Belfast Health and Social Care Trust
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Policy Code: BHSCT/Gen (08)

Title:	**Policy and Procedural Arrangements relating to Control of Vibration at Work**				
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Policy Type: (tick as appropriate)	*Directorate Specific ☐	Clinical Trust Wide ☐	Non Clinical Trust Wide ☒		
If policy type is confirmed as ***Directorate Specific** please list the name and date of the local Committee/Group that policy was **approved**					
Approval process:	Joint Trust Health and Safety Committee Policy and External Guidance Assurance Committee Executive Team Meeting			**Approval date:**	02/02/2024 06/02/2024 26/02/2024
Operational Date:	February 2024			**Review Date:**	February 2029
Version No.	4	**Supersedes**	V3 – May 2018 – May 2023		
Key Words:	Vibration, (HAV) Hand Arm Vibration				
Links to other policies	BHSCT General Health and Safety Policy (2018) TP 50/08 BHSCT Control of Noise at Work Policy (2018) TP 49/10				

1.0 INTRODUCTION / SUMMARY OF POLICY

1.1 Background

The Control of Vibration at Work Regulations (NI) 2005 (Hand arm vibration - Control of Vibration at Work Regulations 2005 (hse.gov.uk) applies to all relevant work activities within the Belfast Health and Social Care Trust (the Trust) including those undertaken by 'other employers' and contractors. This policy and procedure applies to managers and / or departments within the Trust who may control the work of others by contracting others to work within the Trust Estate.

Hand-arm vibration (HAV) comes from the use of hand-held power tools and can be the cause of significant ill health. Whole-body vibration is shaking or jolting of the human body through a supporting surface (usually a seat or the floor).

By law as an employer, the Trust must assess and identify measures to eliminate or reduce risks from exposure to vibration so that it can protect staff from risks to their health.

The Trust recognises that there are a limited number of staff exposed to vibration and that it is caused by exposure to vibration from work processes involving the use of vibrating tools, work equipment and machinery and that Hand Arm Vibration Syndrome (HAVS) or Carpal Tunnel Syndrome in those who have exposure to significant hand held vibration is an occupational disease.

Prolonged exposure to vibration can lead to permanent health effects and the Trust has a legal duty to control and reduce vibration levels as well as protecting staff from the harmful effects of vibration at work. The costs associated with working with vibrating tools or work equipment includes staff absence and the moral and ethical aspects of managing work-related incidents.

The Trust is required to undertake suitable and sufficient risk assessments for work related vibration and to take action to limit exposure and introduce controls as identified by risk assessment.

This will involve:

- the identification of activities
- what precautions to take to reduce vibration exposure
- the selection, use and maintenance of equipment
- procurement of tools, machinery etc which minimise vibration exposure
- managing arrangements for contractors

Exposure to vibration is assessed over an 8 hour working day or over a week if the exposure varies significantly from day to day. Low-level (or nuisance) vibration which presents no risk to health, is not covered by the Regulations.

1.2 Purpose

This policy and procedural arrangement is designed to provide managers and staff (including contracted services) with clear guidelines and outline their responsibilities to manage and control the risk associated with hand transmitted or whole body vibration at work and to ensure that staff and others do not suffer injury or disease.

The Key Objectives of the Policy are:

- To comply with legislative requirements as defined in the Control of Vibration at Work Regulations (NI) 2005
- To define the term “vibration at work”
- To ensure that suitable arrangements are in place for the protection of staff operating hand held power tools and equipment
- To ensure that suitable health surveillance is offered where indicated.
- To provide further sources of information, guidance and advice

2.0 SCOPE OF THE POLICY

This is a Corporate Policy applicable to all staff including Directors, Managers and contracted services focusing on the Health and Safety Executive’s definition and advice on the control of vibration at work.

3.0 ROLES AND RESPONSIBILITIES

The ultimate responsibility for ensuring compliance with the Control of Vibration at Work Regulations (NI) 2005 rests with the Chief Executive.

Overall co-ordination for ensuring compliance with these regulations will be the responsibility of the Medical Director.

The responsibility cascades down through the relevant Directors and Managers who manage such activities to all staff who should familiarise themselves with this policy and the impact of such on their work activities.

3.1 Co-Directors, Senior Managers

3.1.1 To ensure that adequate arrangements are in place to bring the Policy to the attention of staff within their Directorate.

3.1.2 To ensure that adequate resources are made available for training, vibration surveys, purchasing and maintenance of equipment etc.

3.2 Line Managers

3.2.1 Avoid staff within their area of responsibility working with tools, machinery and equipment that cause vibration where they can and consider safer alternatives.

3.2.2 To initially assess if there is a vibration problem (see Appendix 1).

When identified through the risk assessment that members of staff are likely to be exposed to vibration above the daily exposure action value (EAV), a vibration survey should be undertaken to determine the level of exposure.

- Where staff are exposed to hand arm vibration above the daily exposure action value of 2.5 m/s2 A(8) or Whole Body Vibration -0.5 m/s2 A (8) (exposure averaged over a day), managers are required to take reasonably practicable measures to reduce the exposure with engineering controls or other technical measures eg replace old, high vibrating tools and equipment with new low vibrating ones

Records of these risk assessments identifying staff who are exposed to vibration at work should be retained. This risk assessment is to be carried out in conjunction with the staff.

Vibration measurements and guidance for equipment are available from manufacturers, the HSE Vibration Exposure Calculator and other data sources from specific industry groups.

Vibration Surveys can be undertaken by an Occupational Hygienist: see attached link for information. Accessing Occupational Hygienist Services Flowchart v4.doc (sharepoint.com)

3.2.3 Where they cannot eliminate the risk of vibration, consideration should be given to engineering controls.

3.2.4 To introduce a positive purchasing (and hire) policy by purchasing hand tools, plant equipment and machinery with integral vibration-reduction measures.

3.2.5 Ensure that work is properly planned, organised, adequately supervised and carried out in a manner which is safe.

3.2.6 Ensure that all persons engaged in such activities (including its organisation, planning, supervision, selection and use of appropriate work equipment) are competent.

3.2.7 Ensure staff receive appropriate information, instruction and training.

3.2.8 To regularly review the vibration assessment. The Control of Vibration at Work Regulations (NI) 2005 requires the risk assessment to be reviewed whenever there is an incident, Occupational Health concern or referral, a change to the process or new equipment which may alter vibration levels. It is good practice to review the vibration assessment every two years, as vibration levels can change over time as, for example, machinery wears out or working practices change.

This assessment should be used to develop an action plan for introducing vibration control measures. Further information is available at HSE / Vibration.

3.2.9 To ensure that staff are aware of the risks they may be exposed to and:

- The likely vibration exposure and the risk to health this creates

- What actions are being implemented to control vibration exposure
- Where and how staff can obtain personal protective equipment which encourages good blood circulation by keeping staff warm and dry e.g. gloves, hat, waterproofs, fleeces
- What staff's duties are under the Control of Vibration at Work Regulations (NI) 2005 and Trust's Vibration Policy
- What they should do to minimise the risk, such as the correct use and storage of PPE.

To provide support or alternative formats in terms of disability communication support or language linguistic needs, if required, to communicate the policy.

3.2.10 To arrange health surveillance for HAVS on all staff as identified by the risk assessment and to provide the Occupational Health Service with a list of staff.

Health surveillance should be provided for hand held vibration-exposed employees, i.e. those undertaking activities involving the use of hand-held vibrating tools where:

- exposure is likely to be regularly above the action value of 2.5m/s2 A(8) as given by the Regulations;
- exposure is likely to be occasionally above the action value and the risk-assessment identifies the frequency and severity of exposure may pose a risk to health; and;
- employees are identified as particularly sensitive to vibration, e.g., are considered to be at risk for any other reason e.g. people with blood or circulatory disorders such as Raynaud's disease: previously diagnosed as suffering from hand-arm vibration syndrome.

Whole Body Vibration
Guidance accompanying the Regulations identifies health surveillance as not appropriate for whole body vibration. There are no valid techniques that exist for the detection, or indicate the early onset, of disease or health-effect. Whilst formal health surveillance is not identified as required, the guidance that accompanies the Regulations suggest an approach of reporting and monitoring the symptoms of lower back pain to assist in assessing the need for action on whole body vibration. This 'health-monitoring' approach is not a legal requirement under the Regulations.

3.2.11 To maintain the following records, when relevant:

- Vibration risk assessments undertaken
- Vibration reduction methods introduced
- Outdoor clothing and protective gloves are issued
- Information, instruction and training provided
- All vibration testing carried out
- A health record for those staff under a health surveillance programme

3.2.12 To ensure equipment is maintained and inspected as per manufacturers' guidance and any other statutory inspection requirements

3.2.13 To report and investigate incidents

3.2.14 To complete BRAAT Vibration Standard ~~14~~

3.3. Staff

3.3.1 Co-operate with their line manager to achieve compliance with this policy

3.3.2 Report any concerns about vibration at work and work equipment to their line manager or health and safety representative, so that remedial action can be taken

3.3.4 Must attend the Occupational Health Service for health surveillance as and when indicated by the risk assessment and referred by management

3.3.5 Properly use any vibration control measures and follow any safe systems of work that are introduced

4.0 CONSULTATION

This Policy was reviewed in collaboration and in consultation with the Trusts Health and Safety Team, Estates Department, Occupational Health Service and Regional Disablement.

Management, staff and Trade Unions throughout the Trust were consulted on this Policy.

The Trusts Joint Health and Safety Committee and Directorates were consulted on this Policy.

5.0 POLICY STATEMENT/IMPLEMENTATION

5.1 Definitions

(as detailed in the Control of Vibration at Work Regulations (NI) 2005)

5.1.1 Whole Body Vibration

Whole Body Vibration is vibration, particularly large shocks and jolts, which could lead to back pain, resulting from driving mobile machines or other work vehicles over poor surfaces as a main part of their job. Staff who drive vans, patient transport vehicles and other vehicles which are normally driven on well maintained roads are less likely to be exposed to sufficient WBV as to be a significant risk to health.

Exposure Action Value (EAV) for Whole Body Vibration

A daily EAV-0.5 m/s2 A (8) (exposure averaged over a day) Where exposure at or above this level occurs, actions (but not including health surveillance) are required to control the risk.

A daily ELV for Whole Body Vibration -1.15m/s2 A (8) (exposure averaged over a day) This is the maximum vibration exposure permitted for an individual on a single day.

Measures must be put in place to reduce whole body vibration exposure to as low a level as is reasonably practicable. Consideration should be given as to whether further reduction is practicable even if vibration levels are below the Exposure Action Value (EAV)

The WBV risk assessment should identify the likely risks of causing or aggravating back pain. Other possible contributing factors to back pain include:

- Poor posture while driving/operating plant;
- Sitting for long periods without being able to change position;
- Poorly placed controls which require the driver/operator to stretch or twist to operate them;
- Manual lifting and carrying of heavy or awkward loads;
- Repeatedly climbing or jumping out of, a high, or difficult to access, cab.

The risk will be increased where a worker is exposed to two or more factors together.

Driver skill is likely to be the main contributor to reducing WBV exposure and training is, therefore, one of the most important elements of the risk control programme.

5.1.2 Hand-Arm Vibration

Hand arm vibration is vibration transmitted from work processes into workers' hands and arms. It can be caused by operating hand-held power tools such as drills, grinders, hand-guided equipment such as lawn mowers or strimmers, air tools or by holding materials being processed by machines such as pedestal grinders.

Exposure Action Value (EAV) Hand Arm Vibration

The Vibration Regulations include an EAV and an exposure limit value (ELV) based on a combination of the vibration at the grip point(s) on the equipment or work-piece and the time spent gripping it. The exposure action and limit values are:

- A daily EAV of 2.5 m/s^2 A(8) that represents a clear risk requiring management
- A daily ELV of 5 m/s^2 A(8) that represents a high risk above which employees should not be exposed.

The primary cause of HAVS involves holding vibrating tools or work equipment. Vibration with a frequency ranging from 2 to 1500 hertz (cycles per second or Hz) is potentially damaging, and is most hazardous in the range from 5 to 20 Hz. The risk depends on both the vibration magnitude and how long people are exposed to it, in effect a daily 'vibration dose'.

Other factors include:

- The tightness of grip, push and other forces used to guide and apply vibrating tools. A tight grip transfers more vibration energy to the hand
- The exposure pattern – length and frequency of work and rest periods. It is better to break up periods of exposure

- Factors affecting blood circulation, such as cold temperatures and smoking
- Some medical conditions e.g. Primary Raynaud's disease, coronary artery disease, blood disorders, pregnancy, epilepsy and some medications
- Individual susceptibility
- Hobbies involving the use of vibrating tools

5.2 Areas at risk of hand-arm vibration.

- Estates Workshops
- Estate management (e.g. maintenance of grounds)
- Maintenance of roads
- Construction
- Engineering and other Workshops
- Fracture Clinics
- Theatres

5.3 Tools and equipment that can present a risk of HAV

Some common ones used within Trust are:

- cut-off saws (for stone etc)
- hammer drills
- hand-held grinders
- jigsaws
- pedestal grinders
- polishers
- power hammers and chisels
- powered sanders
- chainsaws
- powered lawn mowers
- strimmers / brush cutters
- hand held drills

5.4 Vibration Control

Identifying early signs and symptoms is important. It will allow action to prevent the health effects from becoming serious. The symptoms include any combination of the following:

- Tingling and numbness in the fingers (which can cause sleep disturbance)
- Not being able to feel things with your fingers
- Loss of strength and dexterity in your hands (you may be less able to pick up or hold objects)
- In the cold and wet, the tips of your fingers going white then red and being painful on recovery (vibration white finger)
- If you continue to use high-vibration tools these symptoms can get worse and the numbness in your hands can become permanent

Vibration energy directed into employee's hands should be reduced so far as is reasonably practicable. Control measures to achieve this include:

- Avoiding the process generating vibration
- Substituting a process involving less vibration
- Purchasing / hiring / utilising tools designed for low vibration e.g. tools with anti-vibration mountings or vibration-isolating handles
- Correct and routine maintenance of tools
- Avoiding prolonged exposure to vibration by arranging work so that periods of exposure are broken by periods of work which does not involve vibration
- Proper selection of tools for the task as part of a purchasing policy to reduce both vibration and noise
- Arrangements to reduce the grip, push and other forces by providing supports for tools or work pieces
- Comfortable working temperatures which are not too cold

5.5 Health Surveillance

The Management of Health and Safety at Work Regulations (NI) 2000, as amended, Regulation 6, requires appropriate health surveillance for employees, where risk assessments identify a risk.

The Control of Vibration at Work Regulations (NI) 2005, specifically require vibration health surveillance for vibration-exposed employees who:

- are likely to be regularly exposed above the daily exposure action value of $2.5m/s^2$ A(8)
- are likely to be exposed occasionally above the action value and where the risk assessment identifies that the frequency and severity of exposure may pose a risk to health
- have a diagnosis of Hand Arm Vibration Syndrome even when exposed below the action value and if exposure to vibration continues

Line managers will refer staff identified to be at risk from vibrating hand tools / equipment who meet the above criteria to the Occupational Health Service for legislative health surveillance.

Staff identified by line managers as being exposed to hand transmitted vibration at work, or any staff reporting symptoms, and are exposed to vibration as part of their duties, will be referred to Occupational Health Service.

Staff who continue to have exposure to hand transmitted vibration at work will be subject to regular HAVS health surveillance as advised by Occupational Health Service.

Vibration health surveillance will be undertaken as detailed in the Control of Vibration at Work Regulations (NI) 2005 and Guidance Notes.

HSE advice to employers

Any cases of HAVS or Carpal Tunnel Syndrome associated with hand held vibrating tools will be graded by occupational health professionals using the Stockholm Scale for both vascular and neurological symptoms. A summary report of the outcome of health surveillance will be forwarded to the referring manager advising of the outcome of the assessment and the employees ongoing fitness to continue working with vibrating hand tools, including the frequency of review. This will enable appropriate action to be taken to ensure the effective management of individual cases of HAVS / CTS and will be a guide to the effectiveness of the risk assessment and control process. The employer is required to hold health records for a period of 40 years from the last date of entry.

Reporting of Injuries, Diseases or Dangerous Occurrences Regulations (NI) RIDDOR

Under the RIDDOR regulations (see RIDDOR Policy on the loop), when a diagnosis of HAVS or CTS associated with hand transmitted vibration is provided by a doctor (including the GP or a specialist), the Trust is required to report cases which are potentially linked with occupational exposure.

- **Carpal Tunnel Syndrome**: where the person's work involves regular use of percussive or vibrating tools.

- **Hand Arm Vibration Syndrome**: where the person's work involves regular use of percussive or vibrating tools, or holding materials subject to percussive processes, or processes causing vibration

If the Health and Safety Department is notified by a doctor (eg GP or Occupational Health) that a staff member suffers from a reportable, work related disease the Health and Safety managers must then complete a disease report form NI2508A and forward to the HSENI.

** Sharing of information with the Health and Safety Executive NI for legal RIDDOR requirement on Disease is detailed in Occupational Health Privacy Notice.

In addition, where hand transmitted vibration exposure is identified as likely at the pre-employment risk assessment stage, baseline HAVS health surveillance will be conducted during the pre-placement health assessment and management will be required to create a health record.

Those employees with normal findings and ongoing vibration exposure will have a follow up assessment at 12 months

Those employees with abnormal findings may be required to attend for review health surveillance at more frequent intervals. Guidance on review / fitness for continued exposure to hand held vibration will be issued by the Occupational Health Service at the time of the assessment.

Where advice is received, from the Occupational Health Service, that an employee can no longer be exposed to hand held vibration, and therefore is unable to discharge the duties for which they are employed, the Trust will, wherever possible, endeavour to provide suitable alternative employment / restrict the employee from exposure as required.

5.6 Key Policy Statements

The Trust accepts its responsibility as an employer to provide a safe and healthy working environment and recognises that this applies both to the physical and psychological wellbeing of staff.

5.6.1 The Trust recognises that staff can be exposed to hand-arm vibration during their working lives and that it has a duty to assess the risk of exposure and related ill health, which can be associated with the workplace and to regularly review such risk assessments.

5.6.2 The Trust has a duty to take all reasonable and practical measures to prevent or minimise exposure to hand-arm vibration.

5.6.3 To use evidence based procedural arrangements to assess and manage exposure to hand-arm vibration.

5.6.4 To work in partnership with managers, staff and their representatives, to continuously improve the recognition and management of work-related hand-arm vibration.

5.6.5 To promote the physical wellbeing of our staff by integrating effective management and employment practices with the delivery of services.

5.6.6 The Trust recognises that individuals need to take responsibility for their own general health and wellbeing.

5.6.7 The Trust recognises that by promoting physical wellbeing in staff, this will improve not only the quality of staff's working lives but also the quality of care to service users.

5.7 Dissemination

This Policy is required to be implemented by all Directorates. All managers, staff, and departments with specific responsibilities are required to comply with this Policy, as detailed.

This policy is relevant to all staff working with vibrating tools. Areas of particular concern are the use of equipment within the Estates, Regional Disablement Service (RDS), the Regional Engineering Centre (REC) and Theatres.

5.8 Resources

The Medical Director in conjunction with the Finance Director and the Directors of Directorates where control of vibration measures are required are

responsible for releasing the necessary resources with which to effectively implement this Policy.

Senior Managers from within these Directorates are responsible for identifying the necessary resources with which to effectively implement this Policy.

5.9 Exceptions

There are no exceptions.

6.0 MONITORING AND REVIEW

HAVS health surveillance can help the Trust to ensure the vibration at work policy is working effectively.

It is the responsibility of managers to monitor the outcomes of health surveillance in their staff, to complete and review relevant vibration risk assessments and controls if cases of HAVS / CTS are identified, to ensure staff have appropriate training and to report and investigate incidents or diseases relating to hand arm vibration.

As this policy is part of the Trust's Health and Safety Management System it will be monitored through the Belfast Risk, Audit and Assessment Tool (BRAAT) vibration standard.

7.0 EVIDENCE BASE/REFERENCES

The Health and Safety Executive has produced a simple guide to the Regulations and advice for Managers on how to control the risks from hand-arm vibration. This can be downloaded from Hand-arm vibration at work.

There is a general duty on employers to protect the health and safety of their employees in the *Health and Safety at Work (NI) Order 1978.

The Control of Vibration at Work Regulations (NI) 2005 state that employers must:

- ensure that risks from vibration are controlled
- provide information, instruction and training to staff on the risk and the actions being taken to control risk
- provide suitable health surveillance
- make a suitable and sufficient assessment of the risk to health and safety of their employees

The Management of Health and Safety at Work Regulations (NI) 2000

The HSE Vibration Exposure Calculator: - is available at the Health and Safety Executive website vibration calculator

*The Provision and Use of Work Equipment Regulations (NI) 1992

*Workplace (Health, Safety and Welfare) Regulations (NI) 1993

*Construction (Design and Management) Regulations (NI) 2016

*The Personal Protective Equipment at Work Regulations (NI) 1993

*Note the above regulations are available for viewing at https://www.hseni.gov.uk website

BHSCT Health Surveillance Policy

8.0 APPENDICES

Appendix 1 – How to identify and assess a vibration problem
Appendix 2 – Managing Vibration Risks

9.0 NURSING AND MIDWIFERY STUDENTS

Nursing and/or Midwifery students on pre-registration education programmes, approved under relevant 2018/2019 NMC education standards, must be given the opportunity to have experience of and become proficient in the Policy and Procedural Arrangements relating to The Control of Vibration at Work where required by the student's programme. This experience must be under the appropriate supervision of a registered nurse, registered midwife or registered health and social care professional who is adequately experienced in this skill and who will be accountable for determining the required level of direct or indirect supervision and responsible for signing/countersigning documentation.

Direct and indirect supervision

- Direct supervision means that the supervising registered nurse, registered midwife or registered health and social care professional is actually present and works alongside the student when they are undertaking a delegated role or activity.
- Indirect supervision occurs when the registered nurse, registered midwife or registered health and social care professional does not directly observe the student undertaking a delegated role or activity. (NIPEC, 2020)

This policy has been developed in accordance with the above statement.

Wording within this section must not be removed.

10.0 EQUALITY IMPACT ASSESSMENT

The Trust has legal responsibilities in terms of equality (Section 75 of the Northern Ireland Act 1998), disability discrimination and human rights to undertake a screening exercise to ascertain if the policy has potential impact and if it must be subject to a full impact assessment. The process is the

responsibility of the Policy Author. The template to be complete by the Policy Author and guidance are available on the Trust Intranet or via this **link**.

All policies (apart from those regionally adopted) must complete the template and submit with a copy of the policy to the Equality and Planning Team via the generic email address equalityscreenings@belfasttrust.hscni.net

The outcome of the equality screening for the policy is:

Major impact	☐
Minor impact	☐
No impact	☒

11.0 DATA PROTECTION IMPACT ASSESSMENT

New activities involving collecting and using personal data can result in privacy risks. In line with requirements of the General Data Protection Regulation and the Data Protection Act 2018 the Trust considers the impact on the privacy of individuals and ways to militate against any risks. A screening exercise must be carried out by the Policy Author to ascertain if the policy must be subject to a full assessment. Guidance is available on the Trust Intranet or via this **link**.

If a full impact assessment is required, the Policy Author must carry out the process. They can contact colleagues in the Information Governance Department for advice on Tel: 028 950 46576

Completed Data Protection Impact Assessment forms must be returned to the Equality and Planning Team via the generic email address equalityscreenings@belfasttrust.hscni.net

The outcome of the Data Protection Impact Assessment screening for the policy is:

Not necessary – no personal data involved	☐
A full data protection impact assessment is required	☐
A full data protection impact assessment is not required	☐

Wording within this section must not be removed.

12.0 RURAL NEEDS IMPACT ASSESSMENT

The Trust has a legal responsibility to have due regard to rural needs when developing, adopting, implementing or revising policies, and when designing and delivering public services. A screening exercise should be carried out by the Policy Author to ascertain if the policy must be subject to a full assessment. Guidance is available on the Trust Intranet or via this **link**.

If a full assessment is required the Policy Author must complete the shortened rural needs assessment template on the Trust Intranet. Each Directorate has a Rural Needs Champion who can provide support/assistance.

Completed Rural Impact Assessment forms must be returned to the Equality and Planning Team via the generic email address equalityscreenings@belfasttrust.hscni.net
Wording within this section must not be removed.

13.0 REASONABLE ADJUSTMENT ASSESSMENT

Under the Disability Discrimination Act 1995 (as amended) (DDA), all staff/ service providers have a duty to make Reasonable Adjustments to any barrier a person with a disability faces when accessing or using goods, facilities and services, in order to remove or reduce such barriers. E.g. physical access, communicating with people who have a disability, producing information such as leaflets or letters in accessible alternative formats. E.g. easy read, braille, or audio or being flexible regarding appointments. This is a non-delegable duty.

The policy has been developed in accordance with the Trust's legal duty to consider the need to make reasonable adjustments under the DDA.
Wording within this section must not be removed.

SIGNATORIES
(Policy – Guidance should be signed off by the author of the policy and the identified responsible director)

06/02/2024
_____ **Date:** _____

Laota McQuitty,
Lead Health and Safety Manager
Policy Author

29/02/2024
_____ **Date:** _____

Dr George Gardiner, Medical Director (Acting)

Appendix 1

How to identify and assess a vibration problem

Checklist to assist Managers to identify hazards associated with a vibration problem that may lead to vibration. It is recommended that you view the relevant areas and consult staff during the process considering the main areas of concern.

Areas identified during this process as a significant risk should have a documented general risk assessment completed.

Find out where the main problems are	Yes	No
Observe the work process and the tools used. Where practicable and safe to do so try a tool yourself.		
How many staff use powered hand held tools and where do they work?		
Is there a high turnover of staff in any department using powered hand tools?		
Ask operators about vibration levels when the tool or machine is in use. Do they get numbness or tingling in their fingers?		
Have operators complained about recurrent pain or throbbing in their hands, difficulties with gripping objects or completing fiddly tasks such as fastening or unfastening a button?		
Look at the process	**Yes**	**No**
Could you redesign the process to avoid or reduce the use of powered hand held tools, e.g. by substitution or mechanisation?		
Are alternative lower vibration processes or methods available?		
Could you introduce remote or power assisted control?		
Could you use mechanical aids to help move the components or tools?		

Look at the installation	Yes	No
Could you reduce vibration from fixed machines by improving the mounting?		
Could you isolate the vibration directly?		
Could you use jigs to hold components firmly in place?		

Look at the task	Yes	No
Could you reduce or mechanise the force which the operator has to exert to do the job?		
Could you use balancers or tensioners to take the weight of the tool from the operators' hands?		
Look at the tools	**Yes**	**No**
Are you providing the most appropriate tool for the job? Check with suppliers whether lower vibration tools or components are available		
Could you use an alternative type of tool for example a grinder instead of a chipping hammer to reduce vibration exposure?		
Could you buy better balanced wheels or discs for cutting or grinding?		
Are you using the optimum quality and grade of cutting or grinding wheels and discs?		
Are the tools and machinery performing in accordance with the vibration values declared by the manufacturer?		
Could you reduce the airline pressure on hammer action tools and maintain cutting rates?		

Check maintenance requirements	Yes	No
Do your maintenance schedules conform to the manufacturer's specifications?		
Are your maintenance arrangements adequately supervised, monitored and recorded?		
Do you know how often tools or their components should be replaced? Do you need to replace anti-vibration mounts or dampers? Ask the manufacturer or supplier for information.		
Could you make balance checks on your tools and machines?		
Do you keep the tools sharp? Could vibration exposure from tool sharpening operations be reduced?		
Look at the work schedule	**Yes**	**No**
Could you reduce exposure by introducing job rotation?		
Are there enough breaks in the work for recovery, during tasks with a risk of high vibration?		
Check operator usage	**Yes**	**No**
Are operators using the tools correctly in accordance with manufacturer's instructions?		
Do you train operators to use the correct tool for the job?		
Are the correct tools available?		
Should you introduce a permit to use system tools and processes with a high vibration risk?		
Would closer supervision help?		
Consider operator protection	**Yes**	**No**
Do operators know what they can do to minimise vibration risks?		
Could you improve operator information, instruction and training?		
Is the workplace warm enough to maintain good blood circulation so preventing hands and fingers from becoming cold?		
Do operators need gloves or clothing to help keep them warm?		
Does the exhaust air from pneumatic tools need to be diverted away from the operator's hand?		

Look at the costs and benefits	Yes	No
Compare the costs and benefits of the various control measures. How many employees will benefit?		
Are there other benefits, e.g. reduced noise or improved productivity?		
What will be the cost per employee protected?		
Look for symptoms	**Yes**	**No**
Have you instituted a programme for identifying early adverse health effects?		
Do you have access to a medical practitioner to supervise the programme and for referral of symptoms?		
Do workers know what to look out for and are they encouraged to report symptoms such as finger blanching?		
Do you keep adequate records of these reports?		
Do you investigate any adverse health effects reported?		
Do you feed your findings back into your risk assessment and control measures?		

Appendix 2

Managing Vibration Risks