

NATIONAL HOSPITAL  
INTERVENTION AND COMPLIANCE CAMPAIGN



Preventing slip, trip & manual task injuries



**Audit Campaign Findings**  
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## *Background*

- National campaign run by state-based OSH enforcement agencies in 2007-2008.



**Scope:**

- manual tasks and slips/ trips in non-clinical areas of hospitals, focusing on kitchen, laundry and CSSD (Sterilising) departments
- Also ran in conjunction with a survey by the Australian Safety & Compensation Council of OSH Managers & Employees in the above work areas

## *Campaign Objectives*



- Assess level of compliance with relevant legislation and control of manual tasks and slips/ trips hazards.
- Improve awareness and risk control of the above hazards in non-clinical areas of hospitals
- Provide advice, assistance and share examples of best practice
- Identify barriers to use of controls

## *Campaign Model*



The campaign consisted of

- Workplace audits (21 in WA; 7 rural, 14 metro; 14 public, 7 private), with 203 audits completed nation-wide.
- Pre & post audit survey completed by ASCC
- Audits were limited to hospitals (excluding psychiatric hospitals & nursing homes), with > 20 employees



## *National Outcomes*

- 2 prohibition notices, 103 improvement notices, and 300 instances of formal advice provided.
- Majority of action taken was for manual tasks (70%), and majority of improvement notices were for CSSD work areas.
- Majority of hospitals (~ 70%) were rated as above compliant for hazard ID, risk Ax, risk control, purchasing, training and management commitment

## *Barriers to controlling risks*

- The most common barrier identified during audits to effective control of manual tasks and slips/trip hazards was inadequate time, budget and staffing resources.

### *Common manual task issues: Laundries*

- Pushing/ pulling trolleys (can be up to 300kg in weight when loaded!)
- Overfilled linen bags/ overloaded trolleys
- Manual lifting/loading of dirty/ clean linen
- Repetitive sorting/ folding of linen

### *“Best Practice” controls for manual tasks in laundries*

- Use of motorised tugs to move linen trolleys
- Use of linen chutes to reduce need to push trolleys
- Use of well designed trolleys that allow clear vision and easy manoeuvrability, preventative maintenance schedules for trolleys
- Replacement of large linen bags with smaller bags to prevent over-filling
- Modification of wheeled linen skips with straps or other methods to prevent overfilling of linen bags

### *Best practice – Laundries manual tasks continued..*

- Contracting out (risk transfer) of linen delivery/collection to private linen supply companies
- Use of hooks/ paddles to reach linen or bags at far depths of trolleys or machines to prevent over-reach
- Spring loaded bases for linen collection trolleys
- Preventing double handling by maintaining linen stored on trolleys, rather than unloading to shelves from trolleys
- Automatic tilting washing machines, to allow gravity to assist removal of wet linen from machine.

### *Common manual task issues: Food Services*

- Stock handling
- Repetitive tasks
- Moving trolleys
- Loading dishwashers

### *“Best Practice” controls for manual tasks in food services*

- Use of motorised tugs for trolley movement or motorised trolleys
- Well-designed trolleys
- Trolley preventative maintenance programs
- Automated dishwashers, with auto-feed in option
- Use of in-situ boilers in kitchens
- Logical and cyclical layout of kitchens

### *Best practice – food services manual tasks cont'd...*

- Liaising with food suppliers re: packaging of goods to limit weight to 5-10kg
- Planning food storage areas to minimise manual handling risks
- Use of trolleys to transport goods
- Appropriate height work benches/ conveyors
- Task rotation schedules to minimise risks from repetitive tasks, developed in consultation with workforce

### *Common manual tasks issues: CSSD*

- Repetitive work
- Loading/ unloading in storage areas
- Loading/ unloading sterilising machines
- Handling of loan sets
- Moving trolleys

### *“Best Practice” controls for manual tasks in CSSD*

- Automated systems (steriliser doors, loaders/ unloaders, conveyors)
- Height adjustable work benches
- Sit-stand work benches to allow postural changes
- Storage of items on trolleys to prevent double handling to/from shelves
- Restricting weight of individual packs/ surgical trays to 5kg

### *Best practice – CSSD manual tasks cont'd...*

- Double sided/tunnel washer units allowing access from 2 rooms (separation of clean/ contaminated areas)
- Modified sinks (inserts or shallow design) to reduce bending
- Wheeled equipment preventative maintenance program
- Staff rotation to minimise risk associated with repetitive tasks
- Use of automated lifting devices for heavier loan sets & chemical drums

### *Common slips/trips issues: Laundry, Food Services & CSSD*

- Liquids/contaminants on floors
- Uneven flooring
- Poorly maintained/worn flooring
- Poorly designed steps
- Inappropriate footwear for staff
- Timing of floor cleaning tasks

### *“Best Practice” controls for slip/ trip hazards in hospitals*

- Non-slip flooring
- Footwear policies
- Good housekeeping/ clear walkways
- Quick response to spills
- Adequate lighting
- Ramps/lifts in preference to stairs
- Good drainage for wet areas
- Equipment maintenance

### *“Best Practice” in Purchasing*

- Equipment trials
- Use of OSH committees in trial/ product evaluation
- Extensive consultation/ staff feedback
- Risk assessments prior to purchase
- Seeking expert advice
- Product evaluation committees – multi-disciplinary
- “Ideal World” – sharing of information across sites, with central database of equipment trials

## *“Best Practice” in Training*

- Uses a risk management approach
- Competency based
- Both theoretical and work area specific practical training
- Slip/ trip risk factors included in general safety inductions

## Where to from here?

- Full report is available from WorkSafe WA (Contact [christina.paterson@commerce.wa.gov.au](mailto:christina.paterson@commerce.wa.gov.au))
- Full report has already been emailed to every health service (in theory!) via OSH Manager
- Questions?