

# 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>

To get an interactive version of this template go to <http://www.hse.gov.uk/risk/risk-assessment-and-policy-template.doc>

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

**Company name: Korus Health**

**Date of risk assessment:** 30.08.2023 30.08.2024 **30.08.2025** **15.11.2025**

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	Elearning for Health mandatory training	ME	Rolling programme	Monthly checks
<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		
<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	Reminders to HCAs to carry out daily checklists of room for safety before start of clinic	All staff, MW, operations manager to monitor	30.11.2025	
<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				Fire assembly point erected

<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. <b>Limiting use of portable machines by replacing with static in most locations</b>	Staff to report any changes to physical capacity which might make them more likely to sustain an injury while handling the machine.	All staff, MW 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. <b>Multiple reminders to referrers about patient ,mobility</b>	Emails to PMB team	All staff, JP – office manager, MW to monitor		
<b>Minor injuries or incidents of illness</b>	Staff and patients	First Aid kits in kitchen area 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				

<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>All staff, JP, LT to monitor</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.  Individuals who suspect that they may have contracted COVID-19 are advised by signage on surgery doors not to enter but to return home and contact 111 instead.  Patients attend appointments alone and wear a mask for the length of the appointment.  All staff informed by email on updated advice from Department of Health.  <b>Infection control policy updated and shared at staff meetings</b></p>	<p><b>Cleaning specifications and agreement to be added to premises folder by ME</b></p>	<p>All staff, ME to monitor</p>		<p>Cleaning checklists in use and cleaning contract set up  New contractor in place 1 March 2025</p>
--	---------------------------	---	--	---------------------------------	--	--

<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>	
---	--	---	--	--	---------------------------	--