

Risk Assessment Form

Use this form for any detailed risk assessment unless a specific form is provided. Refer to your Summary of Hazards/Risks and complete forms as required, including those that are adequately controlled but could be serious in the absence of active management. The Action Plan and reply section is to help you pursue those requiring action.

Name of Assessor:	Sandra Devine Pamela Joannidis Linda Bagrade	Post Held:	AICM AANDIPC LICD
Departments:	Infection Prevention and Control	Date:	23 February 2022
Subject of Assessment: E.g.: hazard, task, equipment, location, people			
Exposure of clinical vulnerable paediatric oncology patients to unfiltered water from toilets.			
Hazards (Describe the harmful agent(s) and the adverse consequences they could cause)			
<i>Environmental micro-organisms</i>			
Description of Risk Describe the work that causes exposure to the hazard, and the relevant circumstances. Who is at risk? Highlight significant factors: what makes the risk more or less serious – e.g.: the time taken, how often the work is done, who does it, the work environment, anything else relevant.			
RISK; Exposure of neutropenic/ Immunocompromised patients to environmental micro-organisms that lead to infection Gram negative organisms from any source pose significant risk to patients who are profoundly immunocompromised. Providing the safest possible environment for these patients is critical to support patient safety and wellbeing. There is no way to effectively filter water that is used to flush toilets. Toilets require to be flushed. Patients in the paediatric oncology cohort are extremely vulnerable and flushing may be considered an uncontrolled exposure.			

Existing Precautions

Summarise current controls in place	Describe how they might fail to prevent adverse outcomes.
<p>All toilets have lids and patients/parents/carers will be advised to close these before the toilet is flushed.</p> <p>Chlorine dioxide dosing is now well established throughout the hospital and secondary booster units will service Wards 2A and 2B to allow a higher degree of control of the dosing levels to these specific areas and allow a secondary back up in the event of main dosing system failure.</p> <p>The ward refurbishment involved the full replacement of the ventilation systems serving ward 2A to provide a fit for purpose environment for this patient group. Ward 2B was also subject to ventilation upgrades.</p> <p>The ventilation system minimises the ingress of particulates and micro-organisms within the air environment by virtue of filtration levels, pressure cascade and air change rates.</p> <p>The project introduced a pressure cascade system into Ward 2A (the inpatients ward), with all bedrooms individually balanced to ensure there is appropriate pressure differential to protect the patient within. All bedrooms are fitted with local alarms that sound if a door is left open or the differential threshold falls out with parameters. Double lock entrance doors are also fitted to both entrances of the ward to maintain the pressure cascade.</p>	<p>Patients can access services in other areas e.g. Ronald McDonald house, medicinema, own home, school.</p> <p>Chlorine dioxide does not have the same effect on all microorganisms so some may survive in its presence.</p> <p>SICPs not applied appropriately then microorganisms can pass to patients on equipment, staff or via patients and their families.</p>

<p>Air changes within Ward 2A bedrooms and ensuites are all at a minimum of 10a/c per hour.</p> <p>All areas within both Wards 2A and 2B are now fed by HEPA filtered air and served by duty/standby Air Handling Units to ensure continuous ventilation can be provided whilst allowing for ongoing maintenance.</p> <p>Correct care of Central lines, e.g. exit wound covered, end cap in place.</p> <p>Application of SICPs</p>	
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Level of Risk - Is the control of this risk adequate?

Give more than one risk level if the assessment covers a range of circumstances. You can use the 'matrix' to show how 'likelihood' and 'consequences' combine to give a conclusion. Also, be critical of existing measures: if you can think how they might fail, or how they could be improved, these are indications of a red or orange risk.

Risk Matrix

<u>Likelihood</u>	<u>Impact/Consequences</u>				
	Negligible	Minor	Moderate	Major	Extreme
Almost Certain	Medium	High	High	V High	V High
Likely	Medium	Medium	High	High	V High
Possible	Low	Medium	Medium	High	High
Unlikely	Low	Medium	Medium	Medium	High
Rare	Low	Low	Low	<u>Medium</u>	Medium

■ Very High
 ■ High
 ■ Medium ✓
 ■ Low

Current risk level

Given the current precautions, and how effective and reliable they are, what is the current level of risk? **Green** is the target – you have thought it through critically and you have no serious worries. Devise ways of making the risk green wherever you can. **Yellow** is acceptable but with some reservations. You can achieve these levels by reducing the inherent risk and or by effective and reliable precautions.

High (Orange) or Very High (Red) risks are unacceptable and must be acted on: use the Action Plan section to summarise and communicate the problems and actions required.

Action Plan (if risk level is High **(Orange)** or Very High **(Red)**)

Use this part of the form for risks that require action. Use it to communicate, with your Line Manager or Risk Coordinator or others if required. If using a copy of this form to notify others, they should reply on the form and return to you. Check that you do receive replies.

Describe the measures required to make the work safe. Include hardware – engineering controls, and procedures. Say what you intend to change. If proposed actions are out with your remit, identify them on the plan below but do not say who or by when; leave this to the manager with the authority to decide this and allocate the resources required.

Proposed actions to control the problem List the actions required. If action by others is required, you must send them a copy	By Whom	Start date	Action due date

Action by Others Required - Complete as appropriate: (please tick or enter YES, name and date where appropriate)

Report up management chain for action	Yes Associate Director EFM 24 February 2022
Report to Estates for action	Currently in place
Contact advisers/specialists	N/R
Alert your staff to problem, new working practice, interim solutions, etc	Posters will be made available to direct patients/parents/carers to close the toilet lid before flushing.

Reply

If you receive this form as a manager from someone in your department, you must decide how the risk is to be managed. Update the action plan and reply with a copy to others who need to know. If appropriate, you should note additions to the Directorate / Service Risk Register.

If you receive this as an adviser or other specialist, reply to the sender and investigate further as required.

Assessment completed -
date: 23nd Feb 2022

Review date: 23nd Feb 2023