

GENERAL WORKPLACE RISK ASSESSMENT PROCEDURE

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KEY CHANGES FROM PREVIOUS VERSION	Amendments to Policy references to reflect recent changes to other policies (CG29, CP75)
AUTHOR:	Head of Risk Management
CONSULTATION GROUPS:	Health Safety and Security Committee and its sub groups
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PROCEDURE SUMMARY

This procedural document sets out how to undertake a non-clinical risk assessment. It also contains ancillary guidance and reference material. This procedure supports the General Workplace Risk Assessment Policy.

The Trust monitors the implementation of and compliance with this procedure in the following ways;

The effective implementation of this Procedure will be monitored by the Risk Management Department and the Health Safety and Security Committee via regular review of Risk Assessments and Health & Safety Inspections. The effectiveness of this procedure will also be monitored through the Trust Governance systems where risk assessments are monitored, reviewed and escalated.

The Risk Management Department is responsible for reviewing this Procedure as required by, for example, any changes in practice, legislation or guidance. It will be reviewed every 3 years as a minimum. All proposed revisions will be submitted to the Health, Safety and Security Committee prior to presentation to the Trust Board.

Any changes to this Procedure will be notified to staff via Staff Briefings and will be held on the intranet for access by staff.

Services	Applicable	Comments
Trustwide	✓	

The Director responsible for monitoring and reviewing this policy is Chief Executive Officer

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CONTENTS

THIS IS AN INTERACTIVE CONTENTS PAGE, BY CLICKING ON THE TITLES BELOW YOU WILL BE TAKEN TO THE SECTION THAT YOU WANT.

1.0	INTRODUCTION.....	3
2.0	SCOPE	4
3.0	PROCEDURE FOR GENERAL WORKPLACE RISK ASSESSMENT	4

APPENDICES

- APPENDIX 1 – 5 Easy Steps to Risk Assessment
- APPENDIX 2A – General Workplace Risk Assessment Template
- APPENDIX 2B – General Workplace Risk Assessment Guidance
- APPENDIX 3 – Risk Assessment Governance Arrangements Flowchart

SAMPLE ONLY

ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST

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1.0 INTRODUCTION

- 1.1. Effective implementation of these procedures will ensure that the Trust meets statutory requirements under the Management of Health & Safety at Work regulations 1999 (MHSWR) and the Health and Safety at Work etc. Act 1974 (HASWA).
- 1.2. This Procedure (and associated Policy) sets out how the Trust will identify, assess and manage all non-clinical risks including health and safety risks in line with the Trust's Risk Management and Assurance Framework and relevant legislation. Risks may arise from any activities undertaken by, or for, the Trust. This will include the premises and equipment used, the services provided, processes operated, waste handling, and storage.
- 1.3. In order to ensure compliance with Regulation 3 of the Management of Health and Safety at Work Regulations 1999 (MHSWR), the Trust will undertake suitable and sufficient assessments of the risks posed to employees and to those who are not employed by the Trust but who may be affected by the Trust's undertaking (i.e. those affected by the Trust's work activities or omissions). This will include patients, residents, clients, visitors, staff, contractors and neighbours. Particular account will be taken of the risks to the health of new and expectant mothers, and to any young person at work.
- 1.4. Although "suitable" and "sufficient" are not defined in the MHSWR, guidance indicates that in practice a risk assessment should:
 - Identify the risks arising from or in connection with the work;
 - Include / take account of risks the Trust is expected to know about, or could be ascertained by the Trust taking reasonable steps to find out; and
 - Be appropriate to the nature of work and identify the period of time for which the assessment is likely to remain valid.
- 1.5. Implementation of this Procedure will ensure that risk assessments carried out comply with the above and will be capable of allowing the Trust to identify the measures it needs to take to comply with the requirements placed on it by relevant health and safety legislation.
- 1.6. It is also essential to ensure that risk assessments are reviewed if, for any reasons, it is considered that they might no longer be valid (e.g. following an incident) or if there is any significant change in the matters to which the assessment relates. This Procedure outlines the process of review.
- 1.7. It should be noted that the risk assessments covered by this Procedure (and associated Policy) are in addition to the Health and Safety Inspections that managers are required to complete, alongside the Risk Management Team. The process for completion of the Health and Safety Inspections are detailed in the Corporate Health and Safety Policy (RM01).

- 1.8. The following are definitions for terminology used throughout this Procedure and associated Policy:
- 1.8.1. **HAZARD** – the potential of a substance, article, condition, or being to cause harm.
- 1.8.2. **RISK** – a combined estimate of the likelihood of harm being caused by a hazard and the severity of the harm caused.
- 1.8.3. **HEALTH & SAFETY RISK ASSESSMENT** – a sequence of actions to:
- identify hazards and the people affected;
 - estimate the likelihood and degree of harm (the Risk);
 - identify and implement necessary action to control the Risk; and
 - review and monitor the Risk including the impact of implementation of any control measures.
- 1.8.4. **NEW OR EXPECTANT MOTHER** - a female worker who is pregnant, who has given birth within the previous six months, or who is breastfeeding.
- 1.8.5. **YOUNG PERSON** - a person below the age of 18.
- 1.8.6. **SUITABLE** assessments - those which identify all significant risks (not “trivial” risks) and prioritise the measures required to comply with relevant statutory requirements and guidance. They must be appropriate to the nature of work being undertaken over a 12 month period.
- 1.8.7. **SUFFICIENT** assessments - those which identify the preventative and protective Control Measures to eliminate or reduce risks.
- 1.8.8. **CONTROL OF RISK** – any action or measure taken to reduce risk. This may include actions taken to eliminate the risk or reduce/mitigate the Risk. Controls can impact upon likelihood, severity of harm or both. The intention should be to introduce control measures to mitigate risks to the lowest level of risk rating acceptable to the Trust.

2.0 SCOPE

This procedure applies to all Essex Partnership University NHS Foundation Trust (EPUT) services. An outline of the responsibilities of staff in implementing this procedure is included at Section 2 of the associated Policy.

3.0 PROCEDURE FOR GENERAL WORKPLACE RISK ASSESSMENT

3.1. Risk Assessments to be undertaken

Specific mandatory risk assessments must be carried out to address specific risks, as set out in Table 1 below. Managers will be responsible for ensuring that mandatory risk assessments as listed in Table 1 below are undertaken within the appropriate timescale by a member of staff who is competent at undertaking risk assessments. It is not a mandatory requirement that staff have undertaken Risk Assessment Training prior to conducting a risk

assessment; however, they should have the appropriate knowledge of the risk being assessed and utilise the agreed Trust templates. The ability to perform a competent assessment of non-clinical risks is dependent upon knowledge and understanding of the work involved, the Principles of Risk Assessment as outlined in Section 3.2.1 and the current health and safety practices which are relevant to the Risk Assessment being undertaken. A Risk Assessment Training module is available for all staff to access should they wish.

Table 1:

Mandatory Risk Assessments	Further Reference	Form	By Who	Frequency
General Workplace Risk Assessment		RMPG11 Appendix 2A - General Workplace Risk Assessment	Ward/Nursing Home team Staff	As required, reviewed annually or when situation changes
Fire Risk Assessment	Fire Safety Policy (RM02)	Fire Risk Assessment Form	Fire Safety Manager / Fire Safety Advisors	In-patient Wards – 12 Monthly Outpatient areas – 18 monthly Staff bases – 24 monthly
First Aids Needs (Risk) Assessment	First Aid Policy (RM08)	RMPG08 Appendix 1 – First Aid Needs Assessment Or include with General Workplace Risk Assessment on RMPG11 Appendix 2A – General Workplace Risk Assessment	Ward Manager/Nursing Home Manager	As required, reviewed annually or when situation changes
Health and Safety Inspection	Corporate Health and Safety Policy (RM01)	RM01 Appendix 2 - Health, Safety and Security Workplace Inspection Form	Risk Management in conjunction with manager/s	In-patient Wards – 12 Monthly Outpatient areas – 18 monthly Staff bases – 24 monthly
Monthly local fire, safety and health and safety checklist	Fire Safety Policy (RM02)	RMPG02 – Appendix 6 – Monthly local fire safety and health and safety checklist	Ward/Nursing Home team Staff	Monthly
Ligature Audit	Ligature Risk Assessment and Management Policy (CP75)	Ligature Audit Tool (refer to CP75)	Risk Management, Estates and Ward Manager/Nursing Home Manager	Medium and Low Secure Services – 6 monthly 6 monthly Acute Admission Wards – 6 monthly

RMPG11 – General Workplace Risk Assessment Procedure

				PICU – 6 monthly Assessment Units – 6 monthly Young Person Units – 6 Monthly Functional Older People Wards – 12 Monthly Learning Disability In-patient Services – 12 Monthly Rehabilitation Wards – 12 Monthly
Young Persons Risk Assessment	Health and Safety of Young Persons Policy (RM15)	RMPG15 Appendix 1 checklist alongside RMPG11 Appendix 2A - General Workplace Risk Assessment	Ward/Nursing Home team Staff	As required, reviewed annually or when situation changes
Display Screen Equipment Self-Assessment	Display Screen Equipment Policy (RM07)	RMPG07 Appendix 3 – Display Screen Equipment SA Form	Ward/Nursing Home team Staff	As required, reviewed annually or when situation changes
Pregnancy Risk Assessment	Maternity, Adoption Paternity and Parental Leave / Shared Parental Leave Procedure (HRPG24B)	RMPG11 Appendix 2A - General Workplace Risk Assessment	Ward/Nursing Home team Staff	Every month until commencement of Maternity Leave
Violence and Aggression Risk Assessment	Restrictive Practice Policy (RM05)	RMPG11 Appendix 2A - General Workplace Risk Assessment	Ward/Nursing Home team Staff	As required, reviewed annually or when situation changes
Lone Worker Risk Assessment	Lone Worker Policy (RM17)	RMPG11 Appendix 2A - General Workplace Risk Assessment	Ward/Nursing Home team Staff	
Manual Handling Risk Assessment	Moving and Handling Policy (RM03)	RMPG03 Appendix 4 – Moving and Handling Risk Assessment Form for Patients	Ward/Nursing Home team Staff (with advice from manual handling advisor)	As required, reviewed annually or when situation changes

		RMPG03 Appendix 5 – Manual Handling Risk Assessment Form (Loads)		
COSHH Risk Assessment	COSHH Policy (RM04)	RMPG04 Appendix 1 – Risk Assessment Template	Ward/Nursing Home team Staff	As required, reviewed annually or when situation changes

3.1.1. All Risk Assessments in the Table 1 (or specific guidance for completion) are included in the relevant Trust Policies cross-referenced in table 1.

3.1.2. Guidance on and an example of a General Workplace Risk Assessment is available on the risk management section of the intranet.

3.1.3. Managers will also be responsible for ensuring that *ad hoc* proactive (e.g. in response to a forthcoming proposed change in work equipment) and reactive (e.g. in response to an incident) are undertaken within their area by a competent member of staff, and reviewed on a regular basis. These must be undertaken in accordance with the processes outlined at Section 3.2 below.

3.2. Process for undertaking a risk assessment

3.2.1. Principles of Risk Assessment

The Principles of Risk Assessment will be used in all circumstances where an assessment of risk is required or applied. These Principles (outlined in the Management of Health and Safety at Work Regulations 1999, Schedule 1) are:

- Avoiding risks.
- Evaluating the risks which cannot be avoided.
- Combating the risks at source.
- Adapting the work to the individual, especially as regards the design of workplaces, the choice of work equipment and the choice of working and production methods, with a view, in particular, to alleviating monotonous work and work at a predetermined work-rate and to
- Reducing their effect on health.
- Adapting to technical progress.
- Replacing the dangerous by the non-dangerous or the less dangerous.
- Developing a coherent overall prevention policy which covers technology, organisation of work, working conditions, social relationships and the influence of factors relating to the working environment.
- Giving collective protective measures priority over individual protective measures.
- Giving appropriate instructions to employees.

3.2.2. Identifying the need for a Risk Assessment

The need for a Risk Assessment will depend on the nature of the environment. The need for a Risk Assessment may be identified through staff awareness of local hazards and reporting trends, as well as a management-driven process of:

- Local discussion;
- Systematic risk identification;
- Analysing the pattern of adverse events, such as incidents or complaints;
- Acting on external information such as Patient Safety Alerts; and
- Review of objectives.

3.3. Who can conduct Risk Assessments?

3.3.1. Staff within the Trust will carry out Risk Assessments. All staff can complete a risk assessment appropriate to their level and area of expertise. As detailed above, it is not a mandatory requirement that staff have undertaken Risk Assessment Training prior to conducting a risk assessment. However they should have the appropriate knowledge of the risk being assessed and utilise the agreed Trust templates as outlined in Table 1. The ability to perform a competent assessment of non-clinical risks is dependent upon knowledge and understanding of the work involved, the Principles of Risk Assessment as outlined in Section 3.2.1 and current health and safety practices which are relevant to the Risk Assessment being undertaken. A Risk Assessment Training module is available for all staff to access should they wish.

3.3.2. Where necessary, staff will be given:

- Training to improve their knowledge of the Risk Assessment procedure.
- Any additional detailed knowledge regarding how to assess risks within their specific working environment.

3.4. Undertaking the Risk Assessment

3.4.1. In carrying out the assessment, the assessor should follow the 5 easy steps to risk assessment - Appendix 1.

3.4.2. The results of the assessment will be recorded on the General Workplace Risk Assessment Forms - Appendix 2A.

3.4.3. Areas for action must be detailed within the risk assessment. If there is a need for a more complex action plan this must be detailed on the assessment form and how / when the plan will be monitored.

3.4.4. In practice the assessor and manager may work together to complete the form and identify actions to be taken to control the risk. The form must be agreed by the manager and approved by the Director of service.

3.5. Scoring the Risk

The Risk should be scored using the following Risk Matrix (also included on the General Workplace Risk Assessment Form Guidance - Appendix 2B). This requires the assessor to score both the likelihood of the risk occurring and the severity of harm (consequence) which would be caused by the risk with a score of 1 – 5, with one being the lowest likelihood / harm and five being the highest likelihood / harm. The total score is reached by multiplying the likelihood score by the severity of harm score. Further definitions and guidance on the scoring system is included in the Trust Risk Management Framework.

3.5.1. Risk Assessments utilise a traffic-light system to represent the degree of risk as follow:

		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

RED	EXTREME	FOR RISKS RATED 20-25
AMBER	HIGH	FOR RISKS RATED 10-16
YELLOW	MEDIUM	FOR RISKS RATED 4-9
GREEN	LOW	FOR RISKS RATED 1-3

3.6. Action to be taken on completion of Risk Assessment (Monitoring and Escalation Arrangements)

Upon completion and approval of the form, it must be logged in the originating department. Every department must have a system for ensuring all Risk Assessments are logged within the department and that appropriate reviews are undertaken at the right time. This system should ideally be electronic but can be paper-based if necessary. The following action must also be implemented depending on the scoring in 3.5.1:

Risk Rating	Monitoring & Escalation	Record
1-6	<ul style="list-style-type: none"> Share, discuss, action and review at local team meeting 	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.

<p>6-25</p>	<ul style="list-style-type: none"> • Share, discuss, action and review at appropriate • local Quality and Safety Group / Governance meeting or SMT. • Agree escalation to directorate risk register • If risks are rated as high, escalate to the Service's Executive Director at the earliest opportunity • Risks rated at 10 or above will be considered for escalation to the Corporate Risk Register or Board Assurance Framework by the Executive Sub Operational Committee 	<p>Retain and update risk assessment once approved by Director. Forward risk assessment to [REDACTED] for inclusion on the directorate or specialist risk register</p> <p>Any changes causing slippage or an adjustment to the 'current risk rating' must be communicated to the Performance Team to update the Risk Register.</p> <p>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.</p>
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3.7. Review of Risk Assessment

- 3.7.1. It is the responsibility of the Risk Assessor, in conjunction with their manager, to review the assessment regularly and keep it up to date. The risk assessment must be updated, approved and communicated at the times identified in the assessment.
- 3.7.2. Any risk assessment included on the risk register must be reviewed monthly as a minimum.
- 3.7.3. Some risks dependent of severity will require more urgent monitoring which will be agreed by the Service Director / Executive Director.
- 3.7.4. Any changes causing slippage or an adjustment to the 'current risk rating' must be communicated to the Risk Management Team to update the Risk Register.
- 3.7.5. Appendix 3 illustrates in diagrammatic form a governance flow chart for the risk assessment process outlined above.

END