

Activity being	assessed:		Hazards identi	fied:✓		
Identification	of areas within NHS	Violence and aggression	Blood and body fluids		Radiation	
GGC within which patients may be		Lone working	Machinery/equipment		Fire / Sources of ignition	
at a higher ris		Sharps	Hazardous substances		Ergonomic	
pseudomona	s and related	Slips, trips, falls	Electricity		Work methodology	<b>√</b>
infections.		Manual Handling	Weather	Environment	1	
Department:  Location:	other similar opportunistic para outbreaks in any healthcar sed through drugs, disease, so There have been serious hal Units and Intensive Care Urthe source of the organism was ultures for <i>Pseudomonas aerus</i> o identify areas with a pragmand culture in a 2 week period. GGC are automatically classed areas were identified in the required following risk assess	re setting invasive ealthcare ealthcare ints (adult s though aginosa intic trigge Intensive d as high previous				
Perso	on(s) exposed:					
Control meas	ures currently in place:	,			Specific risk assessm guidance to be referre	
IPC and FMT Standard Ope Ongoing review	erating Procedure (SOF ew of epidemiology of F	ritten Scheme P) IPC Water Safety (Pa) (Pseudomonas in blood cult NICU and ICUs across GG	ure in all in-patient areas.			



Evaluation of Risk:					Additional Control Measures Required:		
Likelihood	Negligible Minor Moderate Major Extreme					Domestic services will continue to clean CHWB daily following national cleaning specifications in clinical areas and notify the SCN if this cannot be completed. SCN will run taps as per SOP if not	
Almost Certain 5	Medium	High	3 High	4 V High	V High		undertaken by Facilities staff.
Likely	Medium	Medium	High	High	V High		
Possible 3	Low	Medium	Medium	High	High		
Unlikely 2	Low	Medium	Medium	Medium	High		
Rare 1	Low	Low	Low	Medium	Medium		
happen – will only exceptional circum <i>Unlikely</i> - Not expebut definite potential <i>Possible</i> - May occhas happened beformula <i>Likely</i> - Strong poscould occur <i>Almost Certain</i> - T	Almost Certain- This is expected to ccur frequently / in most  Extreme – death or permanent incapacity				r illness first eportable, s medical ng required r long term		
	2 x 3 = 6 (Medium)						
	Risk Level: ✓					Responsible Manager for arranging additional controls:	
Low Risk	Medium F	Risk 🗸	High Ri	sk \	/ery High Ri	sk	SCN's Signature:



Yes ✓ (If medium risk indicate any additional controls desirable)  No (Indicate additional controls required) controls desirable)  ongoing	Risk Level A	Date additional controls to be in place:				
	(If medium risk indicate any additional			on	going	
Final Risk Level: ✓ Low Medium ✓ High Very High		Low	Medium ✓	High	Very High	

Requirement to Add to Risk Register? ✓	N ✓ Requirement to share Risk Assessment? ✓	Y 🗸 N	Services / Depts. shared with:	Board Water Safety Group. IPC Committees
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Assessed by / Job Title:	Date:	Review Date:
Dr Aleks Marek Consultant Microbiologist Kate Hamilton Acting Nurse Consultant IPC David Mains Health and Safety Service Manager	July 2023	June 2024

## Appendix 1

Site	Hospital	Ward	Assessment
GRI	GRI	ICU W / ICU E	Water Safety Written Scheme
GRI	GRI	Ward 45	Water Safety Written Scheme
GRI	PRM	NICU / SCBU	Water Safety Written Scheme
IRH	IRH	J South	Water Safety Written Scheme
QEUH	Adult hospital	ITUs, HDU, 7a and 7d	Water Safety Written Scheme
QEUH	Adult hospital	4a, 4c and 4d	Water Safety Written Scheme
QEUH	INS	ITU /HDU/Spinal Unit	Water Safety Written Scheme
QEUH	Maternity Building	NICU and SCBU	Water Safety Written Scheme
QEUH	RHC	PICU	Water Safety Written Scheme
QEUH	RHC	3a, 3b, 3c and 2c.	Water Safety Written Scheme
QEUH	RHC	2a and 2b	Water Safety Written Scheme
QEUH	Adult hospital	Ward 4b	Water Safety Written Scheme
RAH	RAH	ICU	Water Safety Written Scheme
RAH	Maternity Unit	SCBU/NICU	Water Safety Written Scheme
GGH	WoSCC	Wards	Water Safety Written Scheme