

# Health and Safety Risk Assessment Form

<b>Department:</b>	Research and Innovation	<b>Assessment carried out by:</b>	Andrea Bennett
		<b>Date Assessment carried out:</b>	05.07.23
<b>Date of next review:</b> Review intervals should be appropriate to the risk significance scores and tie in with your action plan If there is a significant change in your workplace, remember to check your risk assessment and, where necessary, amend it		Re-assessment will be dependent upon any identified changes or additional risks and/or annually as required.	
<b>Description of activity/risk</b>  Research and Innovation has a mobile clinical unit (bus) which can be mobilised out of the hospital grounds and into community spaces. The bus provides a bespoke clinical care environment suitable for public health promotion events and research healthcare delivery.			
<b>Supporting information (for example, explanation of activity)</b> The mobile clinical unit provides a simple clinical area whereby patients can have non-interventional assessments such as BP monitoring, height & weight measurements, blood glucose monitoring, fibro scans, ECGs, blood testing etc.			

What are the hazards? (nature of risk)	Who might be harmed and how?	What are you already doing? (control name and assurance source)	Estimate of "risk significance"			What further actions are necessary? (Action plan)	Who is responsible for executing action plans?		
Spot hazards eg <ul style="list-style-type: none"> <li>Walk around your workplace</li> <li>Ask staff/users what they think</li> <li>Check supplier's instructions</li> <li>Contact Health and Safety team</li> </ul>	Identify groups of people. Remember: Night workers, contractors, students, temporary and agency workers, pregnant workers, young people, maintenance workers, patients, volunteers, visitors, staff etc	List what is already in place to reduce the likelihood of harm or make any harm less serious	Using the Trust risk matrix for likelihood and consequence. Multiply to get risk rating			You need to make sure that you have reduced risks "so far as reasonably practicable" please use the "hierarchy of control"	Remember to prioritise. Refer to your estimate of risk significance		
			C	L	CxL		Action by whom	Action by when	Date completed
Slips, trips and falls	NUH/UoN staff and members of the public/visitors may slip, trip or fall whilst entering, occupying and disembarking the mobile unit.	Good housekeeping – floors, steps and doors clean, clear of cables/spills and well maintained.  The mobile unit is equipped with handrails and a lift to	1	2	2 Very low	Environmental checklist to ensure all aspects of safety have been checked.	Jack Squires	06.07.23	06/10/23

		<p>enable access/exiting.</p> <p>Additional handrails are fitted in the toilet facilities.</p> <p>First Aider on site and first aid kit available and in date.</p> <p>Any incidents to be recorded and reported to Research and Innovation for follow up and investigation as required.</p> <p>Grit/Salt provided &amp; hand grit spreader. Ensure steps &amp; area around unit is gritted daily in icy weather.</p> <p>Non-slip absorbent mat at entry way – monitor for damage &amp; replace if damaged.</p> <p>Bring attention to wet floors with signage as required.</p> <p>Slip hazard sign provided for wet floors.</p> <p>Participant call alarm fitted in toilet – check functionality weekly.</p>							
Fire	NUH/UoN staff and members of the public/visitors may need to evacuate the mobile unit in the presence of a fire.	<p>Staff to be orientated, alerted and trained to conduct appropriate safety checks.</p> <p>Ensure visitors who access the unit are suitably mobile/can be easily evacuated if required.</p> <p>Access to charged NUH</p>	<b>2</b>	<b>2</b>	<b>4 Low</b>	<p>Fire Evacuation Plan to be completed.</p> <p>Trained Fire Warden to perform checklist monthly &amp; advise on any issues to resolve</p>	Jack Squires	06.07.23	<b>6/10/2023</b>

		<p>mobile phone to contact emergency support staff.</p> <p>Staff to be fire trained as per NUH policy and to follow local procedures.</p> <p>An accessible fire extinguisher is available for use and is safety checked prior to opening the unit to the visitors.</p> <p>Generator to be operated in line with manufacturer's guidelines. Fuelling to be performed by qualified contractors only.</p>							
Fresh Water Supply (Tank)	NUH/UoN staff and members of the public/visitors may be at risk of harm from use of water which has been stored in a tank and could be subject to bacterial growth	<p>Daily Water Temperature Testing. If &gt;20 degrees C to drain &amp; disinfect tank. Drainage &amp; disinfection performed by Torton at site (when in use) at least monthly.</p> <p>Signage added to all taps to indicate not drinking water. Bottled water provided for drinking.</p> <p>Torton added ventilation to side panel of water tank.</p> <p>Empty water tank when not in regular use (for instance when kept at hospital site)</p>	<b>3</b>	<b>3</b>	<b>3 Moderate</b>	<p>Schedule to be drawn up to assure no legionella growth. Estates monitoring? Torton suggest installing cooling system to prevent solar heating of water tank during summer months.</p> <p>Identify additional measures to assure safe handwashing ?water treatment cartridges</p>	SMT	30/06/2024	<b>19/12/24</b>
Dirty Water Storage Tank	NUH/UoN staff and members of the public/visitors may be at risk of harm from uncontrolled / accidental release of grey water into the environment or from cross-contamination of	<p>Clean &amp; dirty water tanks are kept closed &amp; water tight. Torton onsite drainage &amp; disinfection regularly using dedicated, certificated tank &amp; pump. At least monthly drain &amp; disinfect by Torton</p>	<b>2</b>	<b>2</b>	<b>2 Low</b>	<p>Is temperature monitoring possible? If not schedule to be drawn up for drainage &amp; disinfection.</p>	SMT	30/06/2024	<b>19/12/24</b>

	clean / dirty water supplies								
Cassette Toilet	<p>NUH/UoN staff and members of the public/visitors may be at risk of harm from accidental release of contaminated water / bodily fluids.</p>	<p>There are 3 sealed Thetford cassettes, which can be stored in a lockable external cabinet. Not accessible by public.</p> <p>Chemical toilet checked daily for usage. Instructions on use and disinfection provided.</p> <p>Seal kept closed when not in use.</p> <p>Flush water provided as fixed installation.</p> <p>Hand washing facilities provided. Cleaning equipment provided.</p> <p>Cassettes to be removed when over ¾ full, sealed and locked in storage. Full cassettes should be removed from site and emptied as soon as possible –weekly recommended.</p> <p>Cassettes to be emptied using PPE appropriate to handling human waste. Cassettes emptied in appropriate ward sluice facilities or dedicated chemical toilet disposal points.</p> <p>Minimise travel in areas accessible to public. Biological and chemical hazard spill kits available.</p>	<b>3</b>	<b>2</b>	<b>6 Low</b>	<p>Ensure business insurance in place on all vehicles used for moving cassettes. Vehicles must be registered with easy-expenses (Trust system) with evidence of insurance.</p> <p>Develop an appropriate schedule of sanitation / emptying.</p>	SMT	30/06/2024	<b>19/12/24</b>

		Any use of personal vehicle for transport must be insured for business use and authorised by the Trust following Vehicle Management Policy HSEL010							
Electrical Hazards	NUH/UoN staff and members of the public/visitors may be at risk of harm should electrical equipment prove to be hazardous.	<p>Staff to be orientated, alerted and trained to conduct safety checks.</p> <p>Staff to ensure that only PAT tested appliances/equipment are used in the unit.</p> <p>The mobile unit has a fully enclosed generator which is built into the rear of the trailer. It has been fitted with a remote start / stop control and does not have public access. It is filled &amp; serviced by qualified contractors only.</p> <p>Generator and electrical systems to be serviced annually.</p>	<b>1</b>	<b>2</b>	<b>2 Very low</b>	<p>Electrical safety checklist to ensure all aspects of safety have been checked.</p> <p>Ensure staff are trained and competent to manage the running of the generator.</p> <p>Ensure annual servicing takes place on site at Torton Autobodies.</p>	Jack Squires	06.07.23	<b>19/12/24</b>
Verbal or physical abuse	NUH/UoN staff and members of the public/visitors may be at risk from patient/visitors (including those under the influence of alcohol or drugs and/or in the possession of an offensive weapon). Employees/visitors/patients may suffer either with short-term or long-term ill health conditions as a result of a physical or non-physical violent incident.	<p>Conflict resolution training (CRT) + 3 yearly refresher for all frontline staff.</p> <p>Mandatory health and safety training.</p> <p>Consider where appropriate police involvement/criminal sanctions.</p> <p>Ensure all incidents are reported on Datix and follow up/review incidents in accordance with Trust</p>	<b>2</b>	<b>2</b>	<b>4 Low</b>	Clearly display	Jack Squires	06.07.23	<b>19/12/24</b>

		<p>Policy.</p> <p>Local protocols for emergency situations are written, implemented and shared.</p>							
Lone working / Off-site working.	<p>NUH/UoN staff and members of the public utilising off-site facilities with limited control of access by the public and no security coverage off site.</p>	<p>All activity on the unit is scheduled and on a rota with oversight from a suitable management structure within the Trust.</p> <p>No lone working on the unit to be undertaken without prior agreement and in accordance with the Lone Working policy.</p> <p>Any patient / public facing activity is strictly non-lone working.</p> <p>Work involving administrative / service of the unit itself may be undertaken by lone workers so long as undertaken in accordance with the lone working policy at agreed times / agreed communication with a named individual to assure safety.</p> <p>Mobile phone is be available to use at all times in order to alert emergency services of any incidents.</p> <p>Datix &amp; report all incidents immediately and report to appropriate manager and</p>	<b>5</b>	<b>2</b>	<b>10 Moderate</b>	<p>Assessment by SMT to ensure adequate protections in place.</p> <p>Potential for harm from public is high although unlikely.</p> <p>Do we need additional safety measures? Body cameras are in use in high risk areas now.</p>	SMT	30/06/2024	<b>19/12/24</b>

		near miss or incident.							
Manual Handling	NUH/UoN staff and members of the public/visitors may be subject to harm owing to reduced space and/or movement of equipment.	<p>Staff orientated, alerted and trained to conduct safety checks.</p> <p>Staff trained per hospital policy and to follow local procedures.</p> <p>Public/visitors only permitted into the unit if they are able to sufficiently support their own movement with or without use of aid. Staff will not manually handle individuals.</p>	<b>1</b>	<b>2</b>	<b>2 Very low</b>	Consider generic manual handling assessment/ discuss with back care manager for advice regards postural support aids if required.	Jack Squires	06.07.23	<b>19/12/24</b>
Use of coach lift	<p>NUH/UoN staff &amp; members of the public / visitors may be at risk of physical harm if coach lift is not used according to safe use.</p> <p>Fall from unsecured access door could cause significant harm.</p>	<p>Staff will not use the coach lift without undertaking orientation training.</p> <p>Use should be in accordance with the manual of operations and all safety equipment should be used as intended and described in the operating instructions.</p> <p>Hands should be kept out of the lifting mechanism when in use and particular care should be taken to prevent crush injuries when lowering the lift to ensure body parts do not occupy the area below the lift.</p> <p>The access door is kept closed and secured when the lift is not in use to prevent fall from height.</p> <p>Health and safety alerts are displayed on the inside of</p>	<b>4</b>	<b>3</b>	<b>12 Mod</b>	<p>6 monthly servicing by Torton Autobodies.</p> <p>Site risk assessment (for each individual location) to ensure adequate space around lift and assessment of ground suitability for access.</p>	Jack Squires	19/12/24	<b>19/12/24</b>

		the access door to alert users to the hazard of falling							
Delivering healthcare interventions and conducting research activities	NUH/UoN staff and members of the public/visitors may be at risk of harm (physical/emotional) as a result of trial participation/diagnosis	Each research trial/healthcare intervention to be individually risk assessed to identify and mitigate additional hazards.	<b>2</b>	<b>2</b>	<b>4 Low</b>	Trained staff to deliver diagnosis & arrange follow up from appropriate healthcare provider	Jack Squires	06.07.23	<b>19/12/24</b>
Blood taking and Sample Processing	NUH/UoN staff and members of the public/visitors may be at risk of harm owing to infection, needle stick injury, splashing	All staff taking blood and processing samples are to be clinically competent in-line with NUH policies and procedures including infection control, waste disposal, COSHH.	<b>1</b>	<b>2</b>	<b>2 Very low</b>	<b>Individual risk assessment on case by case basis where additional situational difficulty arises.</b>	Jack Squires	06.07.23	<b>19/12/24</b>
Security of Mobile Unit	NUH/UoN staff and members of the public/visitors may be at risk of harm if the security of the unit is breached.	A designated team leader has overall responsibility for adequately securing the mobile unit when not in use. Guidance for this process is available as per local SOP.	<b>3</b>	<b>2</b>	<b>6 Low</b>	<b>Daily security checklist before opening / closing unit.</b>	Jack Squires	06.07.23	<b>19/12/24</b>

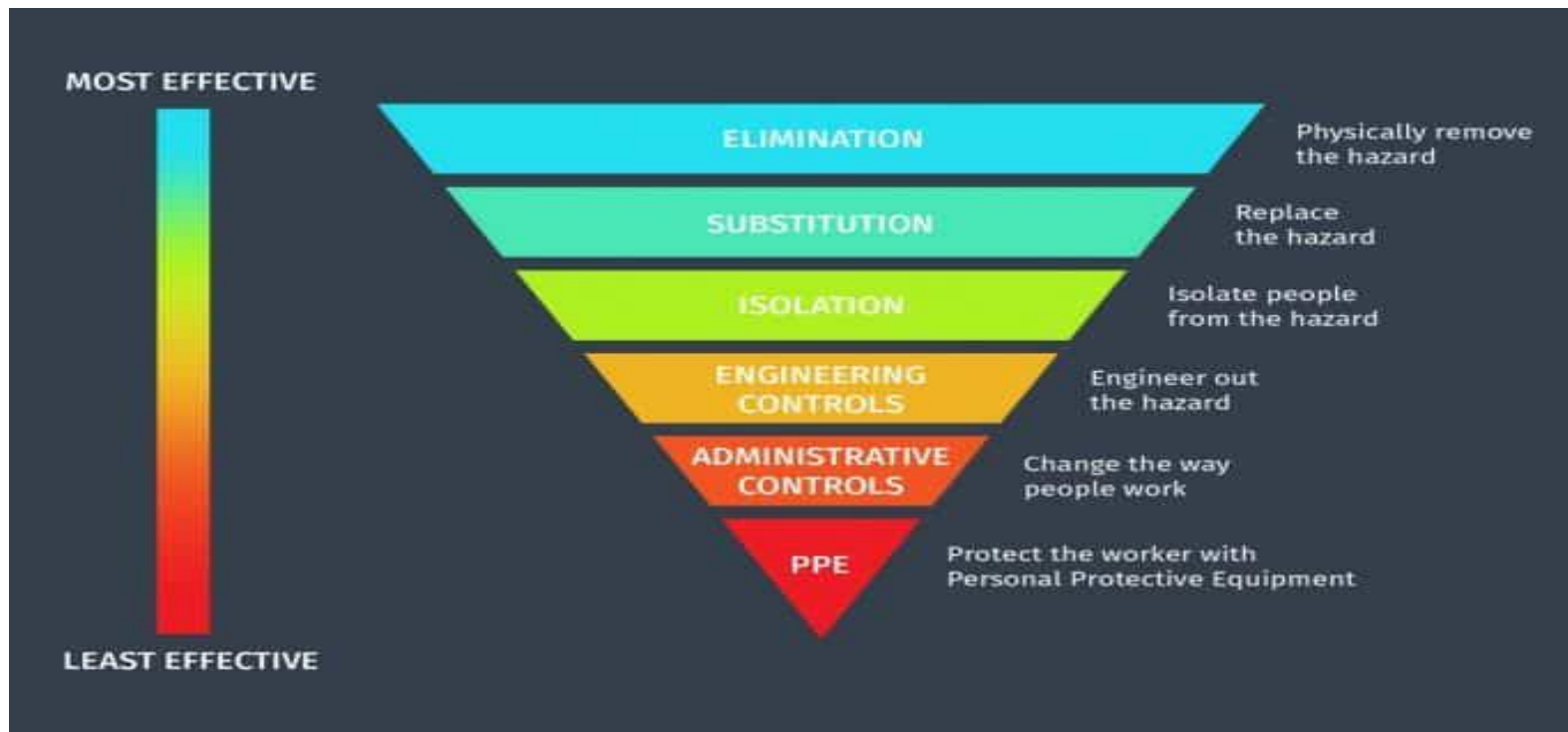
Risk Assessment Verified by:  
**Consequence and Likelihood Matrix**

	Likelihood				
	1	2	3	4	5
Consequence	Rare	Unlikely	Possible	Likely	Almost certain
5 Catastrophic	5 LOW	10 MODERATE	15 HIGH	20 SIGNIFICANT	25 SIGNIFICANT
4 Major	4 LOW	8 MODERATE	12 MODERATE	16 HIGH	20 SIGNIFICANT
3 Moderate	3 VERY LOW	6 LOW	9 MODERATE	12 MODERATE	15 HIGH



2 Minor	2 VERY LOW	4 LOW	6 LOW	8 MODERATE	10 MODERATE
1 Negligible	1 VERY LOW	2 VERY LOW	3 VERY LOW	4 LOW	5 LOW

### Hierarchy of control



	Objectives* / Financial	Degree of Harm (to Staff, Patients, Visitors or Members of the Public)	Claims & Complaints / Patient Experience / Outcomes	Impact on Service Delivery / Business Interruption / Projects	Adverse Publicity / Reputation / Inspection / Audit / Enforcement Action	Likelihood
1 Minor	Minor impact on Trust objective. <b>AND /OR</b> Barely noticeable reduction in scope or quality <b>AND /OR</b> Small loss.	Minor injury not requiring first aid or no apparent injury / adverse outcome, Near Miss.	Verbal locally resolved Complaint. Reduced quality of patient experience not directly related to the delivery of patient care Small claims (up to £25,000)	Negligible impact, brief loss / interruption > 1 hour of service. Insignificant cost increase / schedule slippage. <1%)	Local interest, rumours within Trust. Little effect upon staff morale. Small number of minor recommendations, which focus on minor quality improvement issues. Minor non-compliance with CQC	Expected to occur no more than once a decade In fewer than 1% individual pt episodes May occur in very exceptional circumstances
2 Moderate	Temporary non-compliance with Trust Key Tasks* <b>AND /OR</b> Minor reduction in quality / scope <b>AND /OR</b> Loss > 0.1% of Trust budget	Temporary Minor Injury / Illness / Effect. First aid treatment needed, referral to A&E / OH / GP	Justified formal Compliant. Unsatisfactory patient experience directly related to patient care- readily resolvable	Local only. Some loss / interruption delays in service provision (> 8 hours) < 5% over budget / schedule slippage.	Local adverse publicity, local media coverage, adverse publicity for < 3 days. Minor effect on staff morale/public attitudes. Internal inquiry reported to local committee structure. Recommendations made which can be addressed by low-level management action. Non-compliance with the Developmental requirements of the CQC	Expected to occur every 5 years In 1-4% individual pt episodes May occur in exceptional circumstances
3 Serious	Temporary non-compliance with Trust Primary Objective* <b>AND /OR</b> Reduction in	Semi-permanent Injury, Over 3 day reportable injury.	Independent review. Mismanagement of patient care, short term effects (<1 week) Justified complaint	Critical Service loss / interruption, minor delays > 1 day. 5 -10% over	Local media coverage, adverse publicity for > 3 days. Significant effect on staff morale / public perception of organisation. Internal inquiry reported to external agency.	Expected to occur annually In 5-19% individual pt episodes May occur in unusual circumstances

	scope or quality. <b>AND /OR</b> Loss > 0.25% of Trust budget	RIDDOR / Agency reportable	involving lack of appropriate care. Significant claim (up to £250,000)	budget / schedule slippage.	Challenging recommendations that can be addressed with appropriate action plan. Reduced rating. Non-compliance with core requirements of the CQC	
4 Major	Non-achievement of Trust's Key Tasks* <b>AND /OR</b> Loss > 0.5% of Trust budget	Major injuries, or long term incapacity / disability, Major Specified Injury (RIDDOR)	Ongoing National publicity. Regional inquiry. Ombudsman. Serious mismanagement of patient care, long term effects (>1week) Multiple justified complaints. Multiple claims or single major claim (over £250,000).	Critical Service loss, major reduction in service > 1 week 10 - 25% over budget / schedule slippage.	National media coverage, adverse publicity for < 3 days. Regional inquiry. Severe effect on staff morale, public confidence in organisation undermined. Enforcement action Low rating / Critical report Major non-compliance with core requirements of the CQC	Expected to occur monthly In 20-49% individual pt episodes (operations, course of treatment, procedures, IP stay etc) May occur in usual circumstances
5 Catastrophic	Non-achievement of Trust Primary Objective(s)* <b>AND /OR</b> Loss > 1% of Trust budget	Death or major permanent incapacity	Full National Inquiry. Select Committee. Public Accounts Committee. Totally unsatisfactory patient outcome or experience	Total loss of Critical Service or facility. >25% over budget/ schedule slippage.	National/international media coverage with adverse publicity for > 3 days. Loss of key staff. Public inquiry / MP Concerns raised in Parliament. Court enforcement. Non-compliance with legal requirement, which may result in Prosecution, Zero rating. Severely critical report	Expected to occur weekly (or more frequently) In >50% individual patient episodes Is typical of usual circumstances (or is the now most-likely outcome or is more likely to happen than not)