Guidance for Undertaking a Risk Assessment

A risk assessment is a careful examination of what could cause harm to people, the environment, the organisation etc., to enable a review of whether enough precautions are in place or whether more can and should be done to prevent harm.

BrisDoc has a legal responsibility to identify and categorise risks and either eliminate or reduce them to the "lowest level that is reasonably practicable".

The 5 steps in the risk assessment process are:

1. Identify the hazard
2. Decide who or what might be harmed and how
3. Evaluate the risks and take action to prevent them where possible
4. Record your findings on the Risk Assessment Form and communicate the risks and control measures to those who need to know, including adding details to the Risk Assessment Log
5. Review the assessment

The Overall Risk Score is the highest total number for an individual hazard.

The level of risk associated with each hazard is assessed in accordance with the Risk Scoring Matrix. This identifies both the severity of the hazard and its likelihood of occurrence. The aim of the risk scoring is to systematically establish relative priorities. The purpose of risk management is to determine what will be done and who will be responsible for the risks that have been identified. Risk management converts the risk assessment into an action plan.

It takes time to plan and implement change. A robust monitoring and review system is essential to ensure actions are followed through, and priorities are re-assessed, so that risk management is an ongoing process that is embedded into normal management processes. Ensure that when undertaking the assessment, the details of the date of the review and the people who will be undertaking the review are documented and this process is followed through.

Once complete, details of the Risk Assessment need to be included within the Risk Assessment Log and a headline added to the Risk Register via the corporate.administrator@nhs.net.

Risk Assessment Matrix

Severity/Consequence of event occurring

Description	Category	Risk to patient, staff, business
Catastrophic	5	Incident leading to death, non-delivery of business objectives, event which impacts on large number of patients/staff, multiple breeches to statutory duty, prosecution, national media coverage/total loss of public confidence, >25% over project budget/loss of >1% of budget, loss of contract, 1day loss of service.
Major	4	Major injury leading to long term incapacity, significant harm to patient, >14days off work, uncertain delivery of business objectives, enforcement action/multiple breeches of statutory duty, uncertain delivery of service due to lack of staff, national media coverage, 10-15% over project budget/loss of 0.5-1% of budget, >12hrs interruption to service.
Moderate	3	Moderate injury requiring professional intervention, some harm to patient, 4-14days off work, unsafe staffing level, single breech of statutory duty, local media coverage/long term reduction in public confidence, >8hrs interruption to service, 5-10% over project budget/0.25-0.5% loss of budget, late delivery of business objectives.
Minor	2	Minor injury, minimal harm to patient, low staffing reduces service quality, breech of statutory legislation, local media coverage/short-term reduction in public confidence, >1hr interruption to service, <5% over project budget/loss of 0.1-0.25% of budget, minor impact on business objectives, >3days off work.
Negligible	1	Minimal injury, no harm to patient, no time off work, no/slight impact on business objectives, insignificant cost increase/financial loss, rumours, <30mins interruption to service, <1 day shortage of staff, no/minimal breech of statutory duty.

Likelihood of event occurring

Almost certain	81% -100% likelihood of occurrence	5	Will undoubtedly happen/recur, possibly frequently
Likely	51% - 80% likelihood of occurrence	4	Will probably happen/recur but is not a persisting issue
Possible	21% - 50% likelihood of occurrence	3	Might happen or recur occasionally
Unlikely	6% - 20% likelihood of occurrence	2	Do not expect it to happen/recur but possible it may do so
Rare	0% - 5% likelihood of occurrence	1	This will probably never happen

Score the risk

		Severity of Consequence				
Likelihood	Almost certain	5	10	15	20	25
	Likely	4	8	12	16	20
	Possible	3	6	9	12	15
	Unlikely	2	4	6	8	10
	Rare	1	2	3	4	5
		Negligible	Minor	Moderate	Major	Catastrophic

The risk score = severity x likelihood.

RISK ASSESSMENT FORM

BrisDoc
Patient care by people who care

Name of Assessor(s)	Jodie Godfrey, Shelly Joesph, Rosa Carter, Amanda Murray	Business Unit	Service	Review Board
Date of Assessment	26/03/26			
Title	Corporate - Spillage of Bodily fluids (blood/ vomit/urine) and storage and use of Spill Kits	*Practice* *Urgent Care* *Corporate*	*BMC* *HHS* *CKMP* *IUC* *Osprey* *All Practices* *All Services*	*Quality*
Risk Assessment ID	*36*			

***Select one from each**

Description of the Hazard *NB: Include what/who is at risk and justify score*	Existing Controls	Risk Score			Action taken	Residual Risk Score			Further Action Required	Timescale for Action
		Severity	Likelihood	Total		Severity	Likelihood	Total		
Assessor to assess whether there may be a risk to : Patient/Staff impact. Financial implications. Reputational damage. Regulation breach. Service interruption. Digital Risk. Wellbeing.										
Spread of infection to staff and patients (Blood/Vomit/Urine/Any other)	• Infection Prevention and Control Policy • Spillage Kits in sluice/appropriate room/storage cupboard • Cleaning Signs • PPE • Hand Hygiene Guidelines	4	3	12	• Annual hand hygiene audits • Education of clinical staff with spillage kits • Clinical waste management	4	1	4	Ensure this is part of induction for new staff	Ongoing

	• Infection control training									
Following event in 2019 NPSA Ref no: NatPSA/2019/002/NHSPS – Risk of death and severe harm from ingesting superabsorbent polymer gel granules contained in spillage kits. For ongoing risk assessment to prevent further risks to both staff and patients at risk	• Infection Prevention and Control Policy • Spillage Kits available in all patient facing settings • Store it in a locked cupboard • Cleaning Signs • PPE • Hand Hygiene Guidelines • Infection control training • Clinical waste management	5	2	10	• Education of clinical staff with spillage kits • Staff advised and aware to use appropriate PPE when using spill kit & not to leave unattended • Spillage kit should not be accessible to patient • Staff to ensure that the spillage kit is not left unattended when in use	5	1	5	Ensure this is part of induction for new staff	Ongoing
Incorrect use or ingestion of spillage kits materials- risks to patients and staff	• Infection Prevention and Control Policy • Cleaning Signs • PPE • Hand Hygiene Guidelines • Infection control training • Clinical waste management	5	2	10	• Education of clinical staff with spillage kits • Staff advised and aware to use appropriate PPE when using spill kit & not to leave unattended • Spillage kit should not be	5	1	5	Ensure this is part of induction for new staff	Ongoing

					• accessible to patient • Staff to ensure that the spillage kit is not left unattended when in use					

You must send all completed Risk Assessments to corporate.administrator@nhs.net.