

Document Owner:	Principal – Health & Safety
Document Approver:	Group Manager WHS
Revision Period:	5 Year
Issue:	5.2
Last Revision Date:	26/04/2023

	WHITEHAVEN COAL FUNCTIONAL RESULTS SUMMARY								
Applicant Name:					DOB:				
Position/Role/Site: Assessment Date:									
Results/Restrictions									
GREEN Fit and healthy in relation to the physic			al deman	ds of t	heir usual ro	le			
AMBER		Has a physical condition that requires ongoing monitoring / repeat FCE in 3 months Has a stable physical condition that imposes a restriction on some aspect of their usual role							
RED		Has a physical condit prevents them from p			-	•		isk or a condition th	nat
Guidance	notes fo	or an Amber or Red Re	esult						
□ Did the worker demonstrate significant difficulties or limitations in any component of the FCE? (e.g., significantly reduced ROM, core strength, any items in the observations and special tests section) – Amber □ Was the worker unable to complete a component of the test? (e.g., Chester step test, manual handing requirements). Amber - 3-month review required □ If Amber or Red has been selected, further detail is required below. Please clearly identify what aspect of the assessment was challenging and why performance was limited (e.g., manual handling performance was limited by strength, cardiovascular fitness etc).									
Recommendations and Referrals									
Therapist	• •	xercise Physiologist o circle)	r Occupational	Name:					
			Signatu	ire:					
PHYSICAL CHARACTERISTICS & CARDIOVASCULAR BASELINE (Objective Assessment)									
AGE:		WEIGHT:	HEIGHT: Resti		Resti	ng HR:	В	вмі:	
Resting SYS	STOLIC B	C BP: Resting DIASTOLIC		C BP:					
85% HRMa	X (220-age*	.85):	70% HRMax (220-age*.70						



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GRIP STRENGTH TEST					
Left Results	1.	2.		3.	
Right Results	1.	2.		3.	
	Average (all ages)	Applicant's average		Above Avg.	Below Avg.
Male	47.3 kg	L.	R.		
Female	28.4 kg	L.	R.		
Comments and Limitations:					

OBSERVATIONS AND SPECIAL TE	ESTS (SCREENING)	
Assessment Item	Findings/ROM/Pain	Overall Comments
Shoulder and scapular Position & Observations		
Empty Can Test		
O'Brien's Test for SLAP Lesion		
Upper Limb Neural Tension Test 1		
Muscle atrophy & asymmetry		
General posture and spine curves		
Pelvic symmetry		
Neural Dynamics – SLR or Slump Test		
Full Squat – Hold 30sec at lowest range.		
5 Push ups – observe scapular, shoulder and elbow movements		



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JOINT RANGE OF MOTION - comment on movement pattern where required					
Movement	Expected Joint Range	√ or ×	Limitations/ Comments/Pain		
		Cer	vical Spine		
Flexion	45°				
Extension	45°				
Lateral flexion	45°	L. R.			
Rotation	60°	L. R.			
		Thorac	olumbar Spine		
Flexion					
Extension					
Lateral flexion (performed in	L.				
standing with feet together)	R.				
Rotation (performed in sitting	L.				
with arms across chest)	R.				
		9	Shoulder		
	160°	L.	nounc:		
Flexion		R.			
Extension	40°	L.			
Extension	70	R.			
Abduction	160°	L.	Was There Arc Pain? (Y/N)		
	□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	R.			
Horizontal Adduction	Elbow to midline	L. R.			
	HBB to	L.			
Internal rotation	L1/2	R.			
External rotation	45°	L. R.			
			Elbow		
	0.4===	L.			
Flexion	0-150°	0-150° R.	1		
		L.			
Extension	150-0°	R.	1		
	1	i	I		

Forearm			
Pronation	70°	L.	
rionation	70	R.	
Supination	70°	L.	



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		R.			
			Wrist		
Flexion	60°	L.			
		R.			
Extension	70°	L.			
		R.			
Ulnar deviation	20°	L.			
		R.	_		
Radial deviation	20°	L.			
		R.			
			Hip		
Flexion	120°	L.	_		
		R.	-		
Extension	10°	L.	-		
		R.	-		
Abduction	45°	L.	-		
		R.	-		
Internal rotation at 90°	45°	L. R.	-		
		L.	-		
External rotation at 90°	45°	R.	-		
		IX.	Knee		
		L.			
Flexion	120°		-		
		R.	_		
Extension	0-10°	L.	_		
Extension	0 10	R.			
			Ankle		
Plantar Flexion	45°	L.			
FIGILAL FICAIUII	+5	R.]		
Dorsiflexion	20°	L.			
Dorsinexion	20	R			
Additional findings, tests or comments at assessors' discretion:					



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Trunk Endurance			
Action	Target	Score	Comment
Trunk Extension Position prone with the lower body including the hips fixed to the test surface. The upper body extended to horizontal in a cantilevered fashion over the edge. Arms folded over the chest.	120 seconds		
Trunk Flexion Sit with the hips and knees bent to 90° and the feet secured. Trunk inclined at 60°. Arms folded over chest.	120 seconds		
Side Bridge	Left 45 seconds		
Position on side with legs extended. The top foot placed in front of the lower foot. Subjects lift hips off the mat to maintain a straight line over their full body length, uninvolved arm folded over chest.	Right 45 seconds		
Comments:			



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DYNAMIC TOLERANCES							
1. Sharpened Modified Romberg Test (hard surface) – Give applicant up to 3 trials (if required)							
TARGET = Maintain balance and posture for 30 seconds or greater							
Best Time Achieved:	Did t	he applicant med greater t	et the 30 seconds	s or	☐ Yes ☐ No		
Position:		Siedtei (
2. Sustained overhead rea	2. Sustained overhead reach mimicking a task (60 seconds)						
Comments:							
E.g. Fatigue signs, poor biomechanics							
FUNCTIONAL & FITNESS TE	STS						
	Cardiores	spiratory Fitnes	s - Chester Ste	p Test			
		Ste	p height (circle):	15cm 30cm			
			50%HR max:	bpm bpm	Use Step Test graph to calculate:		
			85% HR max:	bpm	calculate.		
Note: HR's that are <50%HRn	nax & >85%HRmax	cannot be used	as valid data poi	nts.	mlsO₂/kg/min		
Rating:							
Excellent Good G	od						
Step Level	l 0-2min	II 2-4min	III 4-6min	IV 6-8min	V 8-10min		
Metronome		221	100bpm	120bpm	140bpm		
Pace	60bpm	80bpm	2000				
Pace Heart rate @ stage end	60bpm	80bpm	23326				
	60bpm	SOBPM	2000				
Heart rate @ stage end RPE @ stage end	60bpm	SOBPM					
Heart rate @ stage end RPE @ stage end (6-20)	60bpm	SOBPM					
Heart rate @ stage end RPE @ stage end (6-20)	60bpm	80bpm					



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WHC-FRM-FUNCTIONAL CAPACITY EVALUATION HEAVY

Task		Able	Limited	Unable
Repeated squat				
Perform 20 full squats				
In line lunge Start in line on floor.	R.			
Stand. Finish on floor.	L.			
Kneeling Start standing lower to kneeling on both knees.	R.			
Stand again. No hands.	L.			

Manual Handling Assessment on next page



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WHC-FRM-FUNCTIONAL CAPACITY EVALUATION HEAVY

Manual handling & strength capacity tasks-ideally wearing PPE

- 1. Ask client to give you some feedback as to the key safety points for particular manual handling task.
- 2. For all lifting tasks provide brief instruction of task and ask client to attempt an unweighted trial lift using an empty box.
- 3. Provide education on safe manual handling according to the deviations displayed in practice attempt.
- 4. Then proceed to a *trial lift (ONE ONLY) of ½ the maximum load* to assess lifting technique.
- 5. If technique is deemed safe, increase gradually until required limit is reached
- 6. If technique is not deemed as safe, repeat education and demonstration before progressing
- 7. Determine client's safe lifting maximum (safest load for three repetitions).

Task	Able	Limited	Unable	Lift progression (circle maximum weight able to be lifted x 3 reps)	HR:	Signs & symptoms
Floor to Waist Lift Max weight: 30 kg				kgkgkg Prompting required: Yes Comments:		
Waist to overhead lift Max weight: 20 kg				kgkgkg Prompting required: Yes Comments:		
Unilateral Carry Carry 1 x 20 kg drums/object by side of body for 30 seconds. Each side. If necessary, assess subject with a lower carry weight and progressively increase.				kgkgkg Prompting required: Yes Comments:		
Bi-lateral carry. Carry 20kg object. Time: 30 seconds. If necessary, assess subject with a lower carry weight and progressively increase.				kgkgkg Prompting required: Yes Comments:		



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2. Other manual handling & strength capacity tasks						
Task	Able	Limited	Unable	Comments:	HR:	Signs & symptoms
Cable drag						
Drag a 20kg weight using any type of cable/rope.						
Total of 30 seconds						
Shovelling						
Shovel (using long or short handle shovel) continuously using safe and optimal technique for the relevant shovel selected.						
Work at comfortable and steady pace and change sides if necessary.						
Time: 2 minutes						
Overhead lift and hold.						
Hold 10kg object above head. Approx. 100 degree shoulder flexion						
Time: 30 seconds before returning to ground level.						
Overall evaluation of manual handling technique (tick) – Excellent Good Satisfactory Poor						