CONTROLS

RISK CONTROL ACTION	DESCRIPTION	EXAMPLE 1	EXAMPLE 2
Eliminate the hazard	No longer carry out the task	Do not shower client	Do not clean the shower
IF THIS IS NOT PRACTICAL, THEN			
Substitute for a lesser risk	Substitute the hazard giving rise to the risk with one that presents a lesser risk	Bed-bathe or sponge the client	Use a safer/less toxic cleaning product
AND/OR			
Isolate the hazard from the person at risk	Separate the hazard in time or space from the person at risk	Shower the client in another accessible room until the hazard is resolved	Leave the bathroom to air after applying the shower cleaner
AND/OR			
Use engineering controls	Physical changes to equipment or the environment e.g. redesign, ventilation	Modify the shower for level access, shower the client on a shower commode chair, use a hand shower	Install an exhaust fan to increase ventilation when cleaning the shower
IF THIS IS NOT PRACTICAL, THEN			
Use administrative controls	Changing work methods, organisation of tasks, review work routines, training	Write a procedure on how to shower the client safely, train workers in the procedure	Provide material safety data sheets, train workers in safe use of chemical
AND/OR			
Use personal protection	Least effective. Use in combination with other controls	Wear glove, non-slip shoes, apron when showering client	Wear gloves and a mask to clean shower

Within the health sector manual handling consists of more than just moving and assisting clients. For example the way we find ourselves up the end of the bed, sit at

our desks, move linen bags, contribute to the manual handling demands we put on our body each day.

SAFE HANDLING:

- › Eliminates the manual lifting of people in all but life-threatening situations.
- › Maintains and promote client independence.
- › Means never lifting a person. Lifting is a very high-risk activity as a heavy, unstable, and an unpredictable load on the musculoskeletal system.

PRINCIPLES OF SAFE LIFTING AND MOVING OF LOADS

Before undertaking any manual handling tasks with your clients or within your work environment, remember your principles of safe lifting and moving of loads.

BE SMART:

S

Size up the load

- Stop and think ahead.
- Plan and know exactly what you are going to move and what you are going to need to move the load safely.

M

Move close to the load

- Brace your body as solid as possible using the strength of your torso/core body.
- Keep the weight (load) close to you.
- Bringing the work to waist level where possible.
- Avoid using lower arms, lower back or hands, pinch/pen grip.
- Use a full hand power grasp (broom handle grip).
- Maintain the 3 natural curves in your back when lifting - head up and chin in.

A

Always bend your knees

- Use your biggest/most active, strongest muscles in the thighs, biceps (not your back).
- Bend from the knees or 'squat'.
- Keep feet hip width apart – stable base.
- If lifting from a low level, bend your knees, adopting a semi-squat posture (don't let knees come forward over toes).
- Weight through heels.

R

Remember to brace

- Prepare your physical body for support.
- Feet apart for balance or leading leg forward.
- Engage the torso (core).

T

Turn by moving your feet

- Don't twist the body trunk when turning to the side. Position feet in stride standing, toes pointing forwards. Weight starts on 1 leg and transfers smoothly in a forward/backward direction to the other leg (lunge).
- Feet slightly wider than hip width, toes turned out at 45 degrees.

SUPPORT FOR CLIENTS "ABLE TO ASSIST"

Able to assist clients rely on someone or something for support.

All staff should follow their WHS/OHS compliance management process to identify, assess, eliminate, control, monitor and review manual handling hazards in the support environment.

This risk identification assessment should include the client's:

- range of assistance they can provide in their own movements
- ability to comprehend and cooperate
- whether they are ambulant (AMB) - able to walk about OR are non – weight bearing (NWB)
- their gait – a person's manner of moving their feet, walking; step, walk, stride, pace or tread
- their pace – ability to move, take a single step taken when walking

As well as assistance devices use including:

AD	Assistive device
PUW	Pick up walker
SW	Standard walker
WC	Wheel chair
WW	Wheeled walker
WF	Wheely frame
GF	Gutter frame
SPS	Single point stick
WS	Walking sling
SBA	Stand by assist
CGA	Contact guard assist

Measures to eliminate or minimise these risk factors must be implemented wherever possible, using safe handling principles. These WHS/OHS risk factors can be built into the design of the clients care plan with high tasks/practices excluded.

Always consult and follow the client's person care plan for up to date specific health management and individualised physical therapy support techniques.

Variations may be necessary depending on the client's health condition and adaptations required to meet their needs. Manual handling assessments need to be monitored and reviewed on a regular basis as many factors can change particularly in relation to the clients age, weight, increased deformity, and decreased mobility.

Regular review of safe work procedures and client manual handling plans is necessary to ensure any new manual handling risks are identified and consult your supervisor immediately if unsure.

Always follow your workplace policies and procedures about manual handling in areas such as:

- bed heights
- no-lift policies
- good body alignment
- principles of body mechanics
- personal protective equipment PPE
- attending regular professional development on manual handling

Factors that indicate increased risk in client handling situations include:

Clients who:

- have unpredictable and/or uncontrolled movement
- have a deteriorating and/or fluctuating condition
- are inconsistent in their ability to weight bear
- are non-weight bearing (NWB) and/or unable to support most of their body weight
- are prone to unexpected falls
- have special needs

Have special handling needs such as:

- fragile skin,
- breathing difficulties,
- pain on movement,
- deformity
- contractures
- challenging behavior
- impaired communication
- obesity
- impaired cognition

ASSISTANCE VERSUS PROMPTING

Communicating with both parties when manual handling people who can assist, benefits you and the client.



Always consult with the person being moved to assess how much they can help, allowing them to assist wherever possible using verbal and non-verbal cues.

This encourages and involves the client as much as they are able; keeping them informed on the next move and what to expect.

Good communication reduces or eliminates the risk of injuries, by ensuring correct body mechanics. Consultation is of great benefit to the clients self esteem, as well as maintaining their independence, maintaining their strength, core and muscle tone.



SAFE AND EFFECTIVE TECHNIQUES USED IN HANDLING CLIENTS WHO ARE SEMI-DEPENDENT “ABLE TO ASSIST”



SIT TO STAND TRANSFER

- › Client moves bottom forward in chair.
- › Feet apart under knees, shoulder width apart.
- › Make sure feet of the person you are assisting are in non-slip footwear and firmly touching the ground before standing upright.
- › Hold arms of chair.
- › Leans forward pushing up with arms and downwards with the legs to the feet to stand.



SAFE AND EFFECTIVE TECHNIQUES (SEMI-DEPENDENT CLIENTS)

Points to consider:

Before undertaking this process, you should assess the following:

- what kind of chair is the client standing from?
- are the wheels locked?
- do they have some type of non-slip footwear on?
- do they need a walking aid, is it within reach?
- do not place walking aid in front of client, as they may try to use this to pull themselves into a standing position



GETTING OFF THE BED

- › Client rolls onto side
- › Moves their bottom forward in bed.
- › Slides their legs off the bed.
- › Pushes up to sit using their elbows and hands.
- › Feet apart under knees, shoulder width apart.
- › Leans forward pushing up with arms and legs to stand.

Points to consider:

- can you raise the head of the bed, so the client doesn't have as far to push up from?
- ensure the height of the bed allows the clients feet to touch the floor
- if the client can't place their feet on the floor, is it safe to use a step stool?
- or lower the bed once they are upright?
- some clients may feel dizzy when they go from a lying position to a sitting position - allow client to rest until dizziness passes

GETTING OFF THE FLOOR

This technique is only to be used in cases where a client has been on the floor, due to activity exercise or behaviours. It is not to be used in the case of a client falling to the ground and the risk of an injury being present.

- › Bring a chair to the client.
- › Instruct client to get onto their hands and knees.
- › Client to move their hands onto chairs arm, or seat.
- › Slowly raise onto one knee, then the other.

Points to consider:

- › Does the chair have wheels? If so, ensure they are locked.
- › Does the client have appropriate non-slip footwear on?
- › Is the client verbal? Are you able to demonstrate the technique to them?

WALKING A CLIENT

- › Use a gait aid if required.
- › Walk at the client's pace.
- › Never pull the client along with their frame.
- › Position your arms around the person's waist and stand to the side holding their hand/frame if required.
- › Ensure the client is wearing appropriate non-slip, well-fitting footwear.
- › Communicate with your client, about where you are going and how they are feeling, take breaks as needed.
- › Always lead or start with the stronger foot when going up a stair. The reverse occurs when going downstairs, the weaker foot leads. (Good leg to heaven and bad leg to hell - is often a way to remember which foot to begin.)

HIGH-RISK MANUAL HANDLING TASKS FOR SEMI-DEPENDENT “ABLE TO ASSIST” CLIENTS

The following have been identified as particularly **high risk** and should **NOT** be undertaken. **High Risk tasks are to be eliminated from routines** and replaced with safe, alternative practices and the use of manual handling equipment.



BEAR-HUG



SHOULDER LIFT



TOP AND TAIL LIFT



HOOK UNDERARM



CRADLE LIFT



FULL BODY LIFT

CONCLUSION

Create better systems of work and minimise risks in your work setting by following people manual handling procedures.

Review client's health care plan for the task, communicate the procedure and encourage the client to assist where they are able. If in doubt, check a risk assessment has been done and that the physical work and any equipment used is appropriate for the manual handling task in supporting your client. People manual handling procedures should be created for each manual handling task.

Support workers should receive ongoing, structured education and training on correct use and maintenance of any equipment such as walking frames, walking sticks and beds/rails which assist client. Clear guidelines for support workers from allied health professionals, on how and when to use mobility aid equipment should be documented in health care plans.

Manual handling people is a major cause of injury in all workplaces, but especially for those who work in community health services. Poor working postures and repetitive movements are major factors in contributing to manual handling injuries. Support workers need to "work" with their bodies and understand its limitations to avoid unsafe work practices and postures.

If you don't feel safe performing a task, then stop, ask for help, and speak to your supervisor. If you can see a better/safer way of doing a people manual handling task, be proactive and undertake a risk assessment to discuss with your supervisor.

REFERENCES

Australian Nursing and Midwifery Federation

(November, 2018). Workplace Health and Safety and Workers Compensation. Retrieved from Australian Nursing and Midwifery Federation: <http://anmf.org.au/pages/workplace-health-safety>

Commission for Occupational Safety and Health

(2014, May 21). Code of Practice- Manual tasks. Retrieved from Government of Western Australia Department of Mines, Industry Regulation and Safety: <https://www.commerce.wa.gov.au/publications/code-practice-manual-tasks>

Safe Work Australia

(2020, Mar 20). Model WHS Laws. Retrieved from Work Safe Australia: <https://www.safeworkaustralia.gov.au/law-and-regulation/model-whs-laws>

State of Queensland (WorkCover Queensland)

(2021) https://www.worksafe.qld.gov.au/__data/assets/pdf_file/0020/72632/hazardous-manual-tasks-cop-2021.pdf

State of Western Australia (Department of Mines, Industry Regulation and Safety)

(2019, Dec 16). About the Occupational Safety and Health Act 1984. Retrieved from Government of Western Australia Department of Mines, Industry Regulation and Safety: <https://www.commerce.wa.gov.au/worksafe/about-occupational-safety-and-health-act-1984>

WorkSafe Victoria

(2005, Oct). <https://www.worksafe.vic.gov.au/resources/victorian-home-care-industry-occupational-health-and-safety-guide>

(2009, July). Transferring people safely: A handbook for workplaces. Retrieved from WorkSafe Victoria: <https://www.worksafe.vic.gov.au/resources/transferring-people-safely-handbook-workplaces>

(2010, Oct). Assisting people in wheelchairs: A health and safety solution. Retrieved from WorkSafe Victoria: <https://www.worksafe.vic.gov.au/resources/assisting-people-wheelchairs-health-and-safety-solution>

(2011, Jun). Home care occupational health and safety compliance kit . Retrieved from WorkSafe Victoria: <https://www.worksafe.vic.gov.au/resources/home-care-occupational-health-and-safety-compliance-kit>

(2011, May). Moving and lifting objects: A health and safety solution. Retrieved from WorkSafe Victoria: <https://www.worksafe.vic.gov.au/moving-or-lifting-objects>

(2015). Injury Hotspots - Nurses and Midwives. Retrieved from WorkSafe Victoria: <http://injuryhotspots.com.au/#/nursesandmidwives>

(2015). Injury Hotspots - Personal Care Assistants and Nursing Assistants. Retrieved from WorkSafe Victoria: <http://injuryhotspots.com.au/#/personalcareassistantsandnursingassistants>

(2017, Jun). Guide to the Occupational Health and Safety Regulations 2017. Retrieved from WorkSafe Victoria: <https://www.worksafe.vic.gov.au/resources/guide-occupational-health-and-safety-regulations-2017>

(2019, December). Compliance code: Hazardous manual handling. Retrieved from WorkSafe Victoria: <https://www.worksafe.vic.gov.au/resources/compliance-code-hazardous-manual-handling>

(2019, Oct 28). Occupational health and Safety Act and Regulations. Retrieved from WorkSafe Victoria: <https://www.worksafe.vic.gov.au/occupational-health-and-safety-act-and-regulations>

(2020, Mar 03). Hazardous manual handling health and safety guide. Retrieved from WorkSafe Victoria: <https://www.worksafe.vic.gov.au/hazardous-manual-handling-health-and-safety-guide>



Premium Health has a range of health care, first aid and mental health training programs conducted by our nurses, paramedics or mental health practitioners.



Call us to discuss our onsite face-to-face and live virtual classroom options, delivered anywhere in Australia.

HEALTH CARE

- Assisting clients with medication
- Assisting clients with medication (part 2)
- Advanced medication - eye and ear drops, topical creams, oral liquids and patches
- Autism spectrum disorder
- Blood pressure – using a digital blood pressure machine
- Bowel management – elimination
- Coronavirus and infection control
- Dementia training for support workers
- Diabetes training for support workers
- Dysphagia for support workers
- End of life care
- Epilepsy training for support workers
- Epilepsy training and midazolam administration via intranasal and buccal routes
- Food safety awareness for support workers
- Infection control
- Managing behaviours with positive support
- Manual handling
- Nebuliser training for asthma
- Ostomy and stoma care for support workers
- Positive behaviour support
- Pressure injury – prevention and care for support workers
- Providing personal care with dignity and respect
- Shallow suctioning
- Tube feeding management
- Urinary catheter care
- Wound care awareness for support workers

FIRST AID TRAINING

- Cardiopulmonary resuscitation (CPR)
- Provide first aid
- Asthma and anaphylaxis
- Advanced first aid

MENTAL HEALTH

- Mental health first aid
- Leadership and resilience training
- Mental health awareness

And many others...

1300 721 292

premiumhealth.com.au

info@premiumhealth.com.au

ABN 24 692 649 946