

General Workplace Risk Assessment Procedure (RMPG11) – APPENDIX 2B

General Workplace Risk Assessment Guidance

Complete the General Workplace Risk Assessment (Appendix 2A) for risks identified as per RMPG11 General Workplace Risk Assessment Procedure - Table 1.

Guide to Completing the Form

1. Current Position

1.1. Risk Description

- Identify the hazard (*A HAZARD is the potential of something to cause harm*).
- Identify the risk. (*A RISK is the chance that any hazard will actually cause somebody harm*).
- Identify and specify those at risk, i.e. staff members, service users, residents, visitors, contractors, members of the public and/or organisation.
- Identify the possible outcome of an incident, i.e. level of injury, loss of life, impact on service delivery, reputation.

1.2. Current Controls

- Detail what controls/procedures are already in place to help reduce the identified risk i.e. fire safety training, DSE assessments, breakaway training.

1.3. Current Risk Rating

- Assign a numeric score (1 – 5) to both the Consequence (C) and Likelihood (L) columns, using the Risk Matrix, Risk Consequence Score and Risk Likelihood Score as a guide.
- Multiply the two scores together to give the overall Risk Rating (RR). e.g. (C) **3** x (L) **2** = (RR) **6**

1.4. Risk Matrix

		Consequence				
		1	2	3	4	5
Likelihood	1	Low	Low	Low	Medium	Medium
	2	Low	Medium	Medium	Medium	High
	3	Low	Medium	Medium	High	High
	4	Medium	Medium	High	High	Extreme
	5	Medium	High	High	Extreme	Extreme

1.5. Risk Consequence Score

The potential consequence of risks can vary significantly and it is necessary to have a robust standard of scoring. Impact of risks should be assessed according to the grid below, which is adapted from "A Risk Matrix for Risk Managers" (NPSA 2008).

Domain	Consequence score (severity levels) and examples of descriptors				
	1	2	3	4	5
	Negligible (No Harm)	Minor (Low Harm)	Moderate (Moderate Harm)	Major (Severe Harm)	Catastrophic (Death / Catastrophic)
Impact on the safety of patients, staff or public (physical/psychological harm)	<p>Minimal injury requiring no / minimal intervention or treatment.</p> <p>No time off work</p> <p>Incident resulting in a bruise / graze</p> <p>Delay in routine transport for a patient</p> <p>An event which impacts on more than 1 patient / member of staff</p>	<p>Minor injury or illness, requiring minor intervention</p> <p>Requiring time off work for >3 days</p> <p>Increase in length of hospital stay by 1-3 days</p> <p>Physical attack such as pushing, shoving, or pinching, causing minor injury</p> <p>Self-harm resulting in minor injuries</p> <p>Grade 1 pressure ulcer</p> <p>Laceration, sprain, anxiety requiring occupational health counselling (no time off work required)</p> <p>An event which impacts on more than 10 patients / staff</p>	<p>Moderate injury requiring professional intervention</p> <p>Requiring time off work for 4-14 days</p> <p>Increase in length of hospital stay by 4-15 days</p> <p>RIDDOR/agency reportable incident</p> <p>Physical attack causing moderate injury</p> <p>Self-harm requiring medical attention</p> <p>Grade 2 or 3 pressure ulcer</p> <p>Healthcare -acquired infection (HCAI)</p> <p>Vehicle carrying patient involved in a road traffic accident</p> <p>Slip / trip / fall resulting in injury such as a sprain</p> <p>An event which impacts on more than 20 patients /staff</p>	<p>Major injury leading to long-term incapacity / disability</p> <p>Requiring time off work for >14 days</p> <p>Increase in length of hospital stay by >15 days</p> <p>Mismanagement of patient care with long-term effects</p> <p>Physical attack resulting in serious injury</p> <p>Grade 4 pressure ulcer</p> <p>Long term HCAI</p> <p>Slip / trip / fall resulting in injury such as dislocation / fracture / blow to the head</p> <p>Loss of a limb</p> <p>Post-traumatic stress disorder</p> <p>An event which impacts on more than 50 patients /staff</p>	<p>Incident leading to death</p> <p>Homicide committed by a mental health patient</p> <p>Multiple permanent injuries or irreversible health effects</p> <p>Rape / serious sexual assault</p> <p>Incident leading to paralysis</p> <p>Incident leading to a long term mental health problem</p> <p>An event which impacts on more than 100 patients /staff</p>
Quality/complaints/audit	Peripheral element of treatment or service suboptimal	Overall treatment or service suboptimal	Treatment or service has significantly reduced effectiveness	Non-compliance with national standards with significant risk to patients if	Totally unacceptable level or quality of treatment/service

	Informal complaint/inquiry	Formal complaint (stage 1) Local resolution Single failure to meet internal standards Minor implications for patient safety if unresolved Reduced performance rating if unresolved	Formal complaint (stage 2) complaint Local resolution (with potential to go to independent review) Repeated failure to meet internal standards Major patient safety implications if findings are not acted on	unresolved Multiple complaints/ independent review Low performance rating Critical report	Gross failure of patient safety if findings not acted on Inquest/ombudsman inquiry Gross failure to meet national standards
Human resources/ organisational development/staffing/ competence	Short-term low staffing level that temporarily reduces service quality (< 1 day)	Low staffing level that reduces the service quality	Late delivery of key objective/ service due to lack of staff Unsafe staffing level or competence (>1 day) Low staff morale Poor staff attendance for mandatory/key training	Uncertain delivery of key objective/service due to lack of staff Unsafe staffing level or competence (>5 days) Loss of key staff Very low staff morale No staff attending mandatory/ key training	Non-delivery of key objective/service due to lack of staff Ongoing unsafe staffing levels or competence Loss of several key staff No staff attending mandatory training /key training on an ongoing basis
Statutory duty/ inspections	No or minimal impact or breach of guidance/ statutory duty	Breach of statutory legislation Reduced performance rating if unresolved	Single breach in statutory duty Challenging external recommendations/ improvement notice	Enforcement action Multiple breaches in statutory duty Improvement notices Low performance rating Critical report	Multiple breaches in statutory duty Prosecution Complete systems change required Zero performance rating Severely critical report
Adverse publicity/ reputation	Rumours Potential for public concern	Local media coverage – short-term reduction in public confidence Elements of public expectation not being met	Local media coverage – long-term reduction in public confidence	National media coverage with <3 days service well below reasonable public expectation	National media coverage with >3 days service well below reasonable public expectation. MP concerned (questions in the House) Total loss of public confidence
Business objectives/	Insignificant cost increase/	<5 per cent over project	5–10 per cent over project	Non-compliance with	Incident leading >25 per cent

projects	schedule slippage	budget Schedule slippage	budget Schedule slippage	national 10–25 per cent over project budget Schedule slippage Key objectives not met	over project budget Schedule slippage Key objectives not met
Finance including claims	Small loss less than 0.1 per cent of budget Claim less than £100,000	Loss of 0.1–0.25 per cent of budget Claim(s) between £100,000 and £250,000	Loss of 0.25–1.0 per cent of budget Claim(s) between £250,000 and £1 million	Uncertain delivery of key objective/Loss of 1.0–3.0 per cent of budget Claim(s) between £1m and £3m Purchasers failing to pay on time	Non-delivery of key objective/ Loss of >3 per cent of budget Failure to meet specification/ slippage Loss of contract / payment by results Claim(s) >£3 million
Service/business interruption Environmental impact	Loss/interruption of >1 hour Minimal or no impact on the environment	Loss/interruption of more than 1 day Minor impact on environment	Loss/interruption of more than 1 week Moderate impact on environment	Loss/interruption of more than 1 month Major impact on environment	Loss/interruption of more than 3 months Catastrophic impact on environment

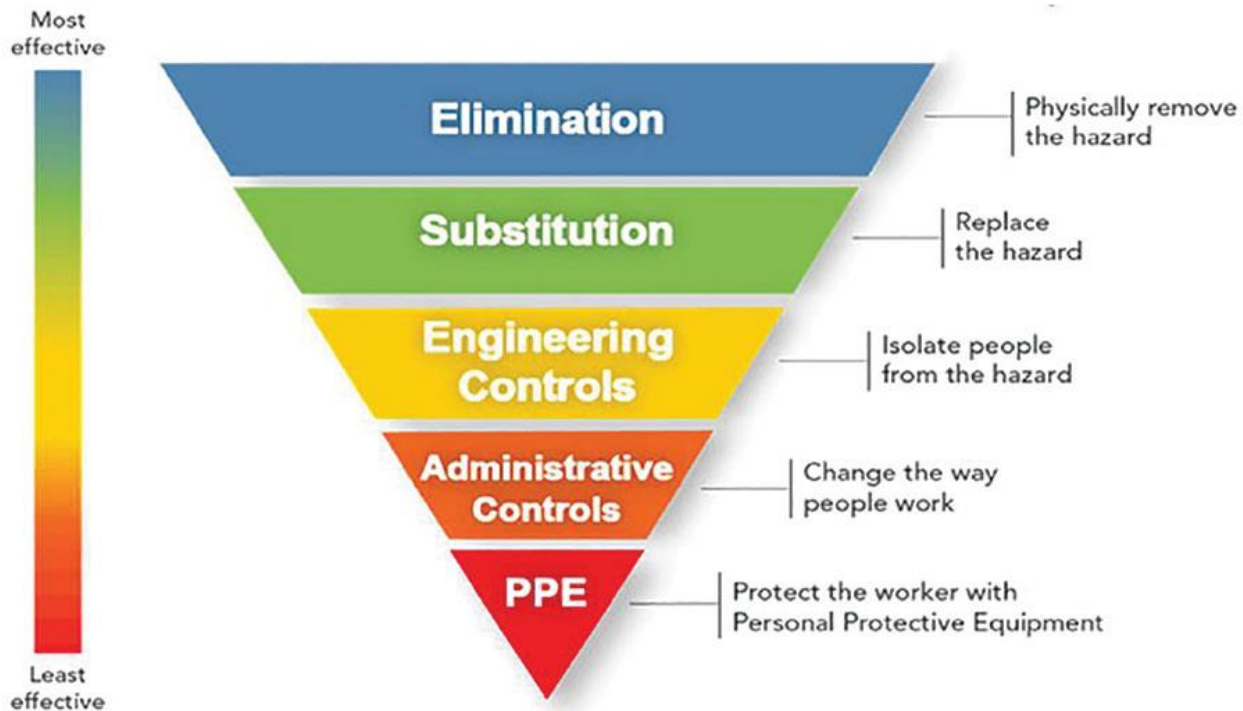
1.6. Risk Likelihood Score

Likelihood Score	Descriptor	Frequency How often might it/does it happen
1	Rare	This will probably never happen/recur
2	Unlikely	Do not expect it to happen/recur but it is possible it may do so
3	Possible	Might happen or recur occasionally
4	Likely	Will probably happen/recur, but it is not a persisting issue/circumstances
5	Almost Certain	Will undoubtedly happen/recur, possibly frequently

2. Forecast

2.1. Further Action Required

- Note additional controls/measures/processes that if introduced would mitigate/minimise the risk currently presented



2.2. Target Date for Completing Further Action/Review Date Following Further Action Implementation

- Insert date for completing actions identified in the Further Action Required section and a suitable date for reviewing the action following completion of the Further Action, i.e. Target Date 31/07/2015 – Review Date 30/07/2016 (Note: Risks should be reviewed annually as a minimum)

2.3. Responsible Person

- Insert the name of the person responsible for the identified action

2.4. Predicted Residual Risk Rating

- Taking into account the new control measures assign a numeric score to the Likelihood column as in the Current Risk Rating section. The Consequence score will be unaffected and remain the same as in the Current Risk Rating Section. Multiply the two scores together to give the Predicted Residual Risk Rating. This should result in a lower overall Risk Rating than the Current Position score. At worst, the score may remain the same; however the Residual Risk rating should not be higher than the Current Risk rating, as this would indicate your actions have increased the level of risk.

Next Steps

1. Share your completed risk assessment with your Manager / Service Director / Director for approval.
2. Upon completion and approval of the form it must be logged in the originating department and the following implemented using the scoring method as detailed in RMPG11 the General Workplace Risk Assessment Procedure.

Individual Risk Rating	Monitoring & Escalation Arrangements	Record & Review
1-6	<ul style="list-style-type: none"> Share, discuss, action and review at local team meeting 	<ul style="list-style-type: none"> Retain and update risk assessment once approved by Director. It is your responsibility to review the assessment annually as a minimum. However, in the event of any changes that affect the identified risk, the risk assessment should be reviewed and updated as required and the details added to the Review section at the bottom of the form.
6-25	<ul style="list-style-type: none"> Share, discuss, action and review at appropriate local Health and Safety Group / Governance meeting or SMT. Agree escalation to directorate risk register If risks are rated as high escalate to the Executive Director at the earliest opportunity Risks rated at 10 or above will be considered for escalation to the Corporate Risk Register or BAF by the Executive Operational Sub Committee 	<ul style="list-style-type: none"> Retain and update risk assessment once approved by Director. Forward risk assessment to [REDACTED] for inclusion on the directorate or specialist risk register Any changes causing slippage or an adjustment to the 'current risk rating' must be communicated to the Performance Team to update the Risk Register. Any risk assessment included on the risk register must be reviewed monthly as a minimum. Some risks dependent of severity will require more urgent monitoring.

3. The risk assessment must be updated, approved and communicated at the times identified in the assessment.

Action Planning

Areas for action must be detailed within the risk assessment. If there is a need for a more complex action plan this must be completed separately and the details of how & when the plan are to be monitored noted on the risk assessment form in the Further Action Required section.