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| **Risk Assessment** | | | | |
| **Risk Assessment for the activity of** | **Clinical Medical Education Society (CLiMES)** | | **Date** | **12.08.2021** |
| **Unit/Faculty/Directorate** |  | **Assessor** |  | |
| **Line Manager/Supervisor** |  | **Signed off** |  | |

| ***PART A*** | | | | | | | | | | |
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| **(1) Risk identification** | | | **(2) Risk assessment** | | | | **(3) Risk management** | | | |
| **Hazard** | **Potential Consequences** | **Who might be harmed**  **(user; those nearby; those in the vicinity; members of the public)** | **Inherent** | | |  | **Residual** | | | **Further controls (use the risk hierarchy)** |
| **Likelihood** | **Impact** | **Score** | **Control measures (use the risk hierarchy)** | **Likelihood** | **Impact** | **Score** |
| Slips and Trips | Individuals or those in the vicinity could fall over cables, bags or equipment resulting in injury. | Individuals involved in the activity and those around. | **3** | **2** | **6** | All Bags are to be kept in a corner of the room out of the way and cables are not to run across the room. | **2** | **2** | **4** |  |
| Theft | Individuals could have personal items stolen such as phones, wallets and laptops. | Individuals involved in activity. | **2** | **3** | **6** | Individuals are to be reminded that they bring their personal valuables at their own risk and to keep sight of them or to not bring them to sessions. |  |  |  |  |
| COVID-19 | Infection with covid-19, self-isolation and missing placement in the cases of older years in medicine. | Individuals partaking in activity and social contacts. | **3** | **2** | **6** | 1. Encourage members to wash their hands using provided hand sanitizer between examination practice 2. Wipe any equipment with anti-bacterial wipes before and after use. 3. Wear masks whilst walking around inside buildings. | **2** | **2** | **4** | As a vaccine-preventable disease, and with vaccination required for medical placement, we anticipate the majority of our members to be fully vaccinated, which shall significantly reduce risk of both transmission and illness. However we shall keep the other detailed measures in place additionally. |
| Injury due to incorrect use of equipment | We shall be using examination couches (massage couches) that fold out from halves for sessions. An individual may trap fingers in them whilst closing them. | The individual using the equipment. | **3** | **2** | **6** | 1. Committee members or student teachers shall set up the couches. 2. Any individual setting up the couches will be reminded to watch their fingers. | **2** | **2** | **4** |  |
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| ***PART B – Action Plan*** | | | | | | |
| **Risk Assessment Action Plan** | | | | | | |
| **Part no.** | **Action to be taken, incl. Cost** | **By whom** | **Target date** | **Review date** | **Outcome at review date** | |
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| Responsible manager’s signature: Alexandra Thomas | | | | Responsible manager’s signature: Joanna Dunn | | |
| Print name: Alexandra Thomas | | | Date:17.08.2021 | Print name: Joanna Dunn | | Date: 17.08.2021 |

**Assessment Guidance**

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| 1. Eliminate | Remove the hazard wherever possible which negates the need for further controls | If this is not possible then explain why |  |
| 1. Substitute | Replace the hazard with one less hazardous | If not possible then explain why |
| 1. Physical controls | Examples: enclosure, fume cupboard, glove box | Likely to still require admin controls as well |
| 1. Admin controls | Examples: training, supervision, signage |  |
| 1. Personal protection | Examples: respirators, safety specs, gloves | Last resort as it only protects the individual |

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| **LIKELIHOOD** | 5 | 5 | 10 | 15 | 20 | 25 |
| 4 | 4 | 8 | 12 | 16 | 20 |
| 3 | 3 | 6 | 9 | 12 | 15 |
| 2 | 2 | 4 | 6 | 8 | 10 |
| 1 | 1 | 2 | 3 | 4 | 5 |
|  | | 1 | 2 | 3 | 4 | 5 |
| **IMPACT** | | | | |

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| Impact | | Health & Safety |
| 1 | Trivial - insignificant | Very minor injuries e.g. slight bruising |
| 2 | Minor | Injuries or illness e.g. small cut or abrasion which require basic first aid treatment even in self-administered. |
| 3 | Moderate | Injuries or illness e.g. strain or sprain requiring first aid or medical support. |
| 4 | Major | Injuries or illness e.g. broken bone requiring medical support >24 hours and time off work >4 weeks. |
| 5 | Severe – extremely significant | Fatality or multiple serious injuries or illness requiring hospital admission or significant time off work. |

Risk process

1. Identify the impact and likelihood using the tables above.
2. Identify the risk rating by multiplying the Impact by the likelihood using the coloured matrix.
3. If the risk is amber or red – identify control measures to reduce the risk to as low as is reasonably practicable.
4. If the residual risk is green, additional controls are not necessary.
5. If the residual risk is amber the activity can continue but you must identify and implement further controls to reduce the risk to as low as reasonably practicable.
6. If the residual risk is red do not continue with the activity until additional controls have been implemented and the risk is reduced.
7. Control measures should follow the risk hierarchy, where appropriate as per the pyramid above.
8. The cost of implementing control measures can be taken into account but should be proportional to the risk i.e. a control to reduce low risk may not need to be carried out if the cost is high but a control to manage high risk means that even at high cost the control would be necessary.

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| Likelihood | |
| 1 | Rare e.g. 1 in 100,000 chance or higher |
| 2 | Unlikely e.g. 1 in 10,000 chance or higher |
| 3 | Possible e.g. 1 in 1,000 chance or higher |
| 4 | Likely e.g. 1 in 100 chance or higher |
| 5 | Very Likely e.g. 1 in 10 chance or higher |