

UNIVERSITY OF HUDDERSFIELD
GENERIC MANUAL HANDLING RISK ASSESSMENT FORM

School/Department _____

Loads

1		6	
2		7	
3		8	
4		9	
5		10	

Which loads?

- Are any heavy? (guide weight 10Kg and above) Yes No _____
- Are weights indicated? Yes No _____
- Are any large or bulky? Yes No _____
- Are any an irregular shape? Yes No _____
- Do surface prevent good grip being achieved? Yes No _____
- Are any unstable, can contents move significantly? Yes No _____
- Do shapes or sizes interfere with the handler's vision? Yes No _____
- Are any convenient handholds or handles available? Yes No _____
- Can sizes, weights, shapes etc. being altered by the handler? Yes No _____

Tasks

1		6	
2		7	
3		8	
4		9	
5		10	

Which tasks?

- Is lifting from floor level required? Yes No _____
- Do tasks require loads to be supported away from the body? Yes No _____
- Is twisting, stretching or stooping involved? Yes No _____
- Do tasks finish below knee or above shoulder height? Yes No _____
- Is there carrying over long distances? Yes No _____
- Is prolonged physical effort required? Yes No _____
- Is repetitive handling involved? Yes No _____
- Are any work rates imposed? Yes No _____
- Are periods of rest and recovery incorporated? Yes No _____
- Do any tasks require manual handling whilst seated? Yes No _____
- Do any tasks require team lifts? Yes No _____

Working Environments

1		6	
2		7	
3		8	
4		9	
5		10	

Which environments?

- Do space constraints prevent good postures be adopted? Yes No _____
- Are any floors in poor condition (slippery, uneven)? Yes No _____
- Do any fixtures or fittings create additional manual handling? Yes No _____
- Are there any variations in workplace floor levels? Yes No _____
- Are hot, humid or cold conditions encountered? Yes No _____
- Is workplace lighting poor? Yes No _____
- Could strong air movements affect load stability? Yes No _____

Individual Capability

- Do any tasks require unusual strength or personal capability? Yes No _____
- Do any tasks require special skills, knowledge or training for their safe execution? Yes No _____
- Do any individuals have health problems that may affect their ability? Yes No
- Are any individuals pregnant? Yes No

RISK AREAS IDENTIFIED BY THE GENERIC MANUAL HANDLING ASSESSMENT

MEASURES IN PLACE, OR TO BE INTRODUCED, TO ELIMINATE OR CONTROL THESE RISKS

Assessment completed by _____
Assessment date _____
Assessment review date _____

