

**RISK ASSESSMENT POLICY/REPORT**

**Date**: 5 October 2017

**Review Date:**  5 October 2018

Omega Care Group is fully committed to the creation of a safe and healthy working and living environment for all staff, its client group of young people, and visitors.

All staff receive appropriate levels of training and support to ensure competency and effectiveness of response. This includes the identification and control of hazards and risks that may arise.

All young people on their induction will be made fully aware of, and participate in, emergency evacuation procedures. They are also made aware of their responsibility to help maintain an environment which is safe and healthy for them and others. Appropriate levels of support are offered to facilitate this.

Omega Care Group displays, as required under Health and Safety regulations, a Health and Safety At Work poster in the office of each unit, completed in full.

Omega Care Group maintains a comprehensive first aid provision boxed and restocked as necessary in each unit office. Al staff receive basic first aid training. Accident books and all appropriate recording and reporting forms are held in secure, sealed systems within each unit.

**Context**

**Risk Assessment**

This is a practical process whereby competent and experienced individuals examine what could potentially cause harm to people in the carrying out (delivery) of the work of the company. It is then possible to evaluate whether there are sufficient safeguards currently in place or if it is necessary to add more to prevent harm. The aim of the process is to ensure that no one gets hurt or becomes ill. Omega Care Group will carry this out by determining whether a hazard is significant and whether it is adequately addressed and controlled so that the remaining risk is small.

**Hazard:** Something with the potential to cause harm.

(inherent in this action of harm is severity in terms of damage and / or injury and the numbers affected).

**Risk:** The likelihood of that potential harm from the hazard being realised.

**Methodology**

Omega adopts a practical and pragmatic approach to assessing risk which embeds it within organisational culture as an integral element of its working practices. Omega follows the ‘5 steps to Risk Assessment’ process as outlined in the guidance procedures by the Health and Safety Executive.

**Step 1: Identify the Hazards**

● An initial walk through and overview identifying categories and recording any obvious hazards.

● An in-depth assessment of potential hazards (including unseen ones e.g. fire and carbon monoxide).

● Frame the findings on recording sheets.

**Step 2: Identify who may be at risk**

● Identify who might be harmed and how. These include staff, young people in residence and visitors (including social workers, medical staff etc.).

● Identify if there are any specific circumstances that may place an individual at greater risk e.g. mobility issues; pregnancy.

**Step 3: Evaluate the risks**

An assessment of the likelihood of each potential hazard causing harm. This evaluation will determine whether more needs to be put into place to reduce the risk.

It will also establish whether the risk remaining after the additional precautions have been instituted is high / medium / or low. The aim of the process is to establish whether existing controls are adequate and proportionate or whether additional precautions should be enacted.

**Step 4: Record Findings**

All findings and responses to these are recorded, dated, signed and kept as a permanent record. These form an ongoing record and overview of the Risk Assessment process and ensure rigour throughout its application.

Omega can demonstrate through its practices that it has carried out proper and proportionate checks, taking into account all contributory factors that impact on the level of risk.

**Step 5: Review and Revise**

All Risk Assessment processes will be reviewed on a regular basis in line with maintaining best practice. There will be an immediate review if there are any specific changes introduced that may impact on the level of risk. These could include alterations to premises, new working practices or pregnancy in staff member or young person.

**Risk Assessment: Flow Chart**

**Walk Through**

**Review and Revise**

**New control measures introduced**

**Assess risk control measures necessary**

**Monitor effectiveness**

**No**

**Yes**

**Existing precaution adequate**

**Evaluate Risk**

**High / Medium / Low**

**Evaluate likelihood**

**High / Medium / Low**

**Evaluate hazards**

**High / Medium / Low**

**Identify who may be affected**

**Identify and list hazard**

**Risk Assessment Report**

Omega Care Group’s operational framework is based on assessing the potential harm that a hazard may cause and the likelihood of this harm occurring. The level of hazard and of likelihood are each allocated a value within one of 3 categories whereby:

**HAZARDS** are defined as:

1. Extremely harmful (may cause death, major injury and or major damage).
2. Harmful (resulting in an over 3-day injury, damage to environment).
3. Slightly harmful (minor 1st aid injury, minor damage).

**LIKELIHOOD** is defined as:

1. Highly likely (extremely likely to occur – probable).
2. Likely (frequent, often or likely).
3. Unlikely (slight chance – uncommon).

This generates a grid which plots **HARM** against **LIKELIHOOD** and provides a **RISK** value.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Extremely Harmful 1** | **Harmful 2** | **Slightly Harmful 3** |
| **Highly Likely - A** | **Unacceptable - U** | **High - H** | **Medium - M** |
| **Likely - B** | **High - H** | **Medium - M** | **Low - L** |
| **Unlikely - C** | **Medium - M** | **Low - L** | **Trivial - T** |

**Actions**

A1: - U – Unacceptable: - Requires an **IMMEDIATE** response to manage risk – all other activities halted.

A2 / B1: - H – High: - Priority, urgent action must be taken to reduce the severity and / or likelihood of the risk.

A3 / B2 / C1: - M – Medium: - Must receive priority attention to reduce the level of risk.

B3 / C2: - L – Low: - But must receive attention to verify if risk can be reduced and / or managed more effectively.

C3: - T – Trivial: - Lowest priority but will require ongoing monitoring.

**Omega Care Group**

**Risk Assessment Report:**  **Date:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Operational Check** | **MET – Y/N** | **Not MET: Identified Risk** | **Risk Rating** | **Action: Additional Safeguards** | **Review Date** |
| Fire exits functional |  |  |  |  |  |
| Escape routes clear /unobstructed |  |  |  |  |  |
| Fire doors operational |  |  |  |  |  |
| Fire blanket in place |  |  |  |  |  |
| Extinguishers functional |  |  |  |  |  |
| Fire warning system operational |  |  |  |  |  |
| Emergency lighting operational |  |  |  |  |  |
| Emergency exit signs in place |  |  |  |  |  |
| Emergency whistle in place |  |  |  |  |  |
| Emergency flashlight in place |  |  |  |  |  |
| Evacuation procedure on display |  |  |  |  |  |
| Smoke detectors operational |  |  |  |  |  |
| CO detector operational |  |  |  |  |  |

**Omega Care Group**

**Risk Assessment Report: Date:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Operational Check** | **MET – Y/N** | **Not MET: Identified Risk** | **Risk Rating** | **Action: Additional Safeguards** | **Review Date** |
| Harmful substances stored in COSHH cupboard - locked |  |  |  |  |  |
| Sockets undamaged |  |  |  |  |  |
| Electrical leads undamaged |  |  |  |  |  |
| Electrical equipment in good condition: PAT compliant |  |  |  |  |  |
| Equipment off when not in use |  |  |  |  |  |
| Tumbler drier ‘de-fluffed’ |  |  |  |  |  |
| No build-up of waste |  |  |  |  |  |
| Utility shut off valves operational |  |  |  |  |  |
| Flour condition clean, dry, no trip hazards |  |  |  |  |  |
| Stairs clear, undamaged |  |  |  |  |  |
| Door closes functional |  |  |  |  |  |
| Access – no trip hazards |  |  |  |  |  |
| Egress – no trip hazards |  |  |  |  |  |
| Pathways clear |  |  |  |  |  |
| Water temperature safe maximum |  |  |  |  |  |

**Omega Care Group**

**Risk Assessment Report: Date:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Operational Check** | **MET – Y/N** | **Not MET: Identified Risk** | **Risk Rating** | **Action: Additional Safeguards** | **Review Date** |
| All surfaces clean |  |  |  |  |  |
| Sanitary ware clean |  |  |  |  |  |
| Waste issues addressed |  |  |  |  |  |
| Cooker use protocol in place |  |  |  |  |  |
| Knife use protocol in place |  |  |  |  |  |
| CCTV operational |  |  |  |  |  |
| Unit mobile phone operational |  |  |  |  |  |
| Lone working policy operational |  |  |  |  |  |
| Stress R.A. in place |  |  |  |  |  |
| Office door secure/lockable |  |  |  |  |  |
| Furniture in good repair |  |  |  |  |  |
| Procedures for legionella followed |  |  |  |  |  |
| Visitors book current |  |  |  |  |  |
| Completed By:  Signed Off: |  | Date:  Date: |  |  |  |

**Omega Care Group**

**Activity Risk Assessment:**

**Date: Duration (Est):**

**Staff: Young Person(s):**

**Transport method: Insurance held:**

**Description of Activity:**

**Specific Support Needs:**

**Safeguards in Place: (Include reference to Risk Assessment from activity provider)**

**Signed Off By: Role: Date:**

**Omega Care Group**

**Risk Assessment Report: Date:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Operational Check** | **MET: Y/N** | **Not MET: Identify Risk** | **Risk Rating** | **Action: Additional Safeguards** | **Review Date** |
| Fire exits functional | **Y** |  |  |  |  |
| Escape routes clear/unobstructed | **Y** |  |  |  |  |
| Fire doors operational | **Y** |  |  |  |  |
| Fire blanket in place | **Y** |  |  |  |  |
| Extinguishers functional | **Y** |  |  |  |  |
| Fire warning system operational | **Y** |  |  |  |  |
| Emergency lighting operational | **Y** |  |  |  |  |
| Emergency exit signs in place | **Y** |  |  |  |  |
| Emergency whistle in place | **N** | **Whistle Missing** | **C2** | **Replace Whistle** | **06.01.2017** |
| Emergency flashlight in place | **N** | **Flashlight Missing** | **C2** | **Replace Flashlight** | **06.01.2017** |
| Emergency procedures on display | **Y** |  |  |  |  |
| Smoke detectors operational | **Y** |  |  |  |  |
| CO detector operational | **Y** |  |  |  |  |

**Omega Care Group**

**Risk Assessment Report:** Station Road **Date:** 30.01.2017

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Operational Check** | **MET: Y/N** | **Not MET: Identified Risk** | **Risk Rating** | **Action: Additional Safeguards** | **Review Date** |
| Harmful substances stored in COSHH cupboard - locked | **Y** |  |  |  |  |
| Sockets undamaged | **Y** |  |  |  |  |
| Electrical leads undamaged | **Y** |  |  |  |  |
| Electrical equipment in good condition: PAT compliant | **Y** |  |  |  |  |
| Equipment off when not in use | **Y** |  |  |  |  |
| Tumbler drier ‘de-fluffed’ | **Y** |  |  |  |  |
| No build-up of waste | **Y** |  |  |  |  |
| Utility shut off valves operational | **Y** |  |  |  |  |
| Floor condition clean, dry, no trip hazards | **Y** |  |  |  |  |
| Stairs clear, undamaged | **Y** |  |  |  |  |
| Door closes functional | **Y** |  |  |  |  |
| Access – no trip hazards | **Y** |  |  |  |  |
| Egress – no trip hazards | **Y** |  |  |  |  |
| Pathways clear | **Y** |  |  |  |  |
| Water temperature safe maximum | **N** | **Temperature requires lowering; No immediate risk** | **C2** | **Temperature to be adjusted** | **06.02.2017** |

**Omega Care Group**

**Risk Assessment Report:** Station Road **Date:** 30.01.2017

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| --- | --- | --- | --- | --- | --- |
| **Operational Check** | **MET: Y/N** | **Not MET: Identified Risk** | **Risk Rating** | **Action: Additional Safeguards** | **Review Date** |
| All surfaces clean | **Y** |  |  |  |  |
| Sanitary ware clean | **Y** |  |  |  |  |
| Waste issues addressed | **Y** |  |  |  |  |
| Cooker use protocol in place | **Y** |  |  |  |  |
| Knife use protocol in place | **Y** |  |  |  |  |
| CCTV operational | **Y** |  |  |  |  |
| Unit mobile phone operational | **Y** |  |  |  |  |
| Lone working policy in place | **Y** |  |  |  |  |
| Stress R.A. in place | **Y** |  |  |  |  |
| Office door secure/lockable | **Y** |  |  |  |  |
| Furniture in good repair | **Y** |  |  |  |  |
| Procedures for legionella followed | **N** | **Procedure not in place yet** | **C2** | **Procedure developed/delivered** | **06.02.2017** |
| Visitors book current | **Y** |  |  |  |  |
| Completed By: Tony Mathewson  Signed Off By: J. Lancaster |  | Date: 30.01.2017  Date: 30.01.2017 |  |  |  |

**Young Person’s Risk Assessment Procedure**

Omega Care Group undertakes an individual Risk Assessment of every young person when they begin their relationship with the service

The Risk Assessment is aimed at supporting and enabling the young person to manage any behaviours that have, or may, put them or others at risk. The process is developed using information obtained from the relevant social worker, referral documentation, input from other sources (e.g. family members, if appropriate) and through direct interaction with the young person themselves.

Triggers, specific events and reasons leading to particular behaviours are identified and addressed through implementation of a range of safeguards. These may include engaging in specific activities, agreed contact times, provision of mobile phone, etc. The individual young person is proactively encouraged and supported in addressing behaviours that may put them in positions of vulnerability and / or risk.

The risk attached to a particular behaviour is assessed on a rating scale of 1 – 10, where 1 is minimal / trivial and 10 requires **IMMEDIATE** action. The frequency and any pattern attached to the behaviours is factored in, as this impacts on the safeguards in place.

If the risk of a particular behaviour is assessed as being low (minimal / trivial) they may be no need to implement further action at that time. However the situation should continue to be monitored, reviewed and amended as an identified need emerges.

If a behaviour generates a high-risk rating, all possible further actions to reduce this must be put in place immediately, recorded, monitored and reviewed. Additional safeguards should be discussed (wherever possible) with the young person, and a positive engagement in managing their own levels of risk actively promoted.

All Risk Assessments are reviewed on a continuous cycle. The individual assessment of risk is a fluid process, responding to change, development and the identification of additional factors that impact on behaviour. All information, in the form of incident reports, concern forms, key work sessions and additional information from other sources are cross referenced to the corresponding behaviours category. This creates a reference context, whilst enabling the Risk Assessment document to remain concise and accessible with all pertinent information recorded.

Risk ratings for any particular behaviour(s) shown may reduce or increase to reflect the current status of the individual. The specific reasons and rationale for the adjustment should be clearly explained and recorded. This would be followed by a period of close monitoring, information sharing and a short-term review.

**Young Person’s Activity Form**

Young people may, as an element of ongoing work, attend specific activities with a member (s) of staff. This could include go-carting, use of climbing walls etc. Prior to the activity taking place an Activity Risk Assessment should be completed in full. This addresses transportation, any specific issues around the individual young person and the risks associated with the activity itself. Facilities which offer activities with a level of risk associated with it (e.g. climbing walls) will have in place an in-house Risk Assessment. Staff should reference this within the activity form and maintain a copy of it within the unit. All activities with a measurable level of risk attached should be agreed and signed off by manager / director.

**RISK ASSESSMENT**  

**NAME OF YOUNG PERSON:**

**STAFF MEMBER COMPLETING ASSESSMENT:**

**DATE ASSESSMENT COMPLETED:**

**RISK RATING:**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |

**NO RISK LOW LOW TO MEDIUM MEDIUM MEDIUM TO HIGH HIGH**

**ABSCONDING:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **TRIGGERS**  (*Reasons for behaviour, etc)* | **IMPACT OF BEHAVOIUR** | **SAFEGUARDS IN PLACE** | **RISK RATING (1 to 10)** | **FREQUENCY**  (*daily, weekly, monthly, etc)* | **FURTHER ACTION NECESSARY TO REDUCE RISK**  *(only for high risk, low risk no further action)* | **REVIEW DATE** | **CROSS REFERENCED** *(information to back up risk rating)* |
|  |  |  |  |  |  |  |  |

**FIRE STARTING:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **TRIGGERS OR SCENARIOS**  (*Reasons for behaviour, etc)* | **IMPACT OF BEHAVOIUR** | **SAFEGUARDS IN PLACE** | **RISK RATING (1 to 10)** | **FREQUENCY**  (*daily, weekly, monthly, etc)* | **FURTHER ACTION NECESSARY TO REDUCE RISK**  *(only for high risk, low risk no further action)* | **REVIEW DATE** | **CROSS REFERENCED** *(information to back up risk rating)* |
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**AGGRESSIVE/VIOLENT BEAHVIOUR (in home, towards staff, other YPs, etc.)**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **TRIGGERS OR SCENARIOS**  (*Reasons for behaviour, etc)* | **IMPACT OF BEHAVOIUR** | **SAFEGUARDS IN PLACE** | **RISK RATING (1 to 10)** | **FREQUENCY**  (*daily, weekly, monthly, etc)* | **FURTHER ACTION NECESSARY TO REDUCE RISK**  *(only for high risk, low risk no further action)* | **REVIEW DATE** | **CROSS REFERENCED** *(information to back up risk rating)* |
|  | . |  |  |  |  |  |  |

**AGGRESSIVE/VIOLENT BEAHVIOUR (in the community, etc.)**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **TRIGGERS OR SCENARIOS**  (*Reasons for behaviour, etc)* | **IMPACT OF BEHAVOIUR** | **SAFEGUARDS IN PLACE** | **RISK RATING (1 to 10)** | **FREQUENCY**  (*daily, weekly, monthly, etc)* | **FURTHER ACTION NECESSARY TO REDUCE RISK**  *(only for high risk, low risk no further action)* | **REVIEW DATE** | **CROSS REFERENCED** *(information to back up risk rating)* |
|  |  |  |  |  |  |  |  |

**WELLBEING (Physical and emotional)**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **TRIGGERS OR SCENARIOS**  (*Reasons for behaviour, etc)* | **IMPACT OF BEHAVOIUR** | **SAFEGUARDS IN PLACE** | **RISK RATING (1 to 10)** | **FREQUENCY**  (*daily, weekly, monthly, etc)* | **FURTHER ACTION NECESSARY TO REDUCE RISK**  *(only for high risk, low risk no further action)* | **REVIEW DATE** | **CROSS REFERENCED** *(information to back up risk rating)* |
|  |  |  |  |  |  |  |  |

**SEXUAL EXPLOITATION**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **TRIGGERS OR SCENARIOS**  (*Reasons for behaviour, etc)* | **IMPACT OF BEHAVOIUR** | **SAFEGUARDS IN PLACE** | **RISK RATING (1 to 10)** | **FREQUENCY**  (*daily, weekly, monthly, etc)* | **FURTHER ACTION NECESSARY TO REDUCE RISK**  *(only for high risk, low risk no further action)* | **REVIEW DATE** | **CROSS REFERENCED** *(information to back up risk rating)* |
|  |  |  |  |  |  |  |  |

**SEXUALISED BEHAVIOUR**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **TRIGGERS OR SCENARIOS**  (*Reasons for behaviour, etc)* | **IMPACT OF BEHAVOIUR** | **SAFEGUARDS IN PLACE** | **RISK RATING (1 to 10)** | **FREQUENCY**  (*daily, weekly, monthly, etc)* | **FURTHER ACTION NECESSARY TO REDUCE RISK**  *(only for high risk, low risk no further action)* | **REVIEW DATE** | **CROSS REFERENCED** *(information to back up risk rating)* |
|  |  |  |  |  |  |  |  |

**OFFENDING BEHAVIOUR**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **TRIGGERS OR SCENARIOS**  (*Reasons for behaviour, etc)* | **IMPACT OF BEHAVOIUR** | **SAFEGUARDS IN PLACE** | **RISK RATING (1 to 10)** | **FREQUENCY**  (*daily, weekly, monthly, etc)* | **FURTHER ACTION NECESSARY TO REDUCE RISK**  *(only for high risk, low risk no further action)* | **REVIEW DATE** | **CROSS REFERENCED** *(information to back up risk rating)* |
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**SUBSTANCE/ALCOHOL MISUSE**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **TRIGGERS OR SCENARIOS**  (*Reasons for behaviour, etc)* | **IMPACT OF BEHAVOIUR** | **SAFEGUARDS IN PLACE** | **RISK RATING (1 to 10)** | **FREQUENCY**  (*daily, weekly, monthly, etc)* | **FURTHER ACTION NECESSARY TO REDUCE RISK**  *(only for high risk, low risk no further action)* | **REVIEW DATE** | **CROSS REFERENCED** *(information to back up risk rating)* |
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**SELF HARM**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **TRIGGERS OR SCENARIOS**  (*Reasons for behaviour, etc)* | **IMPACT OF BEHAVOIUR** | **SAFEGUARDS IN PLACE** | **RISK RATING (1 to 10)** | **FREQUENCY**  (*daily, weekly, monthly, etc)* | **FURTHER ACTION NECESSARY TO REDUCE RISK**  *(only for high risk, low risk no further action)* | **REVIEW DATE** | **CROSS REFERENCED** *(information to back up risk rating)* |
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**DOMESTIC VIOLENCE**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **TRIGGERS OR SCENARIOS**  (*Reasons for behaviour, etc)* | **IMPACT OF BEHAVOIUR** | **SAFEGUARDS IN PLACE** | **RISK RATING (1 to 10)** | **FREQUENCY**  (*daily, weekly, monthly, etc)* | **FURTHER ACTION NECESSARY TO REDUCE RISK**  *(only for high risk, low risk no further action)* | **REVIEW DATE** | **CROSS REFERENCED** *(information to back up risk rating)* |
|  |  |  |  |  |  |  |  |

**OTHER IDENTIFIED RISKS**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **TRIGGERS OR SCENARIOS**  (*Reasons for behaviour, etc)* | **IMPACT OF BEHAVOIUR** | **SAFEGUARDS IN PLACE** | **RISK RATING (1 to 10)** | **FREQUENCY**  (*daily, weekly, monthly, etc)* | **FURTHER ACTION NECESSARY TO REDUCE RISK**  *(only for high risk, low risk no further action)* | **REVIEW DATE** | **CROSS REFERENCED** *(information to back up risk rating)* |
|  |  |  |  |  |  |  |  |