# Construction industry

# Hazardous manual tasks risk management systems assessment

This tool provides best practice guidance and examples to assist principal contractors in a gap analysis of hazardous manual tasks (HMT) risk management.

In responding to the questions, if the organisation has the element and it is specific to HMT, tick **Y (Yes).**

If no element exists, tick **N (No).**

If the element exists but is not specific to HMT, tick **G (Generic) –** element in place but not specific to HMT***.***

| **Questions** | **Evidence guide** | **Y** | **N** | **Generic** | **Comments** |
| --- | --- | --- | --- | --- | --- |
| **Commitment, policy and planning** |  |  |  |  |  |
| 1. **Have manual tasks been identified as a priority hazard in the organisation?**   Examples and indicators include:   * the work health and safety plan: * specifies the prevention of musculoskeletaldisorders (MSD) resulting from manual tasks as a priority hazard * includes objectives and targets for the prevention of MSD from HMT * has been reviewed and updated to reflect data and research * the risk register includes specific HMT in core activities. | View:   * work health and safety plan * risk register. |  |  |  |  |
| 1. **Does the organisation have any specific targets and lead performance measures for prevention of MSD and/or HMT?**   What is the organisation doing to prevent MSD and manage HMTs?  What MSD and HMT data is reported to the board?  Examples and indicators include:   * lead performance indicators (PPIs) that target prevention of MSD from HMT are included in reports to senior management. Examples of PPIs include:   + all controls implemented follow the hierarchy of control to eliminate or minimise the risk of MSD   + a specified number of controls implemented that reduce the manual tasks risks and focus on elimination or re-design.   + high risk manual tasks in core activities such as concreting, steel fixing and form work identified and targeted at construction   + safe design forums during the planning and design stage   + specific inclusions regarding manual task risk management in all procurement contracts   + subcontractors complying with tendering criteria specifying requirement for HMT risk management specific to each contractors’ high risk manual tasks   + number of workgroups using a participative ergonomics programme for example [PErforM](https://www.worksafe.qld.gov.au/injury-prevention-safety/hazardous-manual-tasks/participative-ergonomics-for-manual-tasks-perform)[[1]](#footnote-1).   + manual task specific training for: * managers * supervisors * workers.   + consultative networks established to improve design related issues in: * supply chain * plant and materials * structures (buildability)   + time frames set and met for implementation of changes   + specific inclusions (identified high risk manual tasks) on hazard/risk register and in site safety plan   + safety meetings where HMT are a standing agenda item for action   + management meetings where HMT is an agenda item for action   + toolbox talks on HMT risk management   + use of participative ergonomics programme after incidents   + contractor inductions include the information about the PErforM initiative or other participative ergonomics program   + monitoring and reviewing manual tasks related activities for example, control implementation action date, sign off and closure. | View:   * HMT targets and performance measures. |  |  |  |  |
| 1. **Do senior management regularly review and respond to lead and lag indicators about MSD and HMT that are in work health and safety (WHS) performance reports?**   Examples and indicators include:   * WHS performance including MSD caused by HMT is reported to the board in the annual report. Data includes:   + number of MSD claims and costs   + lead performance measures against MSD prevention targets * reports or presentations are made to the senior management group or board which reports on:   + data   + MSD incident investigations and outcomes   + evidence based MSD research * officers and senior managers monitor lead performance measures regarding MSD caused by HMT * documented processes at the senior management level for identifying and capturing organisational wide MSD and HMT issues * lessons learnt are communicated throughout the organisation. * data is accessible, reviewed and analysed * changes are made to hazard register and procedures that reflect HMT issues * data and research are used to set priorities/objectives and PPI’s for MSD prevention * a separate risk management or health and safety committee as a subset of the board, chaired by a senior executive with WHS responsibilities and KPIs * regular system audits are undertaken to determine if HMT related activities (for example safety inspections, risk assessments, worker training etc.) are being completed as scheduled. | View:   * WHS plan reviewed and updated to reflect changes in objectives and targets hazard/risk register and changes to procedures that reflect HMT issues * performance report contents * MSD data * MSD/HMT targets and lead performance indicators * MSD research * systems audits * minutes of senior management group or board meetings where significant MSD incidents, MSD from HMT performance and other significant WHS issues are reviewed and addressed. |  |  |  |  |
| 1. **Do key managers have responsibilities, accountabilities and KPIs for HMT risk management?**   Who is the most senior person in the organisation with responsibilities, accountabilities and KPIs for MSD prevention and HMT risk management?  Examples and indicators include:   * an executive manager is responsible for driving HMT risk management and achieving targets * accountabilities and KPI’s including lead indicators specifically for HMT risk management for all levels of management are in place. This role reports on targets, reviews HMT performance and assists other decision makers understand the extent of the problem, promotes the benefits of managing MSD and advocates to make them a priority for action. These managers include: * executive manager(s). * project managers * engineers * site managers/supervisors * WHS managers. | View   * position description(s) identify responsibilities for HMT * managers’ KPIs specific to prevention of MSD from HMT * reports on KPI results * performance evaluation of procedures, results and outcomes. |  |  |  |  |
| 1. **Are current HMT risk management interventions evidence based?**   How do you determine what an appropriate HMT risk management intervention is?  Do you use a participative approach that includes workers identifying HMT problems and coming up with solutions throughout the risk management process?  Examples and indicators include:   * people in key roles who have health and safety responsibilities promote evidence based HMT risk management practices for example: * participative ergonomics programmes e.g. the PErforM program   + The organisation does not promote or use behaviour based training programmes for example lifting techniques, back care, core stability and stretching programs as the primary risk control for HMT, recognising that these programmes are not effective in controlling the risk of MSD, as the physical HMT risk factors are not changed.   *These training programs are complimentary administrative controls that have value within the worker health and well-being and return to work portfolios. They do not replace systematic HMT risk management following the hierarchy of control.* | View:   * HMT policies and procedures reflecting evidence based initiatives for example the implementation of participative ergonomics (e.g. PErforM) on all projects * current initiatives. |  |  |  |  |
| 1. **Does the organisation independently or collaboratively (with a research institution, industry body, or other) invest in research and development regarding the prevention of MSD caused by HMT?**   Examples and indicators include:   * the organisation contributes to a research project that HMT/MSD prevention targets skills development * the organisation contributes to a research project that targets HMT/MSD prevention through elimination or innovative design changes for example structural (buildability), plant/materials in core business. * the organisation contributes to a research project on a HMT/MSD prevention related topic for example:   + efficacy of implementation of an integrated risk management approach including work health   + the impact of targeting MSD prevention on safety during high risk work   + the impact of organisational culture targeting work health issues to reduce MSD   + leadership and management commitment targeting MSD prevention   + participative engagement of workforce targeting MSD prevention   + efficacy of recruitment and development of staff with HMT risk management skills   + efficacy of recruitment and development of staff with specialised human factors and ergonomics knowledge and skills for the design of work   + the use of HMT specific risk assessment tools to identify and control HMT risks. | View:   * research documentation * research report. |  |  |  |  |
| **Consultation and communication** |  |  |  |  |  |
| 1. **Are all relevant stakeholders consulted throughout the HMT risk management process?**   Examples and indicators include: all relevant stakeholders are identified at the outset of the planning phase of the project regarding priority HMT  * consultation includes relevant stakeholders such as subcontractors, engineers, manufacturers, suppliers, designers and technical experts for example, an ergonomist depending on the complexity of the activity being considered * all duty holders are identified and included in risk assessments and identification of suitable controls, including identification of who is responsible for the source of risk and implementation of controls so far as reasonably practicable (SFARP). * management meetings include WHS as an agenda item and regularly focus on MSD/ HMT and include:   + actions arising from minutes delegated to a responsible person   + sign off by relevant stakeholders after completion and review**.** * the principal contractor (PC) consults with sub-contractors about risk control measures when the source of risk is outside scope of sub-contractor to manage  consultation continues for the life of the project with relevant stakeholders  * lessons learned are communicated and shared for future projects for example on the risk and opportunity register  the organisation fosters and supports proactive leadership for the prevention of MSD from HMT and communicates this message widely to all stakeholders. | View evidence of:   * process for identification of relevant stakeholders in the planning stage * meeting minutes and attendance at safe design forum * systems in place to ensure relevant stakeholder consultation during HMT risk management stages: * hazard ID * risk assessments * implementation of controls * monitor and review * communications about MSD prevention and HMT. |  |  |  |  |
| 1. **Are workers consulted during every stage of HMT risk management?**   Examples and indicators include:   * the consultation arrangements at the workplace (for example, safety committee meeting, toolbox talks etc), are structured so that all workers undertaking work within or for the business or undertaking have access to the consultation process * workers are consulted in every stage of the HMT risk management process including: * hazard identification * risk assessment (where applicable) * identification and implementation of controls * monitor and review * MSD/HMT standing agenda item at all WHS meetings   + attendance is well supported (management attend and/or support staff attendance) * senior managers regularly visit the site and discuss HMT with site management and employees. | View:   * HMT audits, hazard and incident notifications * records of consultation about the above * completed reports and actions * worker consultation on completed risk assessments, identification of controls and during the monitoring and review process * WHS and management meeting agendas and minutes, attendance list * includes stakeholders/worker/worker representative * HMT communications (emails, safety alerts, posters, tool box talks etc) * evidence of site visit and outcomes actioned. |  |  |  |  |
| **Hazardous manual tasks risk management** | | | | | |
| **Hazard identification and risk assessment** |  |  |  |  |  |
| 1. **Does the organisation use a systematic approach that identifies and assesses the broad range of factors contributing to HMT?**   Is the organisation awareof the research that identifies the links between the physical and psychosocial factors such as work related stress and MSD; and that there is a link between chronic disease risk factors such as obesity and smoking and injury and MSD? (These factors may be independent or interrelated).  Examples and indicators include:   * HMT are systematically identified and assessed during the project planning and throughout the life of the project by: * inspecting the workplace * consulting in the supply chain subcontractors and their workers * reviewing available information for example   + safety meetings   + incident reports and injury data   + risk register   + surveys * consulting with manufacturers, suppliers and others * utilising industry knowledge and risk assessments from previous projects * physical and psychological hazards that contribute to MSD are identified and assessed * the organisation considers the physical, psychological and chronic disease factors when identifying and assessing HMT * worker health and wellbeing * work design risks that impact on worker [health and well-being at work](https://www.worksafe.qld.gov.au/injury-prevention-safety/health-and-wellbeing-at-work) are identified   **NOTE:** worker health and wellbeing initiatives are not a legislated duty but are complimentary to primary MSD prevention and HMT risk management. | View   * completed audits with evidence of: * worker consultation * consultation with other relevant stakeholders * musculoskeletal injury data * evidence of consultation with stakeholders (emails, meeting minutes/attendance list) * workplace surveys e.g. [discomfort survey](https://www.worksafe.qld.gov.au/__data/assets/pdf_file/0008/58166/Hazardous-manual-tasks-COP-2011.pdf), roster assessments, analysis of absence/turnover data, worker exit surveys, review of psychological illness claims, formal grievance procedures, appropriate workplace behaviour procedures (i.e. code of conduct) and training, one on one worker discussions and results. |  |  |  |  |
| 1. **Does the organisation have a HMT risk register?**   Examples and indicators include:   * hazard register includes HMT identified in the supply chain for example HMT due to the design of structure, choice of materials or suppliers’ product specifications * HMT in core activities are included for example:   + operation of plant   + manual screeding, raking and finishing concrete   + form work – erection and removal   + steel fixing   + manual handling and installation of the following materials     - landscaping materials       * crib wall components       * stone blocks       * paving     - steel rebar     - formwork components     - scaffolding     - cement blocks     - fire rated/sound proof plasterboard     - other sheet materials i.e. standard plasterboard, compressed fibre cement sheets     - glass     - oversized mirrors,     - air conditioning units     - tiles     - other * the HMT register is reviewed and updated regularly. | View:   * risk register * updated HMT incident reports * updated SWMS/SWP. |  |  |  |  |
| 1. **Are suitable HMT risk assessment tools used?**   Does the organisation use an assessment tool that identifies the HMT risk factors and sources of risk?  Examples and indicators include:   * HMT risk assessments use specific tools and surveys to gather information, such as Hazardous Manual Tasks Code of Practice - appendix D, [Manual tasks risk management worksheet](https://www.worksafe.qld.gov.au/__data/assets/word_doc/0005/83804/manual-tasks-risk-management-worksheet.doc), PErforM program (Participative Ergonomics for Manual Tasks), ManTRA (Manual Tasks risk assessment tool), The [PErforM eTool](https://fswqap.worksafe.qld.gov.au/etools/etool/perform?utm_source=etools+suite+perform&utm_medium=website&utm_content=eSafe+october+2016+link&utm_campaign=perform) (**P**articipative **Er**gonomics **for** **M**anual Tasks) and [ManTRA eTool](https://fswqap.worksafe.qld.gov.au/etools/etool/mantra?utm_source=etools+suite+mantra&utm_medium=website&utm_content=eSafe+october+2016+link&utm_campaign=mantra) (**Man**ual **T**ask **R**isk **A**ssessment) eTools are based on the paper versions of these manual task risk assessment tools. * the organisation uses [People at Work](https://www.worksafe.qld.gov.au/agriculture/articles/people-at-work-project) or other approaches to identify and manage the psychological health of workers, for example:   + workplace surveys, roster assessments, analysis of absence/turnover data, worker exit surveys, review of psychological illness claims, formal grievance procedures, appropriate workplace behaviour procedures (i.e. Code of Conduct ) and training, one on one worker discussions). Refer to [*Work-related stress*](https://www.worksafe.qld.gov.au/injury-prevention-safety/workplace-hazards/work-related-stress)and/or[*Workplace bullying*](https://www.worksafe.qld.gov.au/injury-prevention-safety/workplace-hazards/workplace-harassment-and-bullying)guidance material on the WHSQ website.   *People at Work is a psychosocial risk assessment process. It aims to help organisations identify and manage workplace risks to the psychological health of all the people who work in the organisation.* | View:   * HMT risk assessment/management tools used. |  |  |  |  |
| **Risk control** |  |  |  |  |  |
| 1. **Are effective processes used that ensure the control of HMT risks (SFARP)?**   Please demonstrate the process and provide documentation that demonstrates risk management for two HMTs:  **Commercial:**   * concreting HMTs * another example of a HMT in a core activity (nominated by the organisation).   **Civil:**   * earth retaining construction * another example of a HMT that was identified in a core activity (nominated by the organisation).   Examples and indicators include:   * HMT risk assessment considers the characteristics of a hazardous manual task including:   + repetitive or sustained force   + high or sudden force   + repetitive movement   + sustained and/or awkward posture   + exposure to vibration * if there is a risk then the source of the risk is also determined as outlined in the Work Health and Safety Regulation s60(2) ie   *In determining what control measures to implement under subsection (1), the person conducting the business or undertaking must have regard to all relevant matters that may contribute to a musculoskeletal disorder, including—*  *(a) postures, movements, forces and vibration relating to the hazardous manual task; and*  *(b) the duration and frequency of the hazardous manual*  *task; and*  *(c) workplace environmental conditions that may affect the hazardous manual task or the worker performing it; and*  *(d) the design of the work area; and*  *(e) the layout of the workplace; and*  *(f) the systems of work used; and*  *(g) the nature, size, weight or number of persons, animals or things involved in carrying out the hazardous manual task.*   * The process ensures that controls implemented target the sources of risk and follow the hierarchy of controls * all activities/tasks that are linked to a MSD incident are assessed * the HMT assessed are systematically prioritised * prioritised HMT are systematically referred to management meetings/safe design forum/other.   + during the planning and design phase consideration is given to:     - the manual tasks risks when designing the structure and selecting materials     - the choice of materials – specifically the nature, size, weight or number of materials that will be handled     - how, when and where the materials are to be handled and stored and the manual tasks risks when manually handled. * participative ergonomics and decision making is used and includes workers, supervisors, managers and relevant others * risk registers document implementation of control measures * a person with HMT risk management competency participates in HMT risk management processes * a person with human factors and ergonomics expertise is consulted about complex hazardous manual tasks * there is an action plan including identification of controls and person/team/committee responsible for:   + approving the controls;   + putting controls in place   + agreed implementation and review date and   + review of controls to ensure that the risk of musculoskeletal disorder been controlled for the hazardous manual tasks. | View:   * names and roles of duty holders identified for participation in HMT risk management * stakeholders involved in risk assessments * HMT risk assessment/ management tools used * completed risk assessments with risk factors identified * meeting minutes and attendance at safe design forum * control implementation plans * plans actioned * sign off from stakeholders (subcontractors/engineers/project manager etc) and workers * purchase invoice for controls, emails/correspondence * evidence of HMT that have been referred to safe design forum   + agendas   + outcomes   + attendees * meeting minutes, emails * agenda and sign off of risk controls at management meetings/safe design forum * update to hazard/risk register following MSD incident investigation reports, audit findings etc * risk assessments/ investigations/JSAs/ SWMS/ SWP etc signed off by a competent person and other relevant stakeholders. |  |  |  |  |
| 1. **Are HMT procedures included in all relevant business decisions including project planning, design and procurement?**   The responses to the previous questions will provide a clear indication of whether HMTs are effectively included in business decisions.  Examples and indicators include:   * the procedures for HMT risk management specify: * compliance with the WHS legislation, specifically hazardous manual tasks regulation s60 and code of practice 2011; * specific HMT risk management process including:   + specifying a manual tasks risk assessment tool to be used   + participative ergonomics throughout the risk management process   + consultation with and provision of hazardous manual tasks information to relevant stakeholders and sub-contractors prior to and during the tender process specific to the scope of works that they are undertaking   + participation of a person who meets the human factors and ergonomics competency criteria   + identification and management of psychological factors for example: ensuring realistic project programming, work scheduling and rostering   + being sustained for the life of project.   **Safe design**   * prioritised HMT are routinely included for consideration during the planning and design stage * there is a documented process/procedure outlining: * consultation with all relevant stakeholders during the planning and constructions stages * the procedures for HMT risk management in design and specifies:   + when the principal contractor is involved in the design or has input into the design. HMT risk assessments are undertaken at the design stage to identify, assess and manage occupational health and safety (OHS) buildability issues that may arise during construction and issues for the end user * systematic referral of prioritised hazardous manual tasks to the safe design forum. For example: design changes were made to the following: * prescribed concrete slump increased to 100 mm to improve workability and reduce force * corridors and work areas were redesigned to allow for use of scissor lifts and vacuum lifters when handling fire rated/sound proofed plasterboard and other sheet materials to reduce the manual tasks risks * HMT are included in the WHS in design risk register.   **Procurement**   * there is a documented process/procedure outlining the specific HMT requirements to be included in all procurement activities and contracts for example, contracts specify: * purchase of plant and materials requires consultation and HMT risk management prior to purchase * communication with subcontractors for example: * subcontractors are provided information prior to or during the tender process, so that project specific WHS hazards including HMT and head contractor prescribed controls can be incorporated into the subcontractor processes and safety planning for example: * how identified hazardous manual tasks are to be managed in core business activities and * these requirements were priced in to the contract * no lift policy for certain materials * HMT risk management requirements for example, contracts specify: * subcontractors have knowledge, understanding of and compliance with HMT relevant legislation * subcontractor requirement to demonstrate an evidence based, systematic risk management approach for HMT including: * HMT assessment tools * participative risk management and * requirement to follow hierarchy of controls. | View:   * HMT specific procedures: * HMT risk management process * HMT tools to be used during audits, risk assessment and incident investigations etc * referral to safe design procedure * procurement procedure * HR procedures re: hours of work, shift work etc * recent procurement documents * OHS in design risk register * evidence of design review * new revisions to design plan * designs reflect changes where necessary * evidence that subcontractors are provided information prior to or during the tender process, so that project specific OHS hazards including HMT and head contractor prescribed controls can be incorporated into the subcontractor processes and safety planning (emails, letters etc) * pre-tender or pre-contract interview checklists including the discussion of project safety related information * itemised list of prevention of MSD caused by HMT inclusions into tender/contractor packages * evidence of communication of the project safety information, such as (but not limited to) email, document transmittal etc * evidence of HMT risk management documents attached to purchase request for plant/materials * completed HMT procedure compliance audits (e.g. evidence of outcome of referral of HMT to safe design forum, procurement packages to specify HMT specific criteria, training content in line with HMT COP * performance evaluation including audits of compliance with HMT procedures are undertaken. |  |  |  |  |
| **Incident investigation, corrective and preventative action** |  |  |  |  |  |
| 1. **Are musculoskeletal injury incidents caused by a HMT systematically escalated as an investigation priority?**   Examples include:   * all HMT/MSD incidents are investigated using HMT risk management procedures for example a participative ergonomics programme; and a specific HMT risk assessment/management tools * following an MSD incident, the organisation adopts an integrated approach where the physical, psychological and chronic disease risk factors associated with a work activity are identified and managed together with other WHS hazards. The investigation considers all the factors including:   + the work   + the worker   + the work environment. * the escalation criteria ensures that MSD from HMT are investigated as a priority * investigation reports identify risk factors, review of controls, recommendations, consultation, timeframes for implementation * information about HMT (Hazard ID, consultation, audit and incident investigation results and actions) is reported systematically to head office * proactive audits are scheduled * investigation and audit reports are distributed to management/others * recommendations and corrective actions are implemented in specified timeframes * changes in the procedures resulting from incident investigations and corrective and preventative actions are implemented and recorded. | View:   * MSD incident investigation reports * data on number of MSD investigations. |  |  |  |  |
| 1. **Do those listed below participate in the investigation for MSD incidents and complaints?**  * Competent person (able to demonstrate knowledge and skills regarding HMT risk management/meets HMT and/or human factors and ergonomics competency criteria). * Workers, line managers and relevant stakeholders. | View:   * evidence of human factors and ergonomics competency of lead investigator/investigation team member * name(s) of workers, line mangers, technical expert and their sign off on completed reports and actions. |  |  |  |  |
| **Training and competency** |  |  |  |  |  |
| 1. **Do key staff in the organisation have HMT risk management skills?**   Does the organisation have a competency framework for staff and consultants that includes criteria for HMT risk management and/or human factors and ergonomics?  How do you determine that the organisation has skilled staff for managing work health generally and MSD prevention specifically?  Have you done a HMT training needs analysis?  Examples and indicators include: There is a training competency framework that includes criteria for human factors and ergonomics skills for example physical, cognitive and organisational skills for key roles in the organisation  * There is a competency register that includes both executive and operational managers * recruitment procedure includes competency criteria for HMT risk management and/or human factors and ergonomics in key roles * the safety professionals and others responsible for HMT risk management policy, procedures and provision of reports:   + understand and apply the HMT related legislation, specifically:     - Work Health and Safety Regulation 2011 - Part 4.2 Hazardous Manual Tasks, Section 60 Managing risks to health and safety     - Section 61 Duties of designers, manufacturers, importers and suppliers of plant or structures   + have the practical experience, knowledge, understanding and application of HMT risk management   + have human factors and ergonomics competency (i.e. meet the competency criteria)   + have professional membership with relevant association/institute. | View   * competency framework and criteria for HMT risk management/human factors and ergonomics * Competency register * HMT training needs analysis * professional membership * recruitment procedure. |  |  |  |  |
| Is HMT (and MSD prevention) training provided to all key roles in your organisation (senior managers, engineers, site managers, WHS managers and supervisors) ensuring that the training is suitable, adequate and relevant to their role and position? Who delivers the HMT training?  What is the competency criteria?  Who receives training relevant to their role?  Examples and indicators include:   * all key roles in the organisation (senior managers, engineers, site managers, WHS managers and supervisors) receive suitable and adequate HMT (and MSD prevention) training. ensuring:  the training is relevant to the rolethe trainer has skills and knowledge about HMT risk management principals and practicetrainers meets competency criteria for HMTtraining about HMT is provided to all key roles in your organisation (senior managers, engineers, site managers, WHS managers and supervisors). | View:  * training procedures for HMT * training content * HMT/MSD competency framework/criteria * competency register * training records. |  |  |  |  |
| Do all inductions (head office and on site) include relevant information about HMT risk management? Examples and indicators include: there is consistency of induction and training HMT content and requirements across all projects and for all subcontractorsinduction includes information about HMT risk management including HMT policies and procedures highlighting the proactive leadership the organisation supports for the prevention of MSD from HMT. | View:  * induction content for HMT * induction records for head office and site. |  |  |  |  |
| Do workers on your projects receive suitable and adequate training about HMT Examples and indicators include:   * training is provided to all workers * training content is at a level relevant to their position * delivery in suitable formats for workers (e.g. simple language, non-English speaking background) * training is based on HMT regulation (WHS Regulation 2011 s60) and *Hazardous Manual Tasks Code of Practice 2011* * all contractors/subcontractors provide training that is aligned with the *Hazardous Manual Tasks Code of Practice 2011* to all their workers * the HMT training content and participation for all PC and subcontractor workers are monitored. | View:   * training procedures * training content for HMT * training records for * managers * subcontractors * workers. |  |  |  |  |

1. **P**articipative **Er**gonomics **for** **M**anual Tasks (PErforM) is a simple manual task risk management program that involves workplace based teams devising manual tasks solutions for their high risk manual tasks. [↑](#footnote-ref-1)