

### Risk Assessment Form

Use this form for any detailed risk assessment unless a specific form is provided. Refer to your Summary of Hazards/Risks and complete forms as required, including those that are adequately controlled but could be serious in the absence of active management. The Action Plan and reply section is to help you pursue those requiring action.

<b>Name of Assessor:</b>		<b>Post Held:</b>	
<b>Department:</b>		<b>Date:</b>	

**Subject of Assessment:** E.g.: hazard, task, equipment, location, people

The placement of personal protective equipment (PPE) – specifically disposable gloves; disposable aprons; masks/visors/face protection and the holders to contain PPE, within Mental Health ward areas, patients' side rooms / bed areas area.

**Hazards** (Describe the harmful agent(s) and the adverse consequences they could cause)

Risk of disposable gloves, disposable aprons, masks/visors/face protection being used as a ligature, ingested, set on fire or used to block drains / sinks, causing self harm to patients or injury to others.  
 Risk of container/dispenser for disposable gloves and disposable aprons being used as a ligature point or weapon causing self harm to patients or injury to others.

**Description of Risk**  
 Describe the work that causes exposure to the hazard, and the relevant circumstances. Who is at risk? Highlight significant factors: what makes the risk more or less serious – e.g.: the time taken, how often the work is done, who does it, the work environment, anything else relevant.

Inpatient staff utilise Personal Protective Equipment (PPE) in accordance with the National IPC Manual in order to minimise the risk of Healthcare Acquired Infections.

NB in wards where PPE stations can be safely accommodated there is no need to remove these.

Due to the nature of the person's Mental Health illness or cognitive impairment, placement of personal protective equipment (PPE) – specifically disposable gloves, disposable aprons, masks/visors/face protection in the general ward area, patient's side room / bed area will cause the risk of self harm by patients, or injury to others.

Placing PPE holders and items of PPE in designated locked areas within the ward will reduce the risk to patients and others. This includes gloves, aprons, face visors and face masks.

**Existing Precautions**

**Summarise current controls In place**

- PPE holders, and items of PPE will only be placed within locked treatment rooms and other locked designated areas with the ward.
- Staff will bring PPE, as required, to each patient's side room/ bed area or toilet and dispose of as clinical waste when finished.
- Staff will use PPE correctly with regular hand washing before donning and following removal of PPE.
  - During an outbreak or where a single patient is nursed with transmission based precaution in place, ward staff in conjunction with the Infection Prevention & Control Team will identify a designated area where a PPE station can be located making PPE available to ward staff.
- All new members of staff must be informed of the correct use and disposal of PPE during induction.
- Staff member must report via the Incident Reporting system any adverse incidents / near misses, issues or concerns verbally and complete a Datix Form.
- Line Manager must be informed of any issues.

**Not following the control measures listed within this Risk Assessment might fail to prevent adverse outcomes.**

**Level of Risk** - Is the control of this risk adequate?

Give more than one risk level if the assessment covers a range of circumstances. You can use the 'matrix' to show how 'likelihood' and 'consequences' combine to give a conclusion. Also, be critical of existing measures: if you can think how they might fail, or how they could be improved, these are indications of a red or orange risk.

**Risk Matrix**

<u>Likelihood</u>	<u>Impact/Consequences</u>				
	Negligible	Minor	Moderate	Major	Extreme
Almost Certain	Medium	High	High	V High	V High
Likely	Medium	Medium	High	High	V High
Possible	Low	Medium	Medium	High	High
Unlikely	Low	Medium	Medium	Medium	High
Rare	Low	Low	Low	Medium	Medium

Very High      High      Medium      Low

**Current risk level**

Given the current precautions, and how effective and reliable they are, what is the current level of risk? **Green** is the target – you have thought it through critically and you have no serious worries. Devise ways of making the risk green wherever you can. **Yellow** is acceptable but with some reservations. You can achieve these levels by reducing the inherent risk and or by effective and reliable precautions.

**High (Orange) or Very High (Red) risks are unacceptable and must be acted on: use the Action Plan section to summarise and communicate the problems and actions required.**

**Action Plan** (if risk level is High **(Orange)** or Very High **(Red)**)

Use this part of the form for risks that require action. Use it to communicate, with your Line Manager or Risk Coordinator or others if required. If using a copy of this form to notify others, they should reply on the form and return to you. Check that you do receive replies.

Describe the measures required to make the work safe. Include hardware – engineering controls, and procedures. Say what you intend to change. If proposed actions are out with your remit, identify them on the plan below but do not say who or by when; leave this to the manager with the authority to decide this and allocate the resources required.

<b>Proposed actions to control the problem</b> List the actions required. If action by others is required, you must send them a copy	<b>By Whom</b>	<b>Start date</b>	<b>Action due date</b>
None required			

**Action by Others Required - Complete as appropriate: (please tick or enter YES, name and date where appropriate)**

Report up management chain for action	
Report to Estates for action	
Contact advisers/specialists	
Alert your staff to problem, new working practice, interim solutions, etc	

**Reply**

If you receive this form as a manager from someone in your department, you must decide how the risk is to be managed. Update the action plan and reply with a copy to others who need to know. If appropriate, you should note additions to the Directorate / Service Risk Register.

If you receive this as an adviser or other specialist, reply to the sender and investigate further as required.

Assessment completed -  
date:

Review date: