

MANUAL HANDLING ASSESSMENT COVER SHEET AND SIGN OFF MHA3

MANUAL HANDLING ASSESSMENT SIGN OFF STAGE 1 AND STAGE 2 ASSESSMENTS			
ASSESSMENT DESCRIPTION: Click or tap here to enter text.			REF Click or tap here to enter text.
School / Dept Click or tap here to enter text. / Click or tap here to enter text.		Location Click or tap here to enter text.	
ASSESSOR Click or tap here to enter text.		Manager Responsible Click or tap here to enter text.	
Assessment Date (dd/mm/yy) Click or tap to enter a date.		Staff Male/Female	M <input type="checkbox"/> F <input type="checkbox"/>
Detailed Description of Activity Click or tap here to enter text.			
Weights (kg) Click or tap here to enter text.	Carry Distance (m) Click or tap here to enter text.	Push/Pull Distance (m) Click or tap here to enter text.	
STAGE 1 SIMPLE ASSESSMENT			
Complete MHA1 where there is a risk of injury due to manual handling			
1. Does the lifting activity clearly fall within the guidelines for a Stage 1 Simple Assessment? If in doubt state NO			YES <input type="checkbox"/> NO <input type="checkbox"/>
2. If YES, no further assessment is required, however monitor the activity and reassess if there are significant changes. Complete the Outcome of STAGE 1 Assessment section below, sign, date and file. If NO proceed to completing the STAGE 2 Detailed Assessment using MHA2			
Outcome of STAGE 1 Assessment	No significant risk and no further action required <input type="checkbox"/> Minor actions required (see Action Plan) <input type="checkbox"/> STAGE 2 Assessment Required <input type="checkbox"/>		
STAGE 2 DETAILED ASSESSMENT			
Complete MHA2			
STAGE 2 Assessment using form MHA2 completed? <input type="checkbox"/>			
Referring to MHA2, where the YES box has been ticked, have all potential problems identified and remedial action boxes been completed? <input type="checkbox"/>			
STAGE 2 form (MHA2) signed? <input type="checkbox"/>			

Signed	Click or tap here to enter text.	Dated (dd/mm/yy)	Click or tap to enter a date.
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This form should now be kept in your departments manual handling register, instruction should be provided to all staff carrying the activity and it should be reviewed regularly.

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ACTION PLAN

ACTION TO REDUCE RISK	WHO	COMPLETED BY WHEN	SIGN OFF WHEN COMPLETED	DATED
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap to enter a date.	Click or tap here to enter text.	Click or tap to enter a date.
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