

Bwrdd lechyd Prifysgol Caerdydd a'r Fro Cardiff and Vale University Health Board

### Risk Assessment and Risk Register Procedure

### Introduction and Aim

The University Health Board (the UHB) will face a number of risks which, if unmanaged, will threaten the achievement of its goals and objectives.

The Board describes its commitment to delivering effective risk management in the <u>Risk</u> <u>Management and Board Assurance Framework Strategy 2019-22</u>

This procedure has been written to explain how risks should be assessed and then recorded within risk registers.

## Objectives

This procedure documents the general risk assessment process which:-

- Defines a risk assessment, risk register and other associated terms commonly used;
- Clarifies who is responsible throughout the process from identification to resolution;
- Specifies how risks will be considered, prioritised and managed within the UHB;
- Provides a mechanism to identify if a risk is tolerable taking into account the risk rating and the actions being taken to deal with the risk;
- Provides guidance to ensure consistent scoring when used by staff from a variety of roles and professions; and
- Is capable of assessing a wide range of risks including clinical, health and safety, financial and reputational.

### Scope

This procedure applies to all of our staff in all locations including those with Honorary Contracts.

It outlines the general risk assessment process. It should be used for identifying general health and safety risks, financial risks, general clinical risks, risks to the reputation of the UHB etc.

Within the healthcare setting there are a number of different types of risk assessment. Some relate to individual patients e.g. Falls Assessment, others relate to a particular risk in the workplace e.g. Manual Handling.

Where specific assessment criteria are contained within other UHB policies or procedures they should be used. It may however, from time to time, be necessary to consolidate the findings from a number of specific assessments into a single general risk assessment where there are trends which require action e.g. a disproportionate number of falls in a ward and it is identified that this is due to the flooring and not the clinical condition of the patients.

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| Equality Impact   | An Equality Impact Assessment has not been completed. This is    |  |  |  |
|---|--|--|--|--|
| Assessment  | because the procedure has been written to support implementation |  |  |  |
|   | of the Risk Management Policy. The Equality Impact Assessment    |  |  |  |
|   | completed for the Policy found there to be no impact.            |  |  |  |
| Documents to read   | Risk Management and Board Assurance Framework Strategy 2019-     |  |  |  |
| alongside this  | 22   |  |  |  |
| Procedure   | Health and Safety Policy   |  |  |  |
|   | Control of Substances Hazardous to Health (COSHH) Procedure      |  |  |  |
|   | Display Screen Equipment Procedure                               |  |  |  |
|   | Incident, Hazard and Near Miss Reporting Policy and Procedure    |  |  |  |
|   | Minimal Manual Handling Policy                                   |  |  |  |
|   | Management of Violence and Aggression (Personal Safety) Policy   |  |  |  |
|   | Prevention and Management of Falls in Vulnerable Adults          |  |  |  |
|   | Procedures   |  |  |  |
|   | Risk Assessment for New and Expectant Mothers Procedure          |  |  |  |
|   | Thermal Comfort Procedure  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
| Approved by   | Board  |  |  |  |
| Accountable Executive   | Director of Corporate Governance                                 |  |  |  |
| or Clinical Board   |  |  |  |  |
| Director  |  |  |  |  |
|   |  |  |  |  |
| Author(s)   | Director of Corporate Governance                                 |  |  |  |
|   |  |  |  |  |
| <u>Disclaimer</u><br>If the review date of this document has passed please ensure that the version you are using is the most up |  |  |  |  |
| date either   | by contacting the document author or the Governance Directorate. |  |  |  |

| Summary of reviews/amendments |                               |                |   |
|-------------------------------|-------------------------------|----------------|---|
| Version<br>Number             | Date of<br>Review<br>Approved | Date Published | Summary of Amendments   |
| 1                             | 24.01.2011                    | 28.01.2011     | New document written to consolidate content of previous Trust procedures.   |
| 2                             | 14.10.2014                    | 19.11.2014     | Updating of content and reformatting to comply with<br>new document layout.<br>Revision of risk score which prompts the entry of a<br>risk onto a risk register. Risk score increased from<br>4 to 9. |
| 3                             | 25.07.2019                    | 27.09.2019     | New procedure put in place to support the delivery<br>of the Risk Management and Board Assurance<br>Framework Strategy  |

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### 1 Process for Undertaking Risk Assessments and Recording their Findings

A suitable and sufficient risk assessment can be undertaken by following the 5 steps detailed below.



Undertaking an initial assessment of the activities or objectives to be achieved will help managers to identify those areas that require a more in-depth assessment. Risk assessments should not be undertaken in isolation and a multi-disciplinary approach is encouraged. Employees and their representatives should be engaged at all stages of the risk assessment process.

Appendix 1 explains the "5 Steps" summarised above in more detail.

Risk Assessments should be retained whilst they remain current and for 12 months after they are closed.

Where a risk scores 8 or above it should be recorded on the relevant Risk Register. The following flowchart explains how risks which require recording in a risk register find their way from 'Ward to Board' and visa versa.

### 2 Definitions

A full list of definitions for words and phrases used throughout this procedure and within the field of risk assessment/management are

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listed in Appendix 1 of the <u>Risk Management and Board Assurance</u> <u>Framework Strategy.</u> Some of the more common ones used within the procedure are shown below:-

**Hazard** – Anything that may cause harm, damage or loss, e.g. chemicals, manual handling

**Risk** - The chance of suffering harm caused by a hazard, loss or damage or the possibility that the UHB will not achieve an objective

**Risk Assessment** - The overall process of identifying risk and evaluating whether acceptable or not taking into account best practice and the appetite of the organisation.

**Risk Register/Profile** - A documented and prioritised log of the overall assessment of a range of risks faced by the organisation

**Corporate Risk Register** – A single document which brings together the operational risks (rated 20-25) of the organisation of meeting its principal objectives mapped against both the key controls in place to manage them and how the Board will gain sufficient assurance about their effectiveness.

#### 3 Who is responsible for what?

Please refer to the <u>Risk Management and Board Assurance</u> <u>Framework Strategy 2019-22</u>. The document details the duties of individuals in addition to the Risk Management and Organisation Structure.

### 4 Training

The following are examples of courses where risk assessment is already included:

- Induction and Mandatory Training Programmes;
- Courses organised by the Health, Safety and Environment Department, for example Manual Handling and Personal Safety;
- Clinical Governance Development sessions facilitated by the Patient Safety and Quality Department;

The Clinical Boards and Corporate Directorates should identify the training needs of their staff and where there is not provision within existing courses identify ways of meeting this need. This could include arranging specific sessions facilitated by the Head of Corporate Risk and Governance.

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