TOOLBOX TALK AWARENESS PACKAGES

HAZ-MHP · Moving and Handling People Awareness

Product Overview

Audience: Aged care, disability and health workers who help people move · Duration: 20–30 minutes

Version 1.0 · 15 November 2026

For aged care, disability and health workers who help people move: the mobility plan, hoists and slide sheets, a no-lift approach, and when to stop and get help.

Helping people move, from bed to chair, in the shower, up from a fall, can cause serious back, shoulder and neck injuries to care workers. A person is not a box: they can be heavy, unpredictable, in pain or frightened, and their ability changes from day to day. Moving people is a hazardous manual task that WHS or OHS laws require the business to manage, and the main control is not lifting technique but the right plan and the right equipment.

This talk covers why moving people is hazardous, the no-lift approach, using the mobility plan, hoists, slide sheets and other equipment, checking before every transfer, falls, and when to stop and get help. It is awareness, not training to use a specific hoist.

Learning outcomes

By the end of the session participants will be able to:

- Explain why moving and handling people is a hazardous manual task, for the worker and for the person being moved
- Describe the no-lift approach: workers do not lift all or most of a person's weight by hand
- Follow the person's mobility plan, and report when it no longer matches what the person can do
- Describe how hoists, slide sheets, transfer aids and height-adjustable beds reduce the risk, and the checks before each use
- Respond safely when a person falls or starts to fall, without catching or lifting them by hand
- Know when to stop a transfer and get help, and report injuries, near misses and equipment faults

What it covers

Module	Covers
Why moving people is hazardous	The person as the load; Force, posture and sudden movement; Injuries to workers and to the people they care for
Controls that work	The no-lift approach; Mobility plans; Hoists, slide sheets and other equipment
Your part	Checking before every transfer; Falls: do not catch, do not lift; Stopping, getting help and reporting

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Activities

- Check the plan: workers match three transfer situations to the mobility plan and the equipment it names
- Stop or go: workers decide what to do in four situations where the plan, the person or the equipment is not right

What is in the package

Item	File
Editable PowerPoint presentation with speaker notes, plus PDF	02_TRAINING_PRESENTATION/Training Presentation.pptx and .pdf
Facilitator guide with a running sheet, discussion prompts and model answers	03_FACILITATOR_GUIDE/Facilitator Guide.docx and .pdf
Participant handout with the key points to take away	04_PARTICIPANT_HANDOUT/Participant Handout.docx and .pdf
Attendance record form, to capture who attended, when, and who facilitated	06_RECORDS/Attendance Record.docx and .pdf
Excel attendance register	06_RECORDS/Attendance Register.xlsx
Multiple-choice theory assessment, to record understanding if your business wants to	05_ASSESSMENT/Theory Assessment.docx and .pdf
Answer key for the assessment	05_ASSESSMENT/Assessment Answer Key.docx and .pdf
Certificate template	06_RECORDS/Certificate Template.docx
Start here: Read Me First, Product Overview, Permitted Use Terms, Version Information	01_START_HERE/ (four PDFs)

What you need to deliver it

- A facilitator such as a supervisor, leading hand or WHS adviser who has read the facilitator guide and knows your site's arrangements for the topic
- A screen or projector, or printed slides or handouts: it works in a crib room, site office or on a video call
- Your own site procedures for the topic, to point to during the session

Questions

Is this hoist or manual handling competency training? No. It is awareness for the whole team. Every worker who uses a hoist, standing aid or other equipment needs hands-on training on that equipment, and a person's mobility plan is set by people competent to assess them.

Can we add our own site procedures and photos? Yes. The slides, handout and guide are editable, and the facilitator guide marks the places to add your own procedures, contacts and photos of your workplace.

Do we have to use the assessment? No. It is there if your business wants a record that each worker understood the key points. The attendance record on its own shows who attended and when.

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TOOLBOX TALK

Moving and Handling People Awareness

The mobility plan, the right equipment, and when to stop and get help

20–30 minutes · Aged care, disability and health workers who help people move

[Company name] · [Date] · [Facilitator name]

MHP

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What this talk is, and is not

This talk covers

- ✓ Why moving people is hazardous
- ✓ The no-lift approach and mobility plans
- ✓ Hoists, slide sheets and checks
- ✓ Falls, stopping and getting help

This talk is not

- ✕ Training to use a specific hoist or aid
- ✕ A mobility assessment or plan
- ✕ Clinical care after a fall
- ✕ Our procedure: **[Our moving and handling procedure]**

Awareness only. Use a hoist or other aid only after hands-on training on that equipment.

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Why moving people is hazardous

Moving people is a hazardous manual task, with a person as the load.

- Heavy, with no handles, and their weight is not evenly spread
- Unpredictable: they may grab, slip, buckle at the knees or resist
- Their ability changes: pain, tiredness, illness, medication, the time of day
- Awkward postures: bending over beds, reaching across, kneeling, twisting in small bathrooms
- Repeated many times a shift, often rushed

A composite example

- A support worker helps a man from his chair to the toilet. The plan says standing aid; it is down the hall, so she helps him up by hand 'just this once'.
- His knees give way. She takes his weight to stop him falling. Both are hurt.

A person can go from standing to falling in a second. Equipment does not get tired.

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Duties under WHS or OHS laws

The business must

- Identify hazardous manual tasks, including moving people, and manage the risks
- Provide the equipment the plans need, maintained and close at hand
- Provide training on that equipment, staffing and supervision
- Consult workers about moving and handling

You must

- Follow the mobility plan and the safe ways of working
- Use the equipment the plan names, every time
- Not use equipment you have not been trained on
- Report injuries, near misses, faults and plans that no longer fit

In Victoria this is called hazardous manual handling, with similar duties under the OHS laws. Check yours.

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The order of controls for moving people

1 **Elimination** No manual lift: the person moves themselves, with prompting and time

2 **Substitution** A different way: bed bathing, a shower chair, a different transfer

3 **Isolation** Ceiling hoists and tracks, so nobody takes the weight

4 **Engineering** Mobile and standing hoists, slide sheets, height-adjustable beds

5 **Administrative** Mobility plans, two workers, scheduling, training, technique

6 **PPE** Non-slip footwear: it helps, but does little for the main risk

HIGHER ORDER

Higher order controls remove or control the hazard at the source, or put a barrier between people and the hazard.

LOWER ORDER

Lower order controls rely on people to do a thing or wear a thing, every time, tired, distracted or rushed.

Behaviours are not on the hierarchy, but behaviours and culture decide whether every control on it actually works.

Equipment takes the weight. The plan says which equipment, and how many people.

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Moving and Handling People Awareness

Participant handout · keep this

Moving people can cause serious back, shoulder and neck injuries to care workers. It is a hazardous manual task with a person as the load. The main control is not technique: it is the right plan and the right equipment. Keep this page.

The order of controls

1. The person moves themselves, with time and prompting
2. A different way of doing the task
3. Ceiling hoists: nobody takes the weight
4. Mobile and standing hoists, slide sheets, adjustable beds
5. Mobility plans, two workers, training, technique
6. Non-slip footwear: helps a little

The no-lift approach

- Do not lift all or most of a person's weight by hand
- No lifting under the arms, and no lifting from the floor by hand
- Rushing is not a reason to skip the equipment

If a person starts to fall

- Do not catch them or take their weight
- Guide them down if you safely can; protect their head
- Stay, call for help, follow the falls procedure
- Get them up only with equipment

Before every transfer

- ☐ The mobility plan: what it says for this transfer, today
- ☐ The person: able and willing today? Any change, pain or confusion?
- ☐ The equipment: the right one, checked, charged, the right sling or sheet
- ☐ The space: room to move, brakes on, bed at the right height
- ☐ The people: the number the plan says, and who leads

Stop and get help when

- The plan does not fit the person today
- Equipment is faulty, flat, the wrong size or not there
- The person falls, resists or is distressed
- Help: **[Who to call for help with a transfer]**

Report it

- **[Who to report to here]**
- Injuries, near misses, faults, plans that no longer fit
- Plans: **[Where mobility plans are kept]**

Follow the plan, use the equipment, and stop if it does not fit.

This is awareness training. It is not a licence, a ticket, a permit or a competency. It does not train you to use a hoist or other equipment, or to assess a person's mobility.

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