

# **Health and Safety Risk Assessment Procedure**

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# 1 Purpose

- 1.1. South East Coast Ambulance Service NHS Foundation Trust (the Trust) has a statutory duty under The Management of Health and Safety at Work Regulations 1999 to make a suitable and sufficient assessment of the risks to the health and safety of his employees to which they are exposed whilst they are at work; and the risks to the health and safety of persons not in their employment arising out of or in connection with the conduct by them of their undertaking.
- 1.2. The Trust must record significant finding from risk assessment and shall provide their employees with comprehensible and relevant information on the risks to their health and safety identified by the assessment and the preventive and protective measures.
- 1.3. It is the responsibility of the Trust to ensure that those conducting risk assessments have the relevant knowledge, experience, and skills to do so.
- 1.4. This procedure is applicable to all Trust staff.
- 1.5. This procedure sets out the process for carrying out and communicating risks and controls and is not intended or considered to be a learning platform for carry out risk assessments.

#### 2 Definitions

Term	Definition
Hazard	A hazard is a potential source of harm or adverse health effect on a person.
Risk	The likelihood that a person may be harmed or suffer adverse health effects if exposed to a hazard.  The extent of the risk will depend on:
	<ul> <li>The likelihood of that harm occurring</li> <li>The potential severity of that harm.</li> </ul>
Consequence	The potential consequence (or severity) of the risk being realised.
Likelihood	How often the risk event might happen.

Risk Rating	The risk rating is derived from the 'risk score' for consequence x 'risk score' for likelihood (see appendix 1 – Risk Assessment Form)
Risk Reduction	The process by which the risk is managed to reduce the consequence and/or likelihood of the occurrence of the event
Risk Assessment	Is a systematic evaluation of a work task or facility to identify hazards and evaluate their likelihood to cause harm in all foreseeable situations.
Generic Risk Assessment	Assessment of common hazards and risks involved in work tasks and activities, however, must not be used as a substitute for a task specific risk assessment.
Control Measures	Mitigations in place to reduce risk
Significant Risk	Risks which are significant are those that are not trivial in nature and can create a real risk to health and safety which any reasonable person would appreciate and would take steps to guard against.

#### 3 Procedure:

- 3.1. Managers need to follow a step-by-step process for controlling health and safety risks caused by hazards in the workplace.
- 3.2. **Step 1 Identify the hazards** Look around your workplace and think about what may cause harm (these are called hazards). Think about, how people work and how plant and equipment are used, what chemicals and substances are used, what safe or unsafe work practices exist, the general state of your premises. Look back at your accident and ill health records as these can help you identify less obvious hazards. Take account of nonroutine operations, such as maintenance, cleaning, or changes in production cycles. Think about hazards to health, such as manual handling, use of chemicals and causes of work-related stress. For each hazard, think about how employees, contractors, visitors, or members of the public might be harmed.

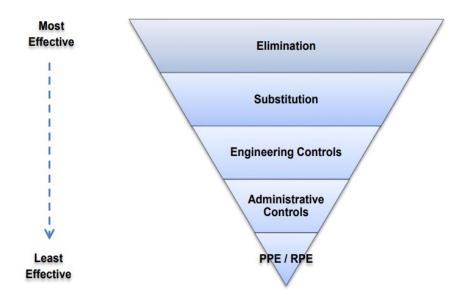
- 3.3. Appendix B Common Health and Safety Hazard Categories provides further information to support identification of common workplace hazards.
- 3.4. **Step 2 Assess the risks** Once you have identified the hazards, decide how likely it is that someone could be harmed and how serious it could be. This is assessing the level of risk.
- 3.5. **Step 3 Control the risks -** Look at what you're already doing, and the controls you already have in place. Ask yourself:
  - Can I get rid of the hazard altogether?
  - If not, how can I control the risks so that harm is unlikely?

If you need further controls, consider:

- Redesigning the job
- Replacing the materials, machinery, or process
- Organising your work to reduce exposure to the materials, machinery, or process.
- Identifying and implementing practical measures needed to work safely.
- Providing personal protective equipment and making sure workers wear it.

Fig 1: Hierarchy of Controls

The hierarchy of controls is a way of determining which actions will best control exposures. The hierarchy of controls has five levels of actions to reduce or remove hazards. The preferred order of action based on general effectiveness is: Elimination Substitution Engineering controls Administrative controls Personal protective equipment (PPE)



- 3.6. **Step 4 Record your findings** Recording of risk assessments should be completed using the Appendix A (Trust Health and Safety Risk Assessment template).
  - The hazards (things that may cause harm).
  - Who might be harmed and how.
  - What you are doing to control the risks.

#### 3.7. Exceptions to 3.6 above include:

- Display Screen Equipment (DSE) refer to DSE policy.
- Externally completed technical risk assessments for areas such as water management and fire.
- Control of substances Hazardous to Health (COSHH) refer to <u>COSHH policy</u>.
- 3.8. **Step 5 Review of risk assessments -** You must review the controls you have put in place to make sure they are working effectively.
- 3.9. Risk assessments should be reviewed as follows:
  - Following an accident
  - Following a near miss
  - Where staff concerns are raised
  - Changes in work process
  - Annually

#### 4 Vulnerable workers risk assessments

- 4.1. **New and Expectant Mothers** -You must, by law, assess the risks to women of childbearing age as part of your general workplace risk assessment. You must also carry out an individual risk assessment, that covers your worker's specific needs, when they have informed you in writing that they:
  - Are pregnant.
  - Are breastfeeding, or
  - Have given birth in the last 6 months.
- 4.2. **Lone Workers** Under the Management of Health and Safety at Work Regulations, you must manage the risk to lone workers. Risk assessments must be completed for all lone workers.
- 4.3. **Home Workers** You must make sure your risk assessment covers home workers. It is important to keep a balanced and proportionate approach for home workers. In most cases you do not need to visit them to ensure their health and safety, but you should make sure they have a healthy and safe environment to work in and risk assessment is a key tool in achieving this.

In the majority of cases, it would be sufficient for the risk assessment to carried out with input from the home worker on potential hazards.

- 4.4. **Young People at Work** For many young people the workplace will be a new environment, and they will be unfamiliar with 'obvious' risks and the behaviour expected of them. They may lack experience or maturity. Make sure they understand what is expected of them, check they understand and can remember and follow instructions.
  - They may not have reached physical maturity and be more at risk if their muscle strength is not fully developed. They may be less skilled in handling techniques or in pacing work according to their ability.
  - When assessing a young person's physical capability, you could simply ask yourself if a still developing young person could lift the weights older, more experienced workers can.
  - Young people may be unaware of how to raise concerns, so make sure this is part of their training.
  - They may be eager to impress or please people they work with, so you should supervise them effectively and make sure they understand any training and instruction.
- 4.5. If you employ a young person already, or have done recently, your existing arrangements for assessment and management of the risks for new young people should be enough. This is providing that the new starter is of a similar level of maturity and understanding, and has no needs, such as a disability.
- 4.6. Disabled workers Risk assessments help employers manage risks caused through work activity and your workplace risk assessment should be regularly reviewed. There is no legal requirement to carry out a separate risk assessment specific to a disabled person. But, if you become aware of a worker or others (for example a visitor) with a disability, you should review your existing risk assessment to make sure it covers any risk to them.

# 5 Timing of risk assessment

5.1. Risk assessments must be completed, and control measures established prior to any risk exposure.

#### 6 Communication of risk and controls

- 6.1. The communication of risk and control measures to be applied has equal importance to completing the risk assessment.
- 6.2. As highlighted in section 1.2 of this procedure is the need provide our employees with <u>comprehensible and relevant</u> information on the risks to their health and safety. It is unlikely that merely making available a risk assessment achieves this, or all the information contained within will be relevant or applicable to the target audience.

- 6.3. The following are some of the more effective platforms for communicating risks to staff and the measures they should adopt to keep safe:
  - Training in person
  - Training E Learning
  - Cascade training.
  - Safe systems of work
  - Safety huddles
  - Bulletins
  - Process aide memoire.
- 6.4. When developing communication methods consider how you will obtain assurance that the target audience fully understands the risk and controls.
- 6.5. There is a requirement to be able to evidence that risk and controls have been communicated with staff along with any required training identified from risk assessments. Formal training should be recorded on the NHS Electronic Staff Record.

## 7 Retention and holding of risk assessments.

- 7.1. Retention type: Legal requirement
  - Retention period: 10 yearsTrigger point: Date of event.
  - Derivation: NHS England
  - Final action: Review, action destroy.
- 7.2. Requirements of risk assessment are taken from NHS England Records Retention and Disposal Schedule.
- 7.3. Approved Trust wide risk assessments that do not require local amendment will be hosted on the zone and the library of these risk assessments will be managed by the Health and Safety Risk Assessment Group (HSRAG).
- 7.4. Local and site-specific risk assessments will be held in the sites health and safety folder.
- 7.5. Risk assessments that pertain to individual persons will be held securely in personnel file. Examples being new and expectant mother, stress, display screen, lone and home working.

#### 8 Suitable and sufficient risk assessments

8.1. A suitable and sufficient risk assessment "should identify the risks arising from or in connection with work. The level of detail in a risk assessment should be proportionate to the risk. The level of risk arising from the work activity should determine the degree of sophistication of the risk assessment."

## 9 Competent and capable risk assessor

9.1. Whilst the Health and Safety Executive (HSE) currently state that specific training or qualifications are not essential to carry out a risk assessment. However, anyone carrying out risk assessments in the Trust should have sufficient knowledge of the potential hazards in their respective areas of work and have training in the development of risk assessments and their subsequent communication to others that could be affected.

## 10 The Health and Safety Risk Assessment Subgroup

10.1. The Health and Safety Risk Assessment Subgroup Is a subordinate group of the Health and Safety Working Group (HSWG) and develops, approves, and reviews Trust wide risk assessments.

## 11 Responsibilities

- 11.1. Chief Executive Officer On behalf of the Board of Directors has overall legal responsibility and accountability for the compliance of the Trust with all aspects of Health and Safety Legislation and Regulations. This ultimate accountability cannot be delegated to any other individual within or external to the Trust.
- 11.2. **Executive Director of Quality and Nursing -** The Chief Executive Officer delegates responsibility for the co-ordination of Health and Safety matters to the Executive Director of Quality and Nursing
- 11.3. **Executive Directors** Are responsible for ensuring that the requirements of the Trust's Health and Safety Policy and associated policies and procedures are effectively implemented, and standards maintained in their areas of responsibility.
- 11.4. **Deputy Directors and Associate Directors -** Must ensure that Health and Safety of their staff, patients, visitors, and contractors is managed in accordance with the Trust Health and Safety policies and procedures.
- 11.5. **The Head of Health, Safety & Security** is responsible for the coordination of Health and Safety daily across the Trust and will make provision of suitable and sufficient risk assessment training for all managers

involved in the development and communication of risk assessments. The training needs will be assessed by a Training Needs Analysis (TNA) and ratified by the Educational Development Training Group (EDTG)

- 11.6. The Health and Safety Team Is responsible for supporting managers with the completion of risk assessments and where required provide risk assessment training. Additionally, the Health and Safety Team will annually audit the effectiveness of Trust risk assessments, as part of their annual audit plan.
- 11.7. **Managers** Are responsible for the completion of suitable and sufficient risk assessments for hazards in their department areas and for the effective communication of risk and controls measures to staff and others that could be affected
- 11.8. **All staff** Are required to follow the control measure identified from risk assessments to keep themselves safe. To cooperate with the Trust by undergoing training, wearing protective clothing and by following health and safety policies and procedures.

# 12 Education and Training

- 12.1. Managers completing risk assessments must be provided training in the completion of health and safety risk assessments.
- 12.2. Records of training must be recorded on the Employee staff record.

# 13 Audit and Review (evaluating effectiveness)

- 13.1. These procedures will have their effectiveness audited by the responsible Management Group at regular intervals, and initially six months after a new policy is approved and disseminated.
- 13.2. Effectiveness will be reviewed using the tools set out in the Trust's Policy and Procedure for the Development and Management of Trust Policies and Procedures (also known as the Policy on Policies).
- 13.3. This document will be reviewed in its entirety every three years or sooner if new legislation, codes of practice or national standards are introduced, or if feedback from employees indicates that the policy is not working effectively.
- 13.4. All changes made to this procedure will go through the governance route for development and approval as set out in the Policy on Policies.
- 13.5. Trust risk assessments will be sampled annually at all Trust sites as part of the health and safety audit plan and sample will aim to determine if risk assessments are suitable and sufficient.

#### 14 References

- Health and Safety at Work Act 1974
- Management of Health and Safety at Work Regulations 1999
- Workplace (Health, Safety and Welfare) Regulations 1992
- The Health and Safety (Display Screen Equipment) Regulations 1992
- The Manual Handling Operations Regulations 1992 amended 2002.
- The Regulatory Reform (Fire Safety) Order 2005
- The Work at Height Regulations 2005
- The Personal Protective Equipment at Work Regulations 1992
- COSHH (Control of Substances Hazardous to Health) 2002
- The Provision and Use of Work Equipment Regulations 1998 (PUWER)

#### 15 Financial checkpoint

15.1. This document has been confirmed by Finance to have financial implications and the relevant Trust processes have been followed to ensure adequate funds are available.

# 16 Equality Analysis

The Trust believes in fairness and equality, and values diversity in its role as both a provider of services and as an employer. The Trust aims to provide accessible services that respect the needs of each individual and exclude no-one. It is committed to comply with the Human Rights Act and to meeting the Equality Act 2010, which identifies the following nine protected characteristics: Age, Disability, Race, Religion and Belief, Gender Reassignment, Sexual Orientation, Sex, Marriage and Civil Partnership and Pregnancy and Maternity.

Compliance with the Public Sector Equality Duty: If a contractor carries out functions of a public nature then for the duration of the contract, the contractor or supplier would itself be considered a public authority and have the duty to comply with the equalities duties when carrying out those functions.

# **Appendix A – General Risk Assessment Form**

Location of	by and role:	esed:			Genera	ıl Risk /	Assessme	ent Form Initial assessment of	date:			
		STEP 1			STEP	2		STEP 3		9	STEP	4
REF NO	ACTIVITY		HAZARD		PERSON AFFECTEI HOW	DÀŃD	CURRENT	CONTROL MEASU	RES		K RAT	
Data	1st Davison d	-4-	and Davison data	Ord Day	.:	4th Davida	1-4-	Eth Daview dete	Cth D		-1-4-	
Date	1 <sup>st</sup> Review da	ate 2	2 <sup>nd</sup> Review date	3 <sup>rd</sup> Rev	view date	4 <sup>th</sup> Revie	ew date	5 <sup>th</sup> Review date	6"' K	eview	date	
Signature	Signature	5	Signature	Signat	ure	Signatur	е	Signature	Sign	ature		

<sup>1. &</sup>lt;u>Risk scoring:</u> The risk score will be based upon the consequence of a risk and the likelihood of it being realised. The Trust uses the risk scoring methodology and matrix previously published by the National Patient Safety Agency.

2. <u>Scoring the Consequence:</u> Consequence must be scored using the Table of Consequences as a guide:

		Consequence Score and Descriptor				
	1	2	3	4	5	
Domain:	Negligible	Minor	Moderate	Major	Catastrophic	
Injury or harm Physical or Psychological	Minimal injury requiring no / minimal intervention or treatment No Time off work required	Minor injury or illness requiring intervention.  Requiring time off work < 4 days  Increase in length of care by 1-3	Moderate injury requiring intervention.  Requiring time off work of 4-14 days  Increase in length of care by 4-14 days.  RIDDOR / agency reportable incident	Major injury leading to long- term incapacity/disability. Requiring time off work for >14 days	Incident leading to fatality. Multiple permanent injuries or irreversibl health effects	

3. Scoring the Likelihood: Likelihood must be scored using the Table of Likelihood as a guide:

Score	Likelihood Descriptor	Likelihood frequency	Likelihood probability
1	Rare	Not expected to occur in years	May only occur in exceptional circumstances
2	Unlikely	Expected to occur at least annually	Unlikely to occur
3	Possible	Expected to occur at least monthly	Reasonable chance of occurring
4	Likely	Expected to occur at least weekly	Likely to occur
5	Almost certain	Expected to occur at least daily	More likely to occur

4. Risk Score and Grading: Once the Consequence and Likelihood have been determined, the over-all risk score can be measured using the Risk Score Matrix and should follow a linear pathway:

		Consequence					
		1	2	3	4	5	
		Insignificant	Minor	Moderate	Major	Catastrophic	
	5	5	10	15	20	25	
	Almost						
	certain						
	4	4	8	12	16	20	
	Likely						
	3	3	6	9	12	15	
_	Possible						
000	2	2	4	6	8	10	
Ē	Unlikely						
Likelihood	1	1	2	3	4	5	
	Rare						

5. For grading risks: the scores obtained from the risk matrix are assigned grades as follows:

Level of risk					
1-5	Low				
6-12	Moderate				
15-25	High				

## **Appendix B – Common Health and Safety Hazard Categories**

- Biological. Biological hazards include viruses, bacteria, insects, animals, etc., that can cause adverse health impacts. For example, mould, blood and other bodily fluids, harmful plants, sewage, dust, and vermin.
- Chemical. Chemical hazards are hazardous substances that can cause harm. These hazards can result in both health and physical impacts, such as skin irritation, respiratory system irritation, blindness, corrosion, and explosions.
- Physical. Physical hazards are environmental factors that can harm an employee without necessarily touching them, including heights, noise, radiation, and pressure.
- Safety. These are hazards that create unsafe working conditions. For example, exposed wires or a damaged carpet might result in a tripping hazard. These are sometimes included under the category of physical hazards.
- Ergonomic. Ergonomic hazards are a result of physical factors that can result in musculoskeletal injuries. For example, a poor workstation setup in an office, poor posture, and manual handling.
- Psychosocial. Psychosocial hazards include those that can have an adverse effect on an employee's mental health or wellbeing. For example, sexual harassment, victimisation, stress, and workplace violence.