

SP/T



**CBTA**

**Manual Handling**

**SP/TRN/TM96**

**Candidate's Name:** \_\_\_\_\_

**Candidates Signature:** \_\_\_\_\_

**Assessor's Name:** \_\_\_\_\_

EXAMPLE DOCUMENT ONLY

**Assessor's Signature:** \_\_\_\_\_

**Date Completed:**  CBTA  Reassessment:



For first time candidates, the entire CBTA is to be completed. For the purposes of re-assessment only the demonstrative section requires completion.

**Written**

Question	Answer	Assessor check
What is manual handling?	Pushing, pulling, lifting and carrying. Manually moving an object	
List five manual handling tasks that may occur onsite?	Operating valves, lifting hatches, moving hoses, gas bottles, changing filters.	
To ensure maximum stability, how should you position your feet when lifting?	Feet shoulder width apart on level stable ground	
Which kind of injury is the most common when manual handling?	Musculoskeletal	
You need to move a load which is heavier on one side than the other. How should you pick it up?	Heaviest side closest to the body, straight back bending at the knees.	
Why should you avoid twisting when moving a load?	Increases the risk of back injury	
What is the optimum height for heavy objects that are being moved in and out of storage?	Waist height, you should never carry heavy objects above your shoulder height.	

**Oral**

Question	Assessor check
Using the hierarchy of controls how can you minimise the risks associated with manual handling?	Best option is a mechanical aid to remove the person or more smaller loads, rotate work
What tools are available to aid you in assessing manual handling risk?	Safety obs checklist or JHA.

**Demonstrative**

Question	Assessor check
Demonstrate how to safely lift a box from floor level onto a table	load close to body, knees bent, no twisting <i>TA</i>
Identify five manual handling aids onsite	Pallet jack, telehandler, Bottle trolley, <i>TA</i> utility crane, gantry crane.

The candidate is assessed as being:

- Competent
- Not yet competent

Areas requiring improvement:

**For first time candidates only:**

Department Manager's name: \_\_\_\_\_

Department Manager's signature: \_\_\_\_\_

Date: \_\_\_\_\_

EXAMPLE DOCUMENT ONLY

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