

## CIPHER Medical Standard Risk Assessment Form

Person Completing:	Adam Howell	Role/Title:	Logistics Team Leader/H&S Officer	Date:	02/02/2023
Review required on or before:	02/02/2024	Director Responsible:	Andrew Thomas		
Task/Hazard/Practice being Risk Assessed:	Closed Road Events (no open water): E.g. Running, Duathlon				

### 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

## 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

	Likelihood score				
Impact 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
<b>Preventative Measures to be Taken or Planned</b>	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

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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
Standard Ambulance Operations	MEAN SCORE 2	The risks from standard ambulance operations at these events remain the same- see AMBULANCE OPERATIONS RISK ASSESSMENT.	MEAN SCORE 3	MEAN SCORE 6	See AMBULANCE OPERATIONS RISK ASSESSMENT.	None at present	AH		
Fire- medical treatment facility	1	Fire in a medical treatment tent has the potential for catastrophic loss of life due to the presence of oxygen and potentially immobile patients insitu.	5	5	Tent professionally erected by event organiser. Fire extinguishers provided. Staff to be given fire procedure during briefing. Tent access/egress to be unobstructed.	None at present	AH		
Buggy accident	1	In the rare event of serious accident the results could be catastrophic or life-changing. Risk to pedestrians- particularly small children.	5	5	Buggy driver to be suitably qualified. Driver to ensure familiarisation with the vehicle prior to event start. Driver to use appropriate speed for conditions and crowd levels.	None at present	AH		
Slips, trips and falls	3	Uneven ground, unpredictable weather conditions, the potential for slips, trips and falls leading to minor injuries such as wrist and ankle sprains, cuts and bruises.	2	6	Staff to wear suitable footwear with good grip to soles. Uniform to be worn at all times. No running/horseplay.	None at present	AH		
Poor lighting	2	Poor lighting or fading daylight has the potential to increase the risk of slips, trips and falls. It also increases the likelihood of cycle or vehicle accidents.	3	6	Written event medical plans take the timing of the events and the likelihood of overrun into account. Events overnight must be risk assessed for lighting conditions. Vehicle movements in the dark minimised. Cycle response use in the dark avoided where possible. Hi-viz clothing to be worn at all times. Sensible footwear to be worn at all times. Torches issued.	None at present	AH		
Extremes of temperature	1	The nature of "extreme" events means they will take place all year round in extremes of weather. The decision whether to run the event is determined by the event organiser per their risk assessment, however this does not absolve CIPHER Medical's duty to its own staff. Staff are at potential risk of extremes of temperature/sun exposure. The risk of staff developing conditions such as hypo/hyperthermia is low. Greatest risk is from sunburn and dehydration.	3	3	Prior to the event the event manager must monitor the weather forecast for 2 weeks prior <a href="http://www.metoffice.gov.uk">www.metoffice.gov.uk</a> <a href="https://www.bbc.co.uk/weather">https://www.bbc.co.uk/weather</a> . Staff should maintain a common-sense approach to weather. <b>Temp 6°C or lower-</b> Staff to be informed to bring multiple layers to wear under uniforms. Non-uniform warm hats acceptable. Thick gloves advised. Hot drinks provided. Event manager to ensure staff rotated through warm areas/vehicles when required. Staff to keep vehicle engines running to run heater where required. <b>Temp 7-18°C</b> – Normal uniform per policy. <b>Temp 19-25°C</b> – Normal uniform to be available. Staff advised to wear caps/hats and sun cream. Staff to be rotated through shade and cooler areas.	None at present	AH		

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					Temp 26°C and above – Normal uniform to be available. Staff advised to wear caps/hats and sun cream. Staff to be rotated through shade and cooler areas. Event manager to ensure continuous supply of bottled water to staff in outlying areas away from main refreshment areas.				
Lightning	1	Risk of lightning strike is rare but potentially fatal.	5		If lightning is detected or seen staff to report this to the event manager. Witnessed lightning in event area then staff to take shelter in tents or vehicles. Staff are not to be in contact with the metal structures of tents. If shelter can't be found and lightning is on site then staff should crouch close to the ground with elbows on knees in the open, not under trees. Lightning will strike the nearest high object, such as a tree or telegraph pole.	None at present	AH		
High wind	2	CIPHER Medical is often requested to provide medical treatment facilities or first aid tents year-round in all weather conditions. There is a risk of moderate injury to staff or the public if a tent, marquee or flag was to blow down in high wind.	3	6	Wind speeds are often monitored at large events. Event manager should check with on-site marquee provider appropriate wind speeds for action for each marquee. All gazebos and tents to be securely pegged, weighted and strapped where possible. <b>0-12mph- NORMAL- No action</b> <b>13-18mph- Moderate- Raises dust, loose paper; Small branches moved-</b> Event manager to monitor wind speed (estimated where required) and request reports from/assess other areas of site where marquee, tents or flags are located. <b>19- 23mph- Fresh- Small trees begin to sway; Crested wavelets form on inland waters-</b> Additional ratchet straps where possible to be secured with ground spikes or weights (25kg+). Flags to be removed. <b>24- 32mph- Strong- Large branches in motion; Whistling heard in telephone wires; Umbrellas used with difficulty</b> - Event manager to order gazebos to be prepared to be dropped if any sign of movement or failure. Staff to immediately report any high speed gusts or abnormal tent movements. Event manager to re-deploy cover for treatment to be provided in vehicles instead of gazebos <b>32-38mph – Near Gale- Whole trees in motion; Inconvenience felt walking against the wind-</b> All gazebos must be dismantled. Event manager to meet with event safety officer to discuss evacuation contingencies. <b>39-46mph – Gale- Twigs break off trees; Wind generally impedes progress; Mobile homes may shake-</b> Event	None at present	AH		

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					manager to discuss event cancellation point with safety officer. If event is to continue staff to be redeployed to buildings or vehicle based. <b>47-54mph – Strong Gale- Slight structural damage occurs; Mobile homes, sheds, roofs, lanais, and RV's suffer minor damage-</b> Event manager to consider withdrawal of medical cover from event if event organiser wishes to continue. Event manager to contact another on-call senior manager for advice.				
Terrorism	1	UK threat level at time of risk assessment is SEVERE. Although the risk is low CIPHER Medical provides UK wide medical cover at high profile, crowd events which could be considered potential targets.	5	5	Staff to be briefed on site security measures. Staff to report ANY suspicious activity to event manager, site security or per procedure in event emergency plan. In the event of a major incident as a medical service CIPHER Medical staff to follow the instructions as required by statutory emergency services.	None at present	AH		
Medical Gases	1	Both oxygen and Entonox aid combustion	4	4	All clinical staff using medical gases are appropriately trained. All gases stored appropriately in vehicle cupboards.	None at present	AH		
Comms failure	2	Communications failure has the potential to delay response to an incident or assistance to a staff member at risk or in danger.	3	6	Staff to be conversant in Radio Procedures Radio Tests on the Event Date Alternative Communications via mobile telephone to be available Carry out regular radio tests with all radios when no communication with a staff member or resource within the last 30 minutes.	None at present	AH		
Signature of completing manager			Date		Designation				
A Howell			02/02/2023		Logistics Team Leader / Health and Safety Officer				
Signature of Responsible Director			02/02/2023		CEO/Consultant Paramedic				
D. J. O.									
Due for Review			02/02/2024						



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