



		<b>Health &amp; Safety Risk Assessment Form</b>	
<b>Ref:</b> CF:034:03:WE		<b>RE: Task Specific Manual Handling (inanimate load) Risk Assessment Form (worked example)</b>	
<b>Issue date:</b>	April 2018	<b>Revised Date:</b>	October 2023
<b>Author(s):</b>	National Health & Safety Function		
<b>Legislation</b>	Under Section 19 of the Safety, Health and Welfare at Work Act, 2005 and associated Regulations, it is the duty of the employer to identify the hazards and assess the associated risks in the workplace. All risk assessments must be in writing and the necessary control measures to eliminate or minimise the risk documented and implemented.		
<b>Note:</b>	<p>When conducting task specific manual handling (inanimate load) risk assessments consideration should be paid to the risk presented and the means of avoiding and mitigating any such risk so far as is reasonably practicable.</p> <p><i>It is the responsibility of local management to implement any remedial actions identified.</i></p> <p><i>The following provides an explanation on how to complete the task specific manual handling (inanimate load) Risk Assessment Form.</i></p>		



Sample Task Specific Manual Handling (Inanimate Loads) Risk Assessment Form	
Division: Acute Hospitals	Source of Risk: Risk Assessment
HG/CHO/NAS/Function: HGX	Primary Impact Category: Harm to Person
Hospital Site/Service: ABC Hospital	Risk Type: Operational
Dept/Service Site: Stores Department	Name of Risk Owner (BLOCKS): Joe Bloggs, Stores Manager
Date of Assessment: 00/00/0000	Signature of Risk Owner: As above
Unique ID No: 1234	Risk Co-Ordinator:
Objective being impacted: Compliance with OSH Legislation and the maintenance of a safe and healthy work environment	<sup>1</sup> Risk Assessor(s): Joe Bloggs and portering staff
Task Description	
Description of task being assessed to include technical details	Collection of stationery delivery (boxes wrapped in cellophane) from the footpath in the storage yard and transport them to the stationery store at the rear of the office building. This task requires crossing a busy, poorly lit yard, walking up two steps to enter the building, carrying the stationery along a long corridor where obsolete equipment has been left, ascending a short flight of stairs (4 steps) and leaving the stock on the ground of the stationery store.
Where is the task being carried out?	Storage yard, corridor off office building and stationery store
Personnel involved in task	1 person i.e. The Porter on duty
Frequency of task /duration of task	Weekly / 30mins
Consider	Can the activity be avoided? YES NO <input checked="" type="checkbox"/> If No, continue with the assessment and record.

<sup>1</sup> Risk Assessor required for OSH risks only.



**Identify the appropriate risk factors\***  
**(Please Tick)**

<b>INDIVIDUAL</b>	<input type="checkbox"/>
Physically unsuited to task in question	<input type="checkbox"/>
Unsuitable clothing/footwear/other personal effects	<input type="checkbox"/>
Inadequate training or knowledge	<input type="checkbox"/>
Young, old or inexperienced employee	<input type="checkbox"/>
Pregnant or breastfeeding employee	<input type="checkbox"/>
Employee physically unfit	<input type="checkbox"/>

<b>INANIMATE LOAD</b>	<input type="checkbox"/>
Too heavy or too large	<input type="checkbox"/>
Unwieldy/difficult to grasp	<input checked="" type="checkbox"/>
Unstable or contents likely to shift/move unexpectedly	<input type="checkbox"/>
Manipulated or held at distance from trunk	<input type="checkbox"/>
Shape requires bending/twisting of trunk	<input checked="" type="checkbox"/>
Temperature, contours, consistency, texture unsuitable	<input type="checkbox"/>

<b>OTHER</b>	<input type="checkbox"/>
Movement or posture hindered by clothing or PPE	<input type="checkbox"/>
Suitable PPE available and being worn	<input type="checkbox"/>
Quantity, availability and suitability of equipment	<input type="checkbox"/>
Staffing levels	<input checked="" type="checkbox"/>
Supervision of manual handling activities	<input type="checkbox"/>

<b>TASK</b>	<input type="checkbox"/>
Over frequent	<input type="checkbox"/>
Over prolonged	<input type="checkbox"/>
Involves the spine	<input checked="" type="checkbox"/>
Insufficient rest/recovery	<input type="checkbox"/>
Excessive lifting or lowering	<input type="checkbox"/>
Excessive carrying distances	<input checked="" type="checkbox"/>
Fixed work rate imposed by process	<input type="checkbox"/>
Too strenuous	<input type="checkbox"/>
Only achieved by twisting movement of trunk	<input checked="" type="checkbox"/>
Likely to result in sudden movement of load	<input type="checkbox"/>
Made with body in unstable posture	<input type="checkbox"/>

<b>ENVIRONMENT</b>	<input type="checkbox"/>
Space or vertical/height restrictions, narrow corridors	<input type="checkbox"/>
Floor uneven, slippery or has varying surface	<input checked="" type="checkbox"/>
Workplace prevents lifting/handling at safe height	<input type="checkbox"/>
Floor unstable/footrest unstable	<input type="checkbox"/>
Temperature, humidity, lighting, ventilation unsuitable	<input type="checkbox"/>
Stairs	<input checked="" type="checkbox"/>
Trailing leads, untidy storage or other trip hazards	<input checked="" type="checkbox"/>

\* Adapted from Schedule 3 to the Safety, Health and Welfare at Work General (Application Regulations), 2007



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<sup>2</sup> HAZARD & RISK DESCRIPTION			EXISTING CONTROL MEASURES			ACTIONS [ADDITIONAL CONTROLS] REQUIRED			<sup>3</sup> ACTION OWNER		DUE DATE
Risk of musculoskeletal injury to portering staff due to force and effort required to move boxes i.e. <ul style="list-style-type: none"> <li>• stooping and bending of the spine</li> <li>• Poor Lighting</li> <li>• Distance, ground variations/stairs and obstacles enroute</li> </ul>			<ul style="list-style-type: none"> <li>• Manual Handling Policy has been brought to the attention of all staff.</li> <li>• Correct/appropriate footwear worn by employee carrying out this task (in line with local footwear policy/guideline).</li> <li>• Extra care and vigilance taken by employee when ascending or descending stairs and steps while carrying out this task</li> <li>• Staff (Porter) has received Manual Handling training</li> </ul>			<ul style="list-style-type: none"> <li>• Remove obsolete equipment from corridor and walkways</li> <li>• Arrange for the weight of the boxes to be reduced and ensure that weights are displayed on the outside of the boxes.</li> <li>• Provide additional personnel to assist</li> <li>• Request supplier to deliver the goods to the stationery store</li> <li>• Provide a suitable stair climbing trolley for the task</li> <li>• Provide appropriate shelving at waist height to store stationery boxes</li> <li>• Adequate lighting to be provided and maintained</li> <li>• Re-location of the stock room to ground floor level</li> <li>• Provide dedicated pedestrian walkway in yard</li> </ul>			Enter the name (s) of the responsible person(s) for implementing each of the control measures.		Enter the date by which implementation of the additional controls to mitigate the Risks are due.
<sup>4</sup> Inherent Risk			<sup>5</sup> Residual Risk			<sup>6</sup> Target Risk			Risk Status		
Likelihood [1-5]	Impact [1-5]	Rating [Likelihood x Impact]	Likelihood [1-5]	Impact [1-5]	Rating [Likelihood x Impact]	Likelihood [1-5]	Impact [1-5]	Rating [Likelihood x Impact]	Open	Monitor	Closed
4 [Likely]	3 [Moderate]	12 [Medium]	3 [Possible]	3 [Moderate]	9 [Medium]	2 [Unlikely]	3 [Moderate]	6 [Medium]	Open		

<sup>2</sup> Where the risk being assessed relates to an OSH risk please ensure the HAZARD and associated risk are recorded. Other risk assessments require a risk description only.

<sup>3</sup> Person responsible for the action.

<sup>4</sup> Rating **before** consideration of existing controls.

<sup>5</sup> Rating **after** consideration of existing controls.

<sup>6</sup> Desired rating **after** actions.