

### 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>	<b>May 2019</b>
<b>Subject of Assessment:</b> E.g.: hazard, task, equipment, location, people			
<b>Equipment - Failure to comply with Health Protection Scotland (HPS) NHSScotland National Infection Prevention and Control Manual (NIPCM) when dealing with infectious and or soiled laundry within Mental Health Inpatient settings.</b>			
<b>Hazards</b> (Describe the harmful agent(s) and the adverse consequences they could cause)			
<b>Exposure of Health Care Workers from linen suspected as infectious and/or soiled/contaminated with blood or other body fluids.</b>			
<b>Description of Risk</b> 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.			
<p>In April 2014 the HSE served a Prohibition Notice on the organisation with regards to the use of clear plastic bags due to the asphyxiation of patients at risk of self harm within Mental Health wards in NHS GGC. All clear plastic bags have been removed and are no longer used within Mental Health Inpatient wards.</p> <p>This means that suspected infectious and/or soiled, linen contaminated with blood or other body fluids, which is place directly into a red water-soluble/alginate bag and secured, cannot be then placed into a secondary clear plastic bag and secured before placing in a laundry receptacle. This result is that Mental Health Inpatient wards fail to comply with Standards set out in the National Infection Prevention and Control Manual.</p> <p>Large brown plastic bags are now in situ, to be used only, as a secondary plastic bag to contain a red water-soluble/alginate bag. Bags should be secured before placing in a laundry receptacle.</p>			

#### Existing Precautions

##### Summarise current controls In place

- Brown plastic bags identified by NHS GGC will be used only as a secondary plastic bag for infectious/soiled linen.
- Staff will order brown plastic bags from procurement.
- Brown plastic bags will be stored securely in a locked area with no patient access at all times.
- Staff will not leave the brown plastic bags unattended when in use.
- SCNs will ensure that all staff within their area of responsibility understand & can explain why brown bags are used instead of clear plastic bags.
- Local Staff induction will include the use of brown plastic bags.
- Datix incident reporting system will be used if any incident arises with brown plastic bags.
- Staff will inform the SCN or Nurse in Charge, of any issues arising regarding brown plastic bags.
- Updated SOPs will included purpose and use of brown plastic bags within Mental Health Inpatient areas

**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	<u>LOW</u>	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.

Proposed actions to control the problem <small>List the actions required. If action by others is required, you must send them a copy</small>	By Whom	Start date	Action due date
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	N/A
Report to Estates for action	N/A
Contact advisers/specialists	N/A
Alert your staff to problem, new working practice, interim solutions, etc	N/A

**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:

May 2019

Review date:

May 2020