Yenaa Housing

Musculo Skeletel Policy 2025

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Policy Checklist	
Date of Implementation	Feb 25
Date of Last Review	
Date of Next Review	Feb 27

1. Purpose and scope
- Purpose: To prevent work-related musculoskeletal disorders (MSDs), protect staff health and wellbeing, ensure legal compliance, and provide clear procedures for risk reduction, reporting, assessment, and support.
- Scope: This policy applies to all Yenaa Housing employees, agency staff, contractors and volunteers in England and covers all work activities including office-based, homeworking, field/estate visits, manual handling, driving, and remote/agile working.

2. Legal and regulatory framework
This policy is informed by relevant UK legislation and guidance, including but not limited to:
- Health and Safety at Work etc. Act 1974
- Management of Health and Safety at Work Regulations 1999 (as amended)
- The Workplace (Health, Safety and Welfare) Regulations 1992
- Manual Handling Operations Regulations 1992 (as amended)
- Provision and Use of Work Equipment Regulations 1998 (PUWER)
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)
- Equality Act 2010 (reasonable adjustments)
- HSE guidance: “Work-related musculoskeletal disorders (MSDs): A brief guide” and HSE guidance on manual handling, display screen equipment (DSE) and homeworking
- British Standards and authoritative guidance where relevant (e.g., ergonomics guidance)

3. Responsibilities
- Directors/Managers: implement this policy in their areas, ensure risk assessments, ensure employees have suitable equipment and adjustments, monitor compliance and support return-to-work.
- Health, Safety & Compliance Lead: maintain policy, provide expert advice, coordinate risk assessments, keep records, collate incidents and trends, report to the Board and liaise with occupational health providers.

4. Risk assessment and control
- General approach: adopt a risk-based approach in line with Management of Health and Safety at Work Regulations. Use the hierarchy of control: eliminate, substitute, engineer controls, organisational controls, and use of PPE only as a last resort.
- Identify hazards: include manual handling tasks (lifting, carrying, pushing/pulling), awkward postures, repetitive tasks, forceful exertions, prolonged static postures (sitting/standing), DSE work (computer use), driving/mobility, poorly designed workspaces and tasks in tenants’ homes.

- Task-specific assessments: managers must ensure written risk assessments for activities with significant MSK risk (manual handling, DSE, fieldwork, vehicle operations, maintenance tasks). Assessments must consider vulnerable individuals (pregnant workers, pre-existing conditions).
- Controls to be implemented:
  - Eliminate or reduce manual handling by using mechanical aids, trolleys, transfer equipment, two-person lifts and task redesign.
  - Provide and maintain suitable work equipment (adjustable chairs, desks, driveable aids, hoists), comply with PUWER.
  - Ergonomics for DSE: provide DSE assessment for office-based and homeworkers; supply adjustable chairs, appropriate screens, keyboards and footrests; encourage breaks and micro-pauses; follow HSE DSE guidance.
  - Safe systems for fieldwork: safe handling guidance for moving furniture in tenant homes, risk assessment before entry, pre-attendance information from tenants, two-person policy for high-risk tasks, PPE where necessary.
  - Work organisation: job rotation, task variation, adequate staffing levels, managing workload and time pressures, rest breaks, and rota design to avoid prolonged static postures.

5. Reporting, investigation and recording
- Reporting: staff must report MSK incidents, symptoms, near misses and hazards promptly to their manager and via Yenaa Housing's incident reporting system.
- Investigation: all work-related MSK incidents resulting in injury, absence or significant symptoms must be investigated to identify root causes and implement corrective actions.
- RIDDOR: report incidents to the HSE under RIDDOR where they meet the reporting thresholds (e.g., specified injuries, occupational diseases diagnosed by a doctor). Consult HSE guidance on reporting work-related musculoskeletal disorders where applicable.

7. Wellbeing and prevention initiatives
- Promote physical activity, posture awareness, stretching/micro-breaks, manual handling best practice and mental wellbeing resources.
- Provide targeted initiatives for high-risk groups (e.g., field operatives, repairs teams) including toolbox talks, refresher training and equipment checks.
- Encourage managers to include MSK risk and wellbeing in one-to-one meetings and performance reviews.