

CIPHER Medical Consultancy Standard Risk Assessment Form

Person Completing:	Chris Jones	Role/Title:	Head of Education and Governance	Date:	25/02/20
Review required on or before:	24/02/22	Director Responsible:	Andrew Thomas		
Task/Hazard/Practice being Risk Assessed:	Cycle Response Units				

1. Consequence Impact Assessment

1) Measure Consequence					
Choose one of the descriptors below, consider each domain and section and judge what the most realistic scenario would be if the event occurred, The most serious consequence identified determines the score.					
Score	1	2	3	4	5
Domain	Insignificant	Minor	Moderate	Major	Catastrophic
Patient Experience	Unsatisfactory patient experience and directly related to patient care.	Unsatisfactory patient experience readily resolvable.	Mismanagement of patient care	Serious Mismanagement of patient care	Totally unsatisfactory patient outcome or experience
Injury	No apparent injury. Minor injury not requiring first aid	Minor injury. First aid treatment e.g. laceration/sprain, anxiety with < 3 days off work	Medical treatment required. Temporary incapacity, injury or harm, e.g. short term monitoring Injury requiring > 3 days sickness RIDDOR/Agency reportable	Permanent injury or harm. Injury requiring major clinical intervention long term incapacity/disability Long term staff sickness > 4 weeks	Death or major permanent incapacity
Complaints/ Claims	Locally resolved complaint (informal)	Formal complaint possible. Justified complaint peripheral to clinical care	Formal complaint likely - regarding delivery of care. Litigation possible	Serious complaint anticipated with multiple issues. Litigation expected Multiple justified complaints	Multiple claims or single major claim expected
Adverse Publicity/ Reputation	Not expected	Local media - interest possible but short term	Local media - potential for long term adverse publicity	Probable national media interest (short term). Public confidence undermined.	National media interest >3days. Public confidence undermined. Extreme adverse publicity for Trust
Service/ Business Interruption	Interruption which does not impact on delivery of service	Short term disruption <1hr - minimal impact on delivery of service.	Non permanent loss of ability to provide service >1hr < TBA Some disruption to delivery of service	Sustained loss of service >TBA, with major impact. Major contingency plans invoked	Permanent loss of core service or facility. Disruption to service leading to significant 'knock on' effect across health economy

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Finance	Small loss	Loss >0.1% of Trust budget	Loss >0.25% of Trust budget	Loss >0.5% of Trust budget	Loss >1% of Trust budget
Inspection/ Audit	Small number of recommendations which focus on minor improvement/non compliance issues - can be addressed by a department	Minor recommendations made which can be addressed by low level of management action	Challenging recommendations made but can be addressed with appropriate action plan. Potential for minor negative impact on Performance Ratings	Enforcement action expected. Critical report. Significant negative impact on performance ratings	Prosecution expected. Severely critical report Will lead to rating of 'Weak' in Quality or Use of Resources
Staffing	Short term low staffing level (<= 1 day) where there is no actual disruption to service delivery)	Ongoing low staffing level resulting in minor disruption to service/delivery of care	Ongoing problems with level of staffing leading to delay/moderate disruption to service delivery/patient care. Minor errors resulting	Serious ongoing problems with staffing levels leading to serious disruption in service delivery , Serious errors resulting	Non delivery of service due to lack of staff. Non delivery of key or service objectives due to lack or loss of key staff.
Objectives/ Projects	Insignificant cost increase/schedule slippage. Barely noticeable reduction in scope or quality	> 5% over budget, schedule slippage. Minor reduction in quality/scope	10% over budget, schedule slippage , reduction in scope/quality. Moderate business interruption	10-25% over budget, schedule slippage. Doesn't meet secondary objectives. Major business interruption	>25% over budge. Schedule slippage. Doesn't meet primary objectives. Reputation of the Trust severely damaged

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2. Qualitative Measure of Likelihood Assessment

Score	Descriptor	Description
1	Rare	Not expected to happen again
2	Unlikely	May happen but in exceptional or unusual circumstances
3	Possible	The event may re-occur occasionally
4	Likely	The event will probably re-occur
5	Certain	The event is likely to re-occur on many occasions

3. Likelihood v Consequence Total Risk Rating

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

4. Action to Be Taken



	LOW 1-6	MED 8-12	HIGH 15-25
Preventative Measures to be Taken or Planned	Manage by routine procedure. Implement any action that will eliminate the risk of the incident /risk occurring	Senior Management action needed. The responsible Director must be aware and Lead Manager must devise and implement an action plan to control, reduce or eliminate the risk. Risk must be inputted onto the Corporate Risk Register.	Immediate action required. The Risk Managers and Executive Management Team must be made aware and are responsible for ensuring an investigation and action plan is commenced immediately to reduce, control or eliminate the risk. The risk must be entered onto the Corporate Risk Register

5. Risks Identified

Nature of Risk Identified	Likelihood Score	Potential Impact	Impact Score	Total Risk Rating	Existing Measures in Place	Action to Take	Owner of Action	Completion by	Complete Y/N Date
Verbal/physical abuse	2	Risk to staff of verbal and/or physical abuse from service users or members of the public. CIPHER Medical provides event medical cover at large crowd and sporting events, including in public areas and/or where alcohol is freely available	3	6	Emergency plans are provided by large event organisers. All staff to complete conflict resolution training. Staff issued portable radios at events with mobile phone backup. To work in pairs where possible.	None at present	CJ	N/A	
Needlestick injury- Paramedic/Technician	1	Paramedics routinely performing cannulation, IM, SC in pre-hospital environment, including IO. Technicians perform a limited number of procedures of IM injections. No IV procedures but could be at risk due to lack of familiarity.	4	4	Staff to follow CIPHER IPC and Exposure Prone Procedures Policies. Staff to utilise blunt drawing up needs as provided. Staff to wear appropriate PPE Staff to have sharps box within reach when performing procedures.	None at present	CJ	N/A	
Road Traffic Collision	1	Risk of vehicular traffic v cycle collision could result in catastrophic or fatal injuries to the rider.	5	5	Most events are closed road or take part in pedestrian only areas. Helmet to be worn at all times. Cycles fitted with appropriate reflective material. Hi viz to be worn. White front and rear red lights to be used at all times. Staff should avoid using radios while riding unless urgent. Mobile phones should only be used when stopped and off-road.	None at present	CJ	N/A	
Fall from cycle	2	Risk of injuries, cuts, grazes and minor breaks if a fall from cycle at speed.	3	6	Staff to maintain appropriate speeds for conditions. In severe weather, e.g. heavy rain, ice, frost, snow and high winds Event Manager should	None at present	CJ	N/A	

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					<p>review situation and redeploy riders on foot/vehicles as appropriate.</p> <p>Staff empowered to report concerns regarding risk.</p> <p>Helmet and gloves to be worn at all times.</p> <p>CIPHER recruitment only experienced and competent riders to perform role.</p> <p>Bikes checked prior to use.</p> <p>Bikes regularly maintained in good condition.</p>				
CIPHER Cycle Response Unit v Pedestrian	1	Deaths of pedestrians following cycle collisions are rare (circa 15 per year) but do occur, especially elderly pedestrians who are more at risk.	5	5	<p>Staff to maintain appropriate speeds for conditions.</p> <p>CIPHER recruitment only experienced and competent riders to perform role.</p> <p>White front and rear red lights to be used at all times.</p> <p>Staff should avoid using radios while riding unless urgent.</p> <p>Mobile phones should only be used when stopped and off-road.</p>	None at present	CJ	N/A	
Lifting and Carrying Equipment	2	Risk of injury, such as back injury, to staff from carrying equipment, e.g. oxygen equipment, defibrillator or heavy patient luggage	2	4	<p>New staff to undergo manual handling training on induction.</p> <p>Trained staff to have annual manual handling update.</p> <p>Occupational health declaration on recruitment.</p> <p>Follow good manual handling practice.</p> <p>CIPHER supply light weight ZA O2 cylinders for cycles.</p> <p>Light-weight AED provided.</p> <p>Front and rear panniers provided.</p>	None at present	CJ	N/A	
Heat/Cold illness & exhaustion	1	Cycle Response Units may travel a significant mileage per day when performing their roles. A risk of heat or cold related illness, dehydration or exhaustion.	3	3	<p>CIPHER recruitment only allows experienced and competent riders physically capable of performing role.</p> <p>Bottled water is always freely available for riders.</p>	None at present	CJ	N/A	

					<p>Energy gels and snacks are freely available for riders- there are no polices restricting when and where riders can eat/drink. Warm uniform provided where required. Cyclists free to arrange their own rest stops as appropriate. Event manager</p>				
Signature of completing manager			Date		Designation				
			25/02/20		Head of Education and Governance				
Signature of Responsible Director			25/02/20		CEO & Consultant Paramedic				
									
Due for Review			25/02/22						