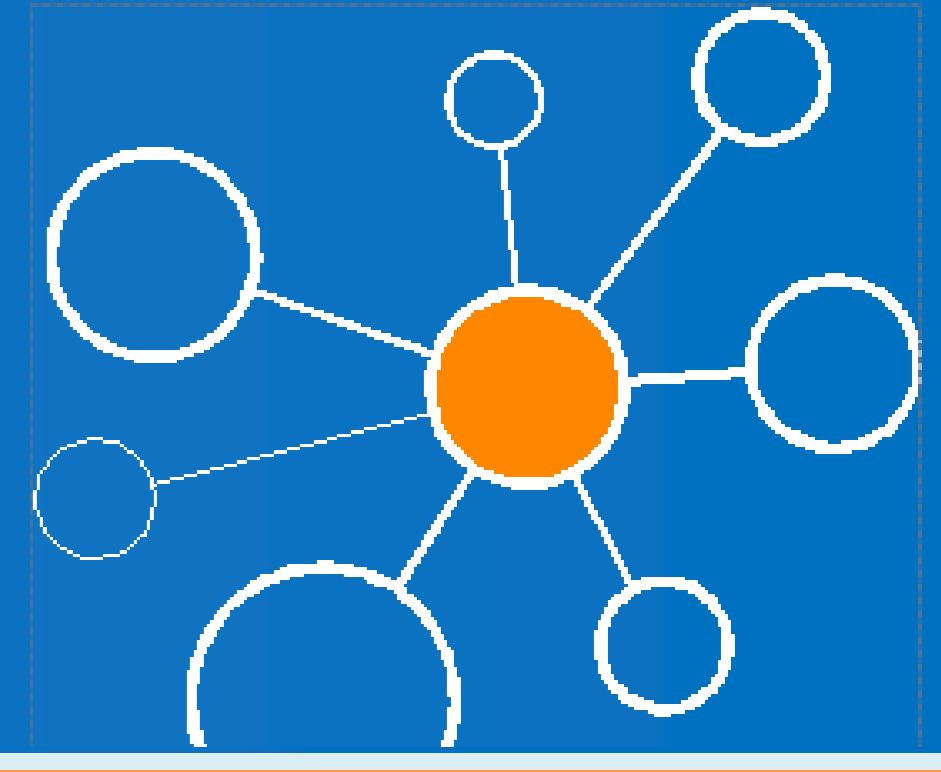


# Changing Staff Perception of the Manual Handling Team's Remit

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## The Project Driver

The Manual Handling Team receive many requests for services which are provided by other departments within our Trust, leading to frustration on both sides.

A project was devised to find a baseline re: Manual Handling Service knowledge with the aim of improving the understanding of manual handling provision in our Trust

## Aim

To improve Prescott Ward staff's understanding\* of the MH Team's remit by 25% by October 2018

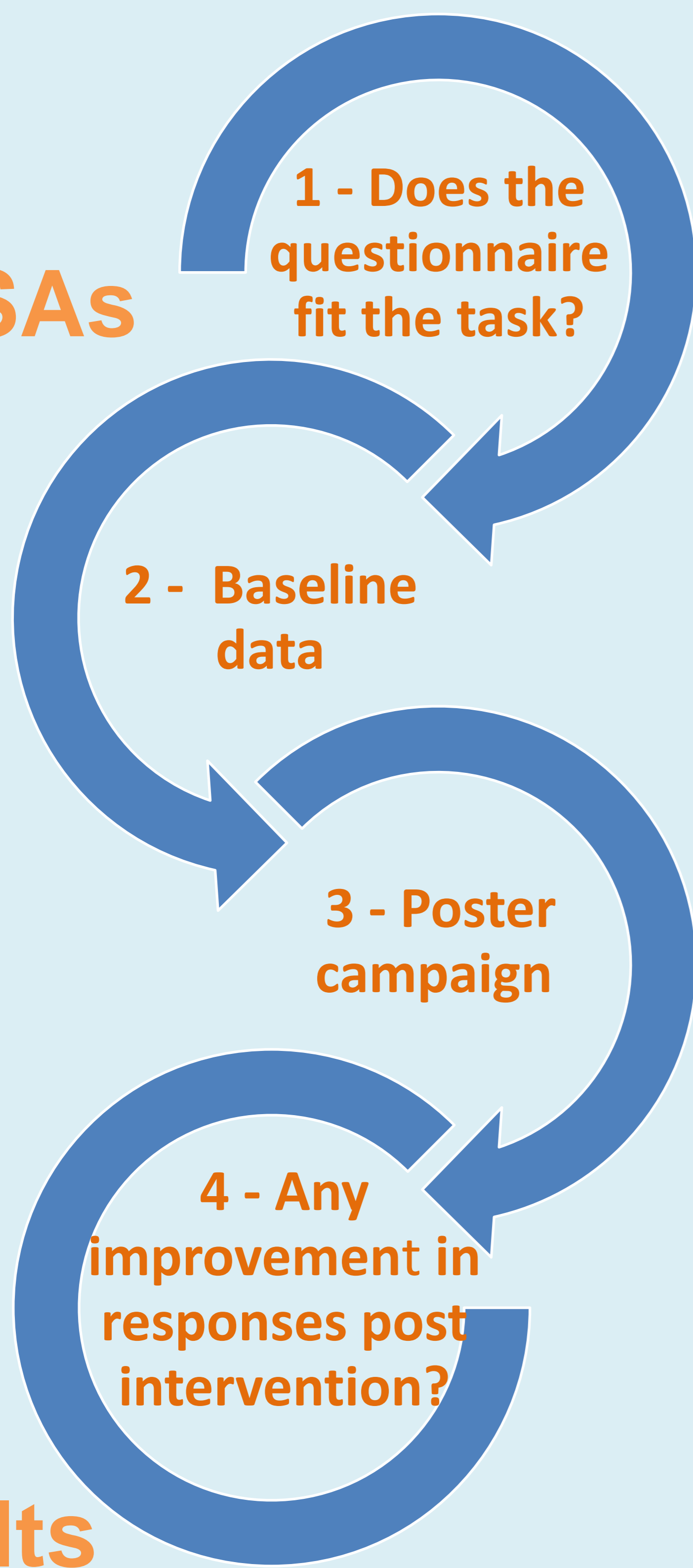
\*through analysis of incorrect responses to MH roles

## Measures

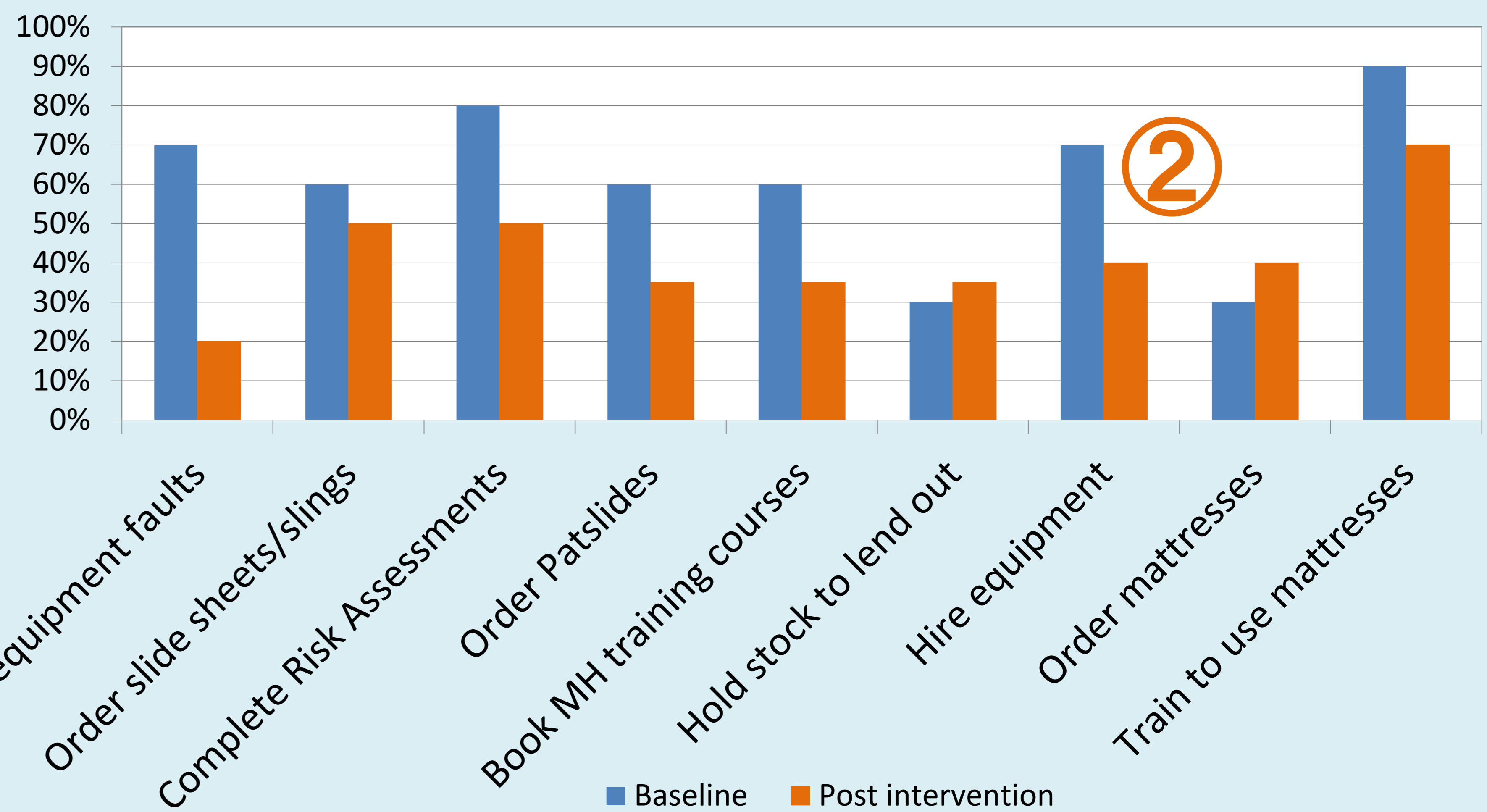
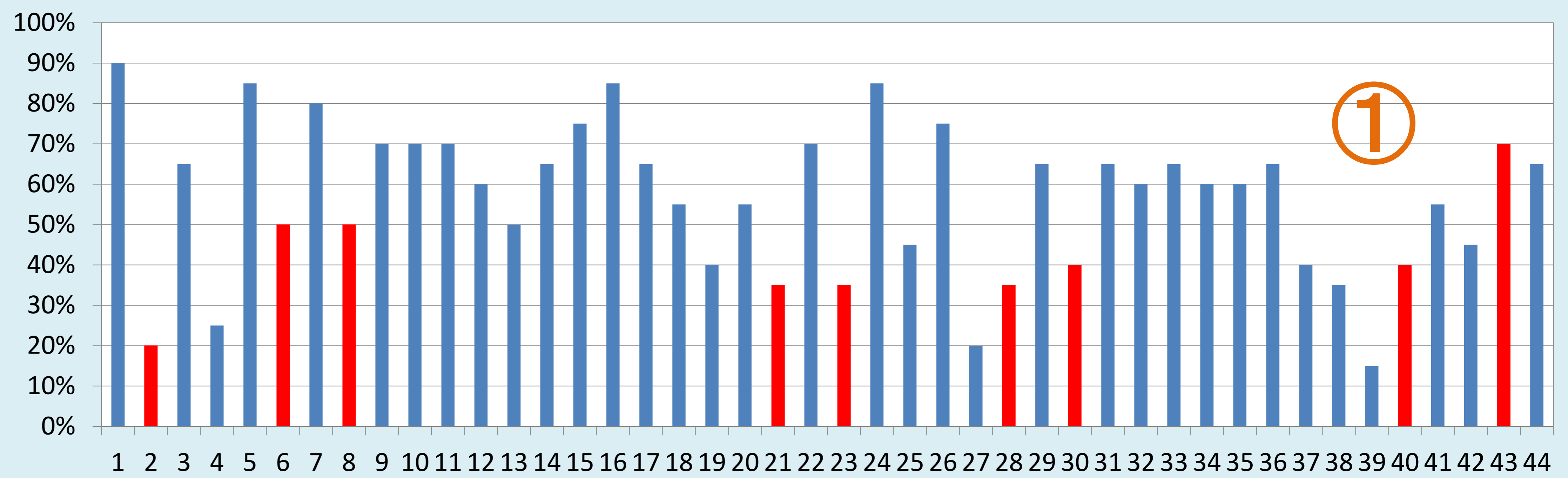
**Outcome measure** – overall proportion of respondents incorrectly identifying services not provided by MH

**Process measures** – Proportion of responses to each service not provided by MH

## PDSAs



**Graph 1** – All responses to MH remit questionnaire, incorrect responses highlighted in red  
**Graph 2** – Comparison of incorrect responses between PDSA cycle 2 & 3



## Results

At baseline 61% of respondents identified roles **not** in MH remit. Post intervention this reduced to 38% - an improvement of 23%

## Conclusions and Next Steps

Based on the results of PDSA 2 (graph 1), many staff do have an incorrect understanding of the MH Team's remit. Following the poster intervention a 23% improvement is a good result for this project, especially given the difficulties experienced during the project i.e. at least half of the posters were taken down, primarily due to the CQC inspection, plus the project had to be expanded to cover 2 wards part-way through, due to the reconfiguration of Prescott Ward. This had the effect of changing the timescale of the project and widening the pool of respondents.

This project may have raised awareness of the MH Team's remit, by using both the poster campaign & by going to the wards & talking about MH provision across our Trust. The results do indicate that it would be worth trying this approach again & relaunching a poster campaign with a wider roll out across the whole of our Trust.

Further ideas: Publication of basic information on the Manual Handling webpage to reflect how many staff members are in the team, photos, hours worked & list of services offered; MH keyworkers to reinforce basic information with all new staff in their teams and, periodically, to all staff through the year; install a phone line for Manual Handling which would deflect calls to appropriate departments e.g. Education & Development for booking courses, Tissue Viability, Equipment Library for mattress queries, Medical Engineering for the reporting of faults; collaboration with other departments who would then advertise their own services; reinstatement of the Manual Handling column in Outline magazine; intranet banner in February & August e.g. to promote LOLER; increase MH Team numbers (HSE recommend 1 advisor per 1000 members of staff).