

# The Manual Handling Operations Regulations 1992 (as amended) (MHOR)

OC 313/5

**Author Unit/Section:** HAW

**Target Audience:** All HSE and LA Inspectors

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## Summary

This revised OC updates and replaces the information previously contained in OC 313/2 (rev). It gives general advice about application of MHOR.

Three other main sources of advice are:

L23 “Manual handling Operations Regulations 1992 (as amended)”, Subject File 313.

## OC 313/4 “Manual handling assessment charts (MAC) and EMM”

This provides help in decision making to enable enforcement to be carried out in line with the HSC Enforcement Policy Statement, and gives guidance on the application of the EMM to manual handling risks.

## Introduction

1 The Manual Handling Operations Regulations 1992 (MHOR) (SI 1992 No 2793) implement the EC Manual Handling Directive (90/269/EEC). MHOR were amended by the Health and Safety (Miscellaneous Amendments) Regulations 2002 (SI 2002 No 2174), with effect from 17 September 2002. These were limited changes to integrate some factors from Annex II of Directive 90/269/EEC into MHOR. These factors were in Schedule 1 of the 1992 Regulations and are now included in a new Regulation 4(3). These are that a worker may be at risk if he/she:

- (a) is physically unsuited to carry out the tasks in question;
- (b) is wearing unsuitable clothing, footwear or other personal effects;
- (c) does not have adequate or appropriate knowledge or training.

2 Suggestions are made from time to time that in addition to back pain and injury risks arising from manual handling of loads, the MHOR might also apply to upper limb disorder risks arising from repetitive operations. This is certainly a possibility if there is risk of injury and if the repetitive operation falls within the definition of manual handling, ie the transporting or supporting of something that falls within the definition of a load. However, the application of the MHOR in this area remains untested other than in civil cases, where there are different standards of proof. While there is nothing in the MHOR to prevent its application in the circumstances described above, HSE Solicitors' view is that there could be finely balanced issues in deciding whether the MHOR could be applied to repetitive injuries sustained in activities where those activities are at the margins of the meaning of “manual handling”. It is therefore suggested that in contemplating enforcement action on ULD risks in repetitive work, citing the MHOR could be problematic in some circumstances. It is recommended to use instead the HSW Act or the Management of Health and Safety at Work Regulations, whose applicability would not be questionable in the way that MHOR might be.

## Guidance

3 Guidance on the Regulations is given in HSE's guidance - L23 Manual handling: guidance on the Regulations, (file 313). This was revised in March 2004. The main revisions were:

- incorporation of a new Regulation 4(3) and guidance on individual capability (paragraphs 177 onwards);
- expanded advice on the risks associated with pushing and pulling, including a risk assessment worked example and checklist (paragraphs 93 – 96, 148 and Appendix 4)
- a revised good handling technique (paragraphs 197 onwards) based on research by the Institute of Occupational Medicine
- new advice on psychosocial issues (paragraph 14, also see Appendices 2 and 4);
- a new Appendix 1 on management systems for controlling risks from manual handling;
- expanded advice on risk assessment in Appendices 2 and 3;
- a revised checklist for lifting and carrying in Appendix 4;
- an introduction to MAC in Appendix 5.

## General

4 MHOR aim to reduce the incidence and prevalence of musculoskeletal disorders (MSDs) arising from the manual handling of loads at work. MSDs were the most commonly reported type of work-related illness in the last six surveys of self-reported work-related illness. SWI04/05 shows: 11.6 million working days (full-day equivalent) were lost through Work Related MSDs (WRMSDs).

5 MHOR place duties upon employers in respect of their own employees. Identical duties are placed on the self-employed in respect of their own safety. The Regulations do not impose duties on employers in relation to other persons, eg voluntary workers transporting patients for the health services. However, HSW Act s.3 and provisions of the Management of Health and Safety at Work Regulations 1999 (MHSWR) may be relevant in such cases.

6 MHOR apply to all work activities with the exception of those normally covered by Merchant Shipping legislation which is administered by the Maritime and Coastguard Agency.

## Enforcement

7 Tackling MSD risk is an HSC priority. Strong enforcement action is encouraged. MSDs represent considerable cost to society in terms of lost time as well as being a cause of pain and suffering to the individuals involved.

8 It is anticipated that most enforcement will be concentrated around reg.4. Where a prosecution is under consideration advice should be sought from ergonomists and EMAS at an early stage. For contact details please see the MSD Topic pack section.

9 In any enforcement action under consideration it is important to obtain evidence from ergonomists/EMAS at an early stage to demonstrate that a particular manual handling operation will involve a risk of injury, rather than attempt to show that a specific case of injury demonstrates the existence of a risk as this can be complicated by sports injuries etc. A pattern of injuries would support other evidence of risk. Where possible, evidence of injuries to other individuals should be obtained using HSE and company records and statements obtained from the individuals as appropriate.

10 Where the activity is single or team lifting or carrying then apply the Manual Handling Assessment Charts (MAC) tool and refer to OC 313/4. Numerous HSE and other publications show reasonably practicable control measures – these are listed in the MSD Topic Pack.

11 Please inform HAW MSD team of the details of all MHOR prosecutions.

## Interpretation (reg.2(1))

12 MHOR are concerned with the risks of injury from manual handling operations, and not with risks posed by loads which are intrinsically hazardous and which are being manually handled. Eg they do not apply to risks of injury from toxic or corrosive substances leaking or being spilled from loads being handled.

13 MHOR apply to the manual handling of people and animals.

14 The definition of 'manual handling operations' is broadly drawn and means: '...any transporting or supporting of a load (including the lifting, putting down, pushing, pulling, carrying or moving thereof) by hand or by bodily force'.

15 An important exception is that a tool or machine being used for its normal purpose is not a load. Therefore, chainsaws being loaded and unloaded from a vehicle would be regarded as a 'load' and subject to MHOR but they would not be a 'load' when in normal use.

## Duties of employers (reg.4)

16 In essence reg.4 sets out a hierarchy of 3 duties on employers:

1. the employer shall so far as is reasonably practicable, avoid the need for his employees to undertake any manual handling operations at work which involve a risk of injury (reg.4(1)(a));
2. where 1) above is not possible, the employer shall make a suitable and sufficient assessment of all such operations which cannot be avoided, taking account of Schedule 1 (reg.4(1)(b)(i)); and
3. the employer shall take appropriate steps to reduce the risk of injury during those operations to the lowest level reasonably practicable (reg.4(1)(b)(ii)).

When considering whether a manual handling operation "involves a risk of injury" and when determining appropriate risk reduction measures, MHOR reg. 4(3) applies. Reg.4(3) requires that regard shall be had to: the physical suitability of employees; clothing / footwear / personal effects they are wearing; their knowledge and training; the result of any relevant risk assessment under MHSWR 1999, including whether they are identified by that assessment as being especially at risk; and the results of any health surveillance under MHSWR reg 6.

17 If there is no evidence of any risk of injury then reg.4 will not apply. Deciding the presence and degree of risk will be a matter of judgement in each case, with regard being had to the factors identified above. The Regulations do not set out the steps employers must take to reduce the risks to their workers. HSE's general guidance includes some steps that employers will wish to consider in the light of the assessment but it is up to employers to choose the appropriate measures.

## Assessments

18 The assessment must be 'suitable and sufficient'. A generic assessment is acceptable if it can legitimately draw together strands common to several operations or employees. For example, the unloading of a variety of materials on building sites and routine delivery to

several separate locations would be best covered in a generic assessment. The numerical guidelines provided in L23 (HSE's guidance on the MHOR) Appendix 3 should help employers determine which operations carry a greater risk of injury and therefore which require a more detailed assessment. The Manual Handling Assessment Charts, MAC, may also be used for that purpose and also to identify key risk factors; although they may not comprise a full risk assessment as MAC does not cover all risk factors – eg individual capability or pushing/pulling.

19 Reg 4(3) and Schedule 1 of MHOR contain factors and questions to be considered during assessment. Appendix 4 of L23 gives an example of an assessment checklist. Clearly employers can devise their own checklists provided it is suitable, but the example indicates the standard that would be expected in typical cases.

20 Most employers should be able to carry out their own assessments. The key to success is the use of an appropriate checklist by a suitable team including consultation with the workforce. When appropriate other tools such as MAC can be used to help in the process. Where there are particularly complex manual handling operations it might be necessary to seek outside help, and employers may request information from HSE. The [Chartered Institute of Ergonomics and Human Factors \(CIEHF\)](#) <sup>[1]</sup> maintains a list of professional ergonomists. When recommending this institute it should be made clear that their data does not carry any HSE endorsement.

21 There is no formal requirement in the MHOR for employers to write their assessment down. If they have not done so they must nevertheless be able to demonstrate that they have carried out an assessment. For example, they may be able to show the risk reduction measures they have taken as a result of assessing their manual handling operations.

## Lumbar support belts

22 Abdominal and back support belts are not recommended control measures as their effectiveness is questionable – see L23 para 186-7 for details.

## Indication of weight etc on loads

23 The provision of information to employees required by reg.4(1)(b)(iii) may assist in risk reduction as it will provide employees with a further indication of risks. Advice on how employers should comply with the duty is at L23 paras 172 - 175. Precise information about load weights only has to be provided where it is reasonably practicable to do so.

Hence reg.4(1)(b)(iii) does not place a duty on manufacturers or suppliers to mark all loads; nor do employers necessarily have to mark the load itself.

24 While it can be helpful to mark weights (and centre of gravity information, if relevant) on loads where this can be done easily (eg by product suppliers), there are many circumstances where it is not reasonably practicable to provide this precise information. In these cases it is sufficient for the employer to provide general indications about the weight (and heaviest sides, if applicable) of the kinds of loads to be handled in a job; this can be done in various ways, eg through training. The provision of precise information about the weights of loads is included in the MHOR only because it is mentioned very specifically in the EC Directive (Article 6). This provision should not be pursued to the exclusion of other risk reduction steps which can be called for under reg.4(1)(b)(ii) and which are likely to be more effective in reducing the risk of injury.

## Duties of employees (reg.5)

25 The employee's duty under reg. 5 extends only to a system of work provided for the employee in compliance with reg. 4(1)(b)(ii). This provision should not be seen as a bar to well-intentioned improvisation, eg in dealing with an emergency for which no prior provision could reasonably be made.

26 The employee's duty is in addition to that under reg.14 of the MHSWR which requires the use of machinery and equipment, such as handling aids, where it has been provided for the employee in accordance with the training and/or instruction provided.

## Training

27 Research has found little evidence that training focussing primarily on handling techniques is effective in promoting safer working and reducing injuries. The evidence suggests that techniques taught in training programmes often fail to be applied in the workplace. Hence training in handling techniques should never be relied on as a way of overcoming deficiencies such as unsuitable loads, bad working conditions or a lack of handling aids.

28 However, there is strong evidence that effective reductions in injuries can be achieved by multi-dimensional ergonomics interventions, involving participation of workers and managers, and equipment and / or task redesign, coupled to training that is tailored to suit the person and specific task requirements. The emphasis in training should be on changing attitudes and behaviour and promoting risk awareness among workers and

managers, so that people assess risks and report problems. This is most likely to be achieved through industry- and task-specific training that is tailored to recipients' level of knowledge and understanding of the risks.

## Link URLs in this page

1. Chartered Institute of Ergonomics and Human Factors (CIEHF)  
<http://www.ergonomics.org.uk/>