

# Risk Assessment – The Hub

Accidents and ill health at work reported under RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) <http://www.hse.gov.uk/riddor>

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Combined risk assessment and policy template published by the Health and Safety Executive 08/14

**Company name: Korus Health**

**Date of risk assessment:** 01.07.2021 11.08.2021 **30.08.2022, 27.02.2023**

What are the hazards?	Who might be harmed and how?	What are you already doing?	Do you need to do anything else to control this risk?	Action by who?	Action by when?	Done
<b>Safeguarding</b>	Staff and patients	All staff receive safeguarding training and a designated safeguarding offer as well as a deputy is in place. Confidentiality policy followed by all staff No lone working	Refresher training for staff. Panic alarms purchased for when clinician is in room alone with CA on Reception	ME	16.02.2023	To be done online by 16.02.23
<b>Patient confusion or lateness due to lack of directional signage</b> <b>Added risk due to road works and road closures</b> <b>12.09.22</b>	Patients	Maps and diagrams on website to provide visual directions Postcode given to patients as many use satnav directions Directional signs from entrance to park with NHS easily recognisable logo Signage on main doors and throughout car park <b>Temporary/diversion signs have been put in place by Costain from main directions.</b> <b>Map has been added to website</b> <b>Office staff have verbal directions to give people who ring</b> <b>Additional signs added due to patients repeatedly using the wrong door</b>	Consult with patients on the ease or any problems experienced in finding the building. Most people found it easily. ME having regular meetings with Costain, additional signage in place. Swing signs in place for NHS clinics and Korus Health for car parking on Trevisson Park grounds. Monthly meetings attended re traffic/signage management. More road signs added at our request	L. Tyler	07.07.21 Verbal sampling of patients	11.08.21 No reports of patients unable to find clinic <b>30.09.22</b> <b>No known DNAs due to road changes.</b> <b>27.02.2023-</b> <b>New signage Jan 2023.</b>
<b>Access</b>	Staff and patients	Access is gained by flat thoroughfare and a larger accessible toilet is available for those that cannot access a smaller toilet area. Wide enough doorways are in place for those who use aids for mobility.	Access audit carried out	L. Tyler	08.07.21	08.07.21

<b>Slips and trips</b>	Staff and visitors may be injured if they trip over objects or slip on spillages.	General good housekeeping is carried out. All areas well lit. No trailing leads or cables. Staff keep access to and clinic areas clear and uncluttered allowing safe access to couch. Machines are set up and ready prior to patient entering the clinic room. There are no stairs in the building. Spillages to be cleaned immediately	Regular cleaning checks by Betterclean, carried out	All staff, ME to monitor		
<b>Fire</b>	Staff, patients, on-site contractors if any	Evacuation procedure followed Fire alarms tested weekly and fire extinguishers checked yearly Fire assembly point is available	Walk around the Hub for all staff as a reminder of assembly point, fire plan, COSHH			Extinguishers serviced June 2022. PAT testing 25.02.2023
<b>Manual handling of portable ultrasound machine</b>	Staff risk injuries or back pain from handling mobile scanning units.	Machine is contained in a bag on wheels to reduce the need for lifting. Machine is of a size (cabin luggage) that is appropriate to be lifted and carried by one person.	Staff to report any changes to physical capacity which might make them more likely to sustain an injury while handling the machine.	All staff, ME to monitor		
<b>Injury to patient or staff during access to the couch</b>	Patient risks injury while climbing on to the couch. Staff injury in supporting a patient to access the couch.	Rise and fall couches are used in all clinic rooms with the weight restriction being adhered to. Staff report any near misses or incidents that may result in injury to either party to management team in order for practice to be reviewed. Referral form gives information on additional mobility needs that patients may have and forms where 'mobility needs' are ticked, are returned to referral team for forwarding to the hospital where hoists are available.	New gynae couch in room 4. Footstool part of couch to be removed weekly and added at end of the week. Staff shown video on how to remove and replace. Sign stating 2 people minimum to remove footstool clearly placed on wall.	All staff, ME to monitor		Week commencing 27.02.2023
<b>Minor injuries or incidents of illness</b>	Staff and patients	First Aid kit in left hand kitchen cupboard and on shelf under Reception desk. Defibrillator installed on wall behind reception desk. 2 x trained first aiders who work full-time All clinic staff have Basic Life Support Skills training All staff have access to phones to call 999 in case of an emergency	Hayley first aid trained 17.02.2023 Vanessa to be trained 17.03.2023 Michaela and Zena still qualified as of 17.02.2023	ME	21.07.21	17.03.2023.

<p><b>Breach of patient confidentiality</b></p>	<p>Staff and patients, company reputation</p>	<p>Patient files are routinely closed between appointments with both the sonographer and clinical assistant responsible for ensuring this action takes place.  Patient DOB and full name checked prior to commencement of scan.  Secure computer systems are in place and the NHS policy and procedure for using IT equipment is followed i.e. the appointment results are returned to the appropriate surgery directly via Soliton minimising the transfer of information and subsequently the risk of a breach.  All office areas where confidential information is processed is only accessible by staff via a key card system.  All desks are cleared and information either placed in lockable drawers and filing cabinets or shredded if not needed to be maintained.</p>	<p>Lockable drawer placed in Reception for accident book, fire log book and patient data</p>	<p>All staff, ME to monitor</p>		<p>06.02.2023</p>

<p><b>Health and hygiene, infection Control including risk of COVID-19</b></p> <p><b>Change of cleaning contractor has resulted in poor cleaning standard 30.09.22</b></p>	<p>Staff and patients</p>	<p>All toilets have hand wash, sanitiser and hand towels for hand hygiene.  All bins are emptied daily in clinic rooms and toilets  Good hand hygiene followed according to infection control policy.  Sufficient couch roll is available in clinic rooms and is always and changed and disposed of after each scan.  Couch and probe cleaned with appropriate cleaning materials after each scan.  Fresh PPE (gloves, apron) is used for each patient and disposed of between patients.  Masks are medical grade and changed twice a day or if they get wet.  Clinic rooms are cleaned daily and between each patient.</p> <p>Patients attend appointments alone and politely asked to wear a mask for the length of the appointment. Now patient and staff choice.  <b>Additional Infection Control risk assessment to be followed</b>  <b>New cleaning contractor is being sourced</b></p>	<p><b>See cleaning folder from new cleaning company. COSHH sheets in cupboard under the sink.</b></p> <p><b>Walk around during February 2023 reminding all staff re first aid, fire alarms, COSHH, product sheets, PPE (see attached). Risk assessments now available in admin office.</b></p>	<p>All staff, ME to monitor</p>	<p>Dec 2022-waste removal company now employed to clear rubbish each day.  Yellow bin bags to be used.</p>	<p><b>Cleaning contract set up. Regular checks carried out. Sanitary bins emptied every 4 weeks (Kernow Clinical)</b></p>
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<p><b>Inadequate care of patients</b></p>	<p>Patients, staff could be subjected to harsh treatment, company reputation</p>	<p>Patient DOB and full name checked prior to commencement of scan including confirmation of reason for scan.  Clear instructions are given regarding steps involved in scan in order to reassure patient.  Modesty and dignity is maintained as door is always closed during appointments, privacy curtain is in place and adequate time is given to patients for changing and readying themselves before and after the scan.  Two members of staff are available in clinics to ensure appropriate support for any patients who may experience distress.  Clear instructions for next steps i.e. GP appointment are given and the surgery is informed if the patient might require further support. All details are recorded on Soliton.  Complaints policy and procedure in place with updated learning points.  Regular 1:1s with staff ensure that they are supported to offer patients the best care possible and identify any reasons why this would not be the case.</p>		<p>All staff, ME to monitor, through patient feedback</p> <p>Learning points from recent complaint being raised – LT, ME, KS</p>	<p>Next staff meeting</p>	
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