

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 risk

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 brisdoc.governance@nhs.net.

Please use the second page of the template to gather details of the headline risk.

Risk Assessment

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 breach 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, breach 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 breach 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

Name of Assessor(s)	Aimee Henley	Overall Risk Score			Date of Next Review
Date of Assessment	2 nd January 2026	2	2	4	2 nd January 2027
Title	Marksbury Road First Aid				
Risk Assessment ID	118	Severity	Likelihood	Total	

You must include details of any Risk Assessment in the Risk Assessment Log and add a headline to the Risk Register via brisdoc.governance@nhs.net. Please use the template on the next page to gather details of the headline risk.

Description of the Hazard <i>NB: Include what/who is at risk and justify score</i>	Existing Controls	Risk Score			Action taken	Residual Risk Score			Further Action Required	Timescale for Action
		Severity	Likelihood	Total		Severity	Likelihood	Total		
Sudden onset illness, Cuts/Bruises, Sprains/Strains & Burns Who might be at risk - Employees Visitors Contractors	We always have clinicians onsite and they will act as the first aider. All employees will complete any necessary statutory and mandatory H&S training. Accident books are kept with the first aid kits and should be completed when required.	2	2	4	Our first aid provision is adequate for our employees, visitors and any contractors who are on site. It is appropriate to our workplace, circumstances, hazards and risks. The first aid kits are audited monthly, or topped up prior if Facilities Team have been notified items have been used. The first aid kits are located in the medication	2	2	4		

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					cupboard within the store room We also have a resus bag which is kept in the store room.					
Incidents of sudden onset illness, Cuts/Bruises, Sprains/Strains & Burns whilst there is insufficient first aid cover during early morning or late evening periods.	At the start or end of the working day there may be only one or two people present in the building. During these periods, an appointed first aid person who may not be fully first aid trained, will provide assistance to another member of staff. Staff have access to a telephone to call the emergency services. The first aid kits are audited weekly, or topped up prior if the Facilities Team have been notified items have been used. Accident and Emergency Dept within a 10-minute car journey from Marksbury	2	2	4		2	2	4		

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	Community Practice									
	All staff will complete any necessary statutory and mandatory H&S training. Accident books are kept with the first aid kits and should be completed when required. Green First aid notices are in place where first aid kits are kept.									

Once you have completed the Risk Assessment, please provide details of the headline risk below, so that it can be added to the Risk Register

Date risk identified	Business Unit	Service	Risk Owner	Review Board	Description of the hazard	Existing Controls	Severity	Likelihood	Risk Score
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02/01/2026	Marksbury rd	IUC	Stuart Burgess	Quality	Sudden onset illness, Cuts/Bruises, Sprains/Strains & Burns Who might be at risk - Employees Visitors Contractors	We always have clinicians onsite and they will act as the first aider. All employees will complete any necessary statutory and mandatory H&S training. Accident books are kept with the first aid kits and should be completed when required.	2	2	4
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Action Taken	Severity	Likelihood	Residual Risk Score	Last Review Date	Further Action Required	Timescale for Action
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Our first aid provision is adequate for our employees, visitors and any contractors who are on site. It is appropriate to our workplace, circumstances, hazards and risks.	2	2	4	02/01/2026	None	29/08/2026
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