



Advice Note

- **Risk management is not as daunting as it may seem at first glance!**
- **It is not compulsory to use this approach! However, it does try to help you cover the main aspects of Health and Safety**
- **Training and advice is available, as the Occupational Health team can visit to help you.**

The management of health and safety risks is as integral to Clinical Governance as the management of clinical risks for ethical, moral, legal and financial reasons.

The aim of risk management is to:

- identify hazards,
- assess the potential risk to anyone who may be affected by them
- eliminate the hazard or control the risk
- record the assessment where the risk is considered significant (a legal requirement)
- monitor and review on a regular basis or when any aspect of the process changes.

The following risk assessment/audit tool has been designed specifically for use in Primary Care in all Practices. Assistance in using this tool and implementing control measures is available from the Occupational Health Service by contacting the service on

Tel: **01752 762116**

STRESS WARNING! Do not try to tackle this alone!
Talk to us first!
If you really can't wait – do it section by section!



Index	Page Numbers
Occupational Health & Safety Risk Assessment - General Practice.....	3
Section A – Organisational Arrangements.....	4
Section B – Questions to be Answered by 'Other Staff'	6
Section C – Welfare Arrangements.....	7
Section D – Equipment.....	8
Section E – Premises.....	10
Section F – COSHH (Chemical)	13
Section G – Control of Infection (Including COSHH - Biological).....	14
Section G (1) – Environmental	14
Section G (2) – Waste Disposal.....	15
Section G (3) – Sharps Handling	16
Section G (4) – Occupational Immunisations	17
Section G (5) – Equipment	18
Section G (6) – Decontamination and Disinfection.....	20
Section G (7) – Hand Hygiene	20
Section G (8) – Clinical Practice	21
Section G (9) – Vaccines	22
Section H – Manual Handling/Ergonomics.....	23
Section I – DSE	25
Section J – First Aid and Accident Reporting	27
Section K – Stress/Mental Health	28
Section L – FIRE	29
Section M – Electricity	31
Section N – Violence and Aggression.....	32
Section O – Training Records.....	34
Section P - Summary and Action Plan.....	35

Occupational Health & Safety Risk Assessment - General Practice



PRACTICE NAME		
ADDRESS		
TEL NO		FAX NO:
EMAIL ADDRESS		
DRs		
PRACTICE MANAGER		
OTHER STAFF (by job title)		
ATTACHED STAFF (by job title)		

Section A - Organisational Arrangements



To be completed by lead GP for Health and Safety and person with operational responsibility

Section A	Yes	No	N/A	Comments
1. Is one of the GP partners designated as taking the lead in health and safety?				If yes give name
2. Is the operational responsibility delegated to another person?				If yes give name and job title
3. Does the Practice have a health and safety policy?				If yes, can you locate it now? (See OH & S Manual section 2.1 for pro forma)
4. Is it reviewed and dated annually?				Give last date
5. Have all staff read it?				
6. Is a record kept that they have read it? (if applicable)				
7. Is the recommended HSE health and safety poster completed and clearly displayed? (or alternatively, have all staff been given individual leaflets?)				
8. Has the lead GP received training regarding health and safety responsibilities? If yes to Q8, list all topics covered				
9. Has the person with operational responsibility received formal health and safety training?				If yes, give course and date



Section A (Continued)	Yes	No	N/A	Comments
10. Are <u>ALL</u> new staff given H&S training at Induction?				Document in their personal record
11. Is H&S a regular agenda item in Practice/Staff Meetings?				
12. Are formal minutes of the meeting taken and later circulated?				
13. Are action points always followed up to completion i.e. is the audit loop closed?				
14. Do any staff work more than 48 hours per week over a period of 26 weeks?				If yes seek further advice from Occ. Health service
14. With reference to Q13 have the individuals concerned agreed to dis-apply the Working Time Regulations?				
15. Are special arrangements in place for: <ul style="list-style-type: none">• Pregnant staff?• Staff with a disability?• Young persons (between the age of 16 and 18 years)?				
16. Are there H&S arrangements in place for co-operation with attached staff and/or contractors?				
17. Do you use the Occupational Health service for pre-employment screening of new staff?				
18. Are you aware that for work related illness or illness that is having an effect on work, referrals may be made to the occupational physician for an independent medical opinion?				
19. Are any staff registered within the Practice?				(It is recommended that all new staff should be registered elsewhere, or if this is not possible that at least one GP is designated for staff and does not get involved with direct employment issues.)

Section B - Questions to be Answered by 'Other Staff' -AUDIT



Section B	Yes	No	N/A	Comments
1. Does the Practice have a health and safety policy?				
2. Are you familiar with its contents?				
3. Do you know what your responsibilities are for Health and Safety?				
4. Who has responsibility for H&S within the Practice?				
5. Were you given Induction training regarding H&S?				
6. Can you remember what was covered? (Please list)				
7. Have you received any H&S training since induction?				
8. Are you consulted about H&S problems / arrangements?				
9. If you had a concern over an H&S issue how would you raise that concern?				
10. Are there any H&S issues/concerns you would like to raise now?				

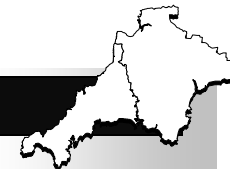
Section C - Welfare Arrangements



To be completed by lead GP for Health and Safety and person with operational responsibility

Section C	Yes	No	N/A	Comments
1. Do staff take adequate breaks?				
2. Are there adequate facilities for <ul style="list-style-type: none">● Rest?● Drinking water?● Making drinks?● Storage of outdoor clothes/valuables?● Toilets?● Handwashing facilities?				
3. Have there been any issues associated with the above in the last two years?				

Section D - Equipment



To be completed by lead GP for Health and Safety and person with operational responsibility

Section D	Yes	No	N/A	Comments
1. Is an inventory kept of all equipment?				
2. Are there any instances when equipment is misused? i.e. contrary to the purpose for which it was designed.				
3. If appropriate is the equipment calibrated regularly and records kept?				
4. Is each piece of equipment maintained regularly and records kept?				
5. Are there any mercury sphygmomanometers still in use?				
6. If yes to Q5 - Are spillage kits available?				
7. Are photocopiers located away from workstations to reduce noise and exposure to fumes?				
8. Is all lifting or moving equipment in good condition e.g. trolleys?				



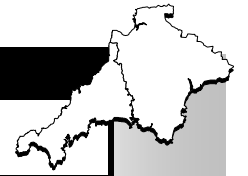
Section D (Continued)	Yes	No	N/A	Comments
9. Are fax machines, printers, binders, laminators and other office equipment in good condition?				
10. Are procedures for safely operating equipment accessible to staff e.g. removing jammed paper?				
11. Are there clear indications when equipment is switched on?				
12. Are there procedures to report faulty equipment?				
13. Have there been any incidents/near misses associated with equipment in the last two years				

Section E - Premises



To be completed by lead GP for Health and Safety and person with operational responsibility

Section E	Yes	No	N/A	Comments
1. If appropriate has an asbestos survey been undertaken and actioned where necessary?				
2. Are entrances and exits to and from work, free from obstruction and exit doors clearly marked?				
3. Are pedestrian/traffic routes separated in car park?				
4. Are any directional signs clear?				
5. Is external lighting adequate?				
6. Is information re opening times etc. clearly visible?				
7. Can the entrance to the building be clearly seen by passers-by?				
8. Can the entrance be clearly seen from the reception desk? If no, is a mirror placed to allow observation?				
9. Is the building generally in good repair?				
10. Are there any defects, which may cause slips/trips/falls?				
11. Is there any asbestos present within the buildings? If yes, has it been checked for safety?				



Section E (Continued)	Yes	No	N/A	Comments
12. Are wall thermometers present?				
13. Are stairs and walkways kept clear of boxes, equipment, cables and other obstacles?				
14. Is the tread on stairs in good condition and adequate to minimise slipping?				
15. Is the foot space on each stair adequate?				
16. Are handrails adequate and in a good state of repair?				
17. Are stairs in a good state of repair?				
18. Do stairs have anti- slip noses where required?				
19. Are floors clear of slip hazards e.g. extension cords, torn carpet, uneven surfaces etc.?				
20. Are walkways clear of trip hazards such as open drawers, boxes etc.?				
21. Are walkways and stairs wide enough?				
22. Does the heating system always provide a reasonable temperature for comfort?				
23. Is the heating boiler annually serviced (statutory requirement)?				
24. Is lighting suitable and sufficient generally?				



Section E (Continued)	Yes	No	N/A	Comments
25. Does the lighting in the work area allow staff to see their work easily?				
26. Is there adequate ventilation throughout the work area?				
27. Is glare and excessive brightness minimised in work area?				
28. Are all light fittings in good working order i.e no flickering lights etc.?				
29. Are noise levels appropriate?				
30. Are windows accessible for ease of cleaning, opening and closing?				
31. Can windows be locked?				<i>* Keys must be readily accessible</i>
32. Have there been any incidents/near misses associated with the above in the last two years?				

Section F - COSHH (Chemical)



To be completed by lead GP for Health and Safety and person with operational responsibility

Section F	Yes	No	N/A	Comments
1. Do you have a COSHH policy?				* refer to COSHH guidelines in section 2.10 of this Manual
2. Is an inventory of chemicals maintained?				
3. Are hazard data sheets available for all chemicals?				
4. Have all hazardous substances been risk assessed?				
5. Are all hazardous substances correctly labelled?				
6. Are chemicals stored correctly and out of reach of children?				
7. Are chemicals used appropriately?				
8. Are chemicals disposed of appropriately?				
9. Are spillage procedures in place?				
10. Have there been any incidents/near misses associated with the above in the last two years?				



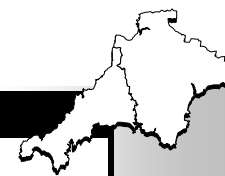
Section G - Control of Infection (Including COSHH - Biological)

To be completed by lead GP for Health and Safety and person with operational responsibility

Section G (1) Environmental	Yes	No	N/A	Comments
1. Are all general areas clean?				
2. Are clinical rooms clean?				
3. Is the clinical room free from inappropriate items of equipment?				
4. Are all sterile products above floor level?				
5. Are sluice areas clean and free from spillage?				
6. Are kitchens clean and not used for specimen/medical equipment storage?				
7. Are toys wipeable or machine washable and in a good state of repair?				
8. Do examination/treatment room couches have wipeable surfaces?				
9. Is disposable paper used to protect examination/treatment room couches?				
10. Is the paper changed after each patient?				
11. Are cover blankets changed daily or if contaminated?				
12. Is cleaning equipment (mops, buckets and cloths) designated for use and stored, clean, dry and inverted?				
13. Are surfaces easily cleaned and in a good state of repair?				



Section G (2) - Waste Disposal	Yes	No	N/A	Comments
1. Do you have a clinical waste policy and is it known by staff?				
2. Are foot-operated bins in working order in clinical areas, toilets and sluices?				
3. Are yellow bags used for storage of clinical waste?				
4. Are waste bags for disposal less than 2/3rds full and securely tied?				
5. Is household waste stored in black bags and securely tied?				
6. Is clinical waste stored in a designated area prior to disposal?				
7. Is the storage area for clinical waste locked and inaccessible to unauthorised persons and pests?				
8. Is clinical waste and domestic waste correctly segregated?				
9. Is the storage area cleaned at least weekly and immediately following a spill?				
10. Are bags labelled with source (Practice name) in accordance with Duty of Care?				
11. Is appropriate protective clothing available for staff who handle clinical waste bags?				
12. Is the collection of clinical waste undertaken at least weekly with a registered company & disposed of by incineration?				

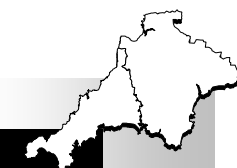


Section G (3) - Sharps Handling	Yes	No	N/A	Comments
1. Are sharps boxes available for use and conform to BS 7320 and UN 3291?				
2. Are those in use less than 2/3rds full with no protruding sharps?				
3. Is each box correctly assembled with lid secure?				
4. Is the sharps box labelled with point of source (the Practice)				
5. Are sharps disposed of <u>DIRECTLY</u> into a sharps box following use of equipment?				
6. Are staff aware of the needlestick/contamination policy and procedure to follow in the event of an accident?				
7. Are sharps boxes stored above floor level and safely out of reach of children and visitors?				
8. Are small (community size) sharps boxes sealed when 3/4 full and not reused?				



Section G (4) - Occupational Immunisations	Yes	No	N/A	Comments
Are all staff in patient or clinical contact, immunised or screened Against:				
1. Hepatitis B				
2. MMR				
3. TB				
4. Varicella				
5. Diphtheria, Hib, Pertussis, Polio, Tetanus				
6. Do any members of staff perform exposure prone invasive procedures?				
7. Is there a system in place for immunisation recall/clearance				

- See Occupational Immunisation Guidelines - Section 1.4 in this manual

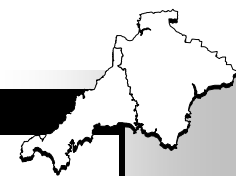


Section G (5) – Equipment - Clinical

Indicate method of sterilisation used in the practice

● Hot air oven	
● Water boiler	
● Front loading bench top autoclave e.g. Little Sister	
● Top loading bench top autoclave e.g. Prestige	
● Other (please state)	

	Yes	No	N/A	Comments
1. Are single use items re-used?				
2. Is sterilising equipment on a maintenance programme in accordance with HTM 2010?				
3. Is sterilising equipment checked weekly and recorded in accordance with HTM 2010?				
4. Is sterilising equipment checked and recorded daily/Sessionally in accordance with HTM 2010?				
5. Is sterilising equipment clean and in a good state of repair?				
6. Are instruments unwrapped and not placed in pouches unless the steriliser incorporates a pre-sterilising vacuum cycle?				
7. Are water boilers used for instruments requiring sterilisation?				
8. Are clean and sterile instruments stored in sealed containers?				
9. Are contaminated instruments stored safely prior to sterilisation?				

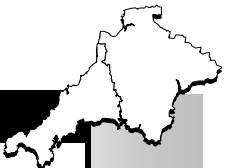


Section G (5) (Continued)	Yes	No	N/A	Comments
10. Are staff aware of the need to complete decontamination certificates prior to sending equipment for maintenance & repair?				
11. Is equipment sterilised by outside contractors 'in date'?				
12. Is there a system in place to accommodate breakdown and repair of medical equipment?				
13. Are ultrasonic machines clean and stored dry overnight?				
14. Are multi-use ointments and creams single patient use or dispensed in a manner to prevent contamination?				
15. Are examination specula sterilised between use?(medium risk)				
16. Are sterile specula used for IUCD insertion (high risk)				
17. Are instruments required to be sterile at the point of use, pre-packed or sterile autoclaved immediately prior to use? (High risk)				
18. Are sigmoidoscopes and proctoscopes decontaminated between uses? (Medium risk)				
19. Is suction equipment decontaminated between uses and stored clean and dry?				
20. Are nebuliser machines decontaminated appropriately between uses and is tubing single use?				
21. Is nebuliser equipment single patient use only and disposed after patient use?				



Section G (6) - Decontamination and Disinfection	Yes	No	N/A	Comments
1. Is there a disinfection policy and is it known to all staff?				
2. Is Hypochlorite disinfectant available to deal with blood spillage and used at the appropriate dilution i.e. 10000ppm (1 in 10)?				
3. Are chemical disinfectants used only for heat labile equipment?				
4. Is a deep sink available for washing items separate to handwashing facilities?				
5. Are environmental surfaces cleaned appropriately between patients?				

Section G (7) - Hand Hygiene	Yes	No	N/A	Comments
1. Have staff been instructed on good handwashing technique?				
2. Is liquid or bar soap available at <u>all</u> sinks in the clinical areas and consultation rooms?				
3. Are paper towels available at all sinks in clinical areas?				
4. Are all hand wash areas free from re-useable towels?				
5. Are sinks in clinical areas free from nailbrushes?				
6. Are the hands of clinical staff free from jewellery? e.g. watches and stoned rings.				
7. Are sinks in clinical areas free from cups and drinking facilities?				
8. Is access to handwashing clear e.g. no equipment soaking in the sink?				
9. Is Chlorhexidine or alcohol hand rub available for use?				
10. Are mixer taps or thermostatically controlled hot water available at sinks in clinical areas?				



Section G (8) - Clinical Practice	Yes	No	N/A	Comments
1. Are infection control guidelines available and known to staff?				
2. Are sterile gloves available and worn when appropriate? *				
3. Are non-sterile gloves available and worn for venepuncture and other contamination risk tasks? *				
4. Are disposable plastic aprons available, worn when appropriate and changed between patients?				
5. Is eye and face protection available and worn when appropriate?				
<i>Specimen handling</i>				
6. Are staff trained how to handle specimens?				
7. Is food/drink stored/prepared away from specimens and specimen collection areas?				
8. Are specimens disposed of in a safe and appropriate manner?				
9. Are specimens transported in a safe container in accordance with local policy?				
<i>Use of analytical equipment</i>				
10. Are gloves worn by the operator for urine/blood analysis?				
11. Is a system in place for breakdown and repair of analytical equipment?				
12. Is equipment maintained and cleaned regularly?				

** Powder free gloves are strongly recommended*

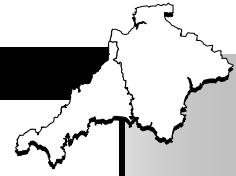


Section G (9) - Vaccines	Yes	No	N/A	Comments
1. Are staff aware of the importance of the ' cold chain ' being maintained during transport of vaccine to the Practice?				
2. Are vaccines placed immediately in the drug fridge after delivery?				
3. Does the drug fridge have a maximum/minimum thermometer?				
4. Are temperature checks performed and recorded daily?				
5. Is the fridge used for vaccine storage only? i.e. no food or specimens stored				
6. Is storage of vaccines adequate i.e. maximum 50% full and not stored near the ice box?				
7. Is a system in place for breakdown and repair of the vaccine fridge?				
8. Is there a system in place for the safe disposal of expired /surplus/damaged vaccine?				
9. Is the fridge lockable and locked when not in use?				

Section H- Manual Handling/Ergonomics



Section H	Yes	No	N/A	Comments
1. Do you have a Manual Handling policy?				
2. Have all staff received training?				
3. Is training updated regularly?				
4. Have ergonomic assessments been undertaken e.g. of storage/handling of records; handling of equipment; handling of patients?				
5. Is sufficient storage provided?				
6. Are heavy items stored between mid thigh and shoulder height?				
7. Is there a safe means of accessing high shelves?				
8. Is storage equipment in good condition and not overloaded?				
9. Is stored material secured to prevent shifting / falling?				
10. Are storage areas free from rubbish?				
11. Are shelf units properly attached to walls and are cabinets/cupboards stable?				

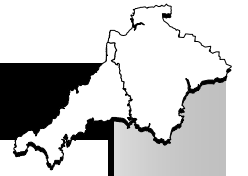


Section H (Continued)	Yes	No	N/A	Comments
12. Is seating generally of a good standard?				
13. Are treatment couches/chairs height adjustable?				
14. Is space allowance reasonable?				
15. Have there been any incidents/near misses associated with the above in the last two years?				

Section I – DSE



Section I	Yes	No	N/A	Comments
1. Do you have a DSE policy?				(See Section 2.3 OH&S Manual)
2. Has anyone been trained to undertake workstation assessments?				
3. Are workstations and seating fully adjustable, and are staff trained and encouraged to make adjustments?				
4. Does seating give proper back support?				
5. Are footrests provided where needed?				
6. Is furniture and equipment checked and maintained regularly, with faulty items taken out of service and replaced?				
7. Can users read screens and are they flicker and glare free?				
8. Is the place of work comfortable and can breaks be taken?				
9. Have any arrangements been made for eye and eyesight tests of DSE 'users'?				
10. Are reports of aches, pains, numbness or tingling of limbs investigated?				
11. Is work free from awkward postures, movements and very repetitive work?				



Section I (Continued)	Yes	No	N/A	Comments
12. Is training provided about the use of equipment, methods of work, breaks etc.?				
13. Have there been any associated health problems in the last two years?				

Section J - First Aid and Accident Reporting



Section J	Yes	No	N/A	Comments
1. Do you have a policy/procedure for First Aid?				
2. Have all staff been informed of your arrangements for First Aid?				
3. Is a nominated and appropriately qualified First Aider available whenever the premises are being used?				
4. Are there adequate numbers of First Aid boxes readily available?				
5. Does a nominated person have responsibility for ensuring the contents are adequate and up to date?				
6. Do peripatetic staff carry First Aid kits?				
7. Are you aware of the need to report specified accidents to HSE under RIDDOR? See section 2.5 of manual.				

Section K - Stress/Mental Health



Section K	Yes	No	N/A	Comments
1. Do you have a policy regarding stress/mental health issues?				(See Section 1.7 OH&S Manual)
2. Do you have a policy regarding bullying and harassment				
3. Do you think you have a no-blame culture?				
4. Do you think stress is a problem in your place of work?				
5. Do staff appear to feel able to identify/discuss any problems?				
6. Do staff have control over how they organise their work?				
7. Is any form of counselling available?				(This is available via OH helpline)
8. Is any form of mentoring / buddy systems available / used?				
9. Have there been any associated illness in staff in the last two years?				

Section L - FIRE



Section L	Yes	No	N/A	Comments
1. Has a fire risk assessment been undertaken?				
2. Have fire appliances been checked within the last year and certified as such?				
3. Are all employees given information, instruction and training on fire risks?				
4. Are fire drills carried out regularly and at least once a year?				
5. Does the Practice have a 'Fire Plan'?				
6. Are there separate storage arrangements for flammable materials?				
7. Are bins regularly emptied and rubbish safely disposed of?				



Section L (Continued)	Yes	No	N/A	Comments
8. Are clear fire instructions displayed throughout the workplace?				
9. Have sources of ignition (portable heaters etc (been replaced by safer alternatives?				
10. Are fire alarms and smoke detectors checked and tested weekly?				
11. Are the alarms capable of warning employees / patients etc. throughout the building?				
12. Are there other forms of fire warning for the hearing impaired?				
13. Is emergency lighting provided and tested regularly?				
14. Are escape routes clearly signed, kept clear and wide enough to prevent a crush, and do they lead quickly and directly to a safe area?				
15. Are fire doors and exits clearly marked, kept clear on both sides at all times, never left open, and do they open easily and quickly in the direction of escape and lead quickly to a safe area				



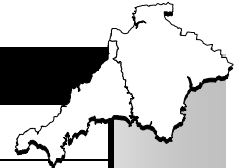
Section M – Electricity

Section M	Yes	No	N/A	Comments
1. Are all electrical items in good condition?				
2. Is the office fitted with earth leakage electrical protection?				
3. Are all adaptors of the <u>strip</u> multi socket type and where possible mounted off the floor?				
4. Are all cords, plugs, sockets in good condition, i.e. not frayed, exposed, cracked etc.?				
5. Are sockets adequately protected from children?				
6. Has all portable electrical equipment been PAT tested and labelled accordingly?				
7. Have fixed electrical appliances been tested i.e. appliances without a 3 pin plug?				
8. If portable electric heaters are in use are they suitably located with regard to the fire hazard and are they plugged directly into a wall socket?				
9. Are battery chargers marked and well ventilated?				
10. Have switches and circuits/ circuit breakers been identified and are working?				

Section N - Violence and Aggression



Section N	Yes	No	N/A	Comments
1. Do you have written policy/guidelines about handling violence and aggression?				
2. Do you have guidelines on a response strategy?				
3. Are all staff fully aware of the procedure to follow in the event of such an incident?				
4. Do you keep records of any incidents?				
5. If yes, do they reflect reality i.e. do they include non-injury events?				
6. Do they provide enough information for investigation and follow up?				
7. Will the reporting system allow following of trends?				
8. Is the lead Dr and person with operational responsibility familiar with the need to report over three day injuries to the HSE (RIDDOR)?				
9. Are potential assailants identified in any way e.g. patients/friends/ relatives/ mentally ill?				
10. If yes, is the information passed to staff undertaking home visits?				
11. Are particular risk situations considered e.g. refusing an appointment, administering medication, delivering unwelcome information?				



Section N (Continued)	Yes	No	N/A	Comments
12. Do any staff come in early/stay late, thereby working alone?				
13. Have all staff been trained in defusing violence and aggression?				
14. Is training regularly updated?				
15. Have risk assessments in relation to potential violence and aggression covered: <ul style="list-style-type: none">• Safe access/egress?• Lighting?• Information to patients?• Siting of waiting rooms/ reception etc.?• Depth of reception desk/barrier?• Lone working?				

Section 0 – Training Records



Section 0	Yes	No	N/A	Comments
1. Is a H&S training record kept for each member of staff?				
2. Is training reviewed regularly and updated as necessary?				

Any other comments:

Section P – Summary and Action Plan



What do we need to do next?

1. Go through the document and pick out from each section the 'things to do' and summarise in the table below.

Section	Topic	Things we need to do	Who will do it	By date	Checked/Done

Well done! You have now completed and recorded your 'risk assessment'.....
But if you have any queries or concerns, please contact the OH team- contact details on the front cover

Remember – Further advice and support is available from the Occupational Health Team

This page is intentionally blank

