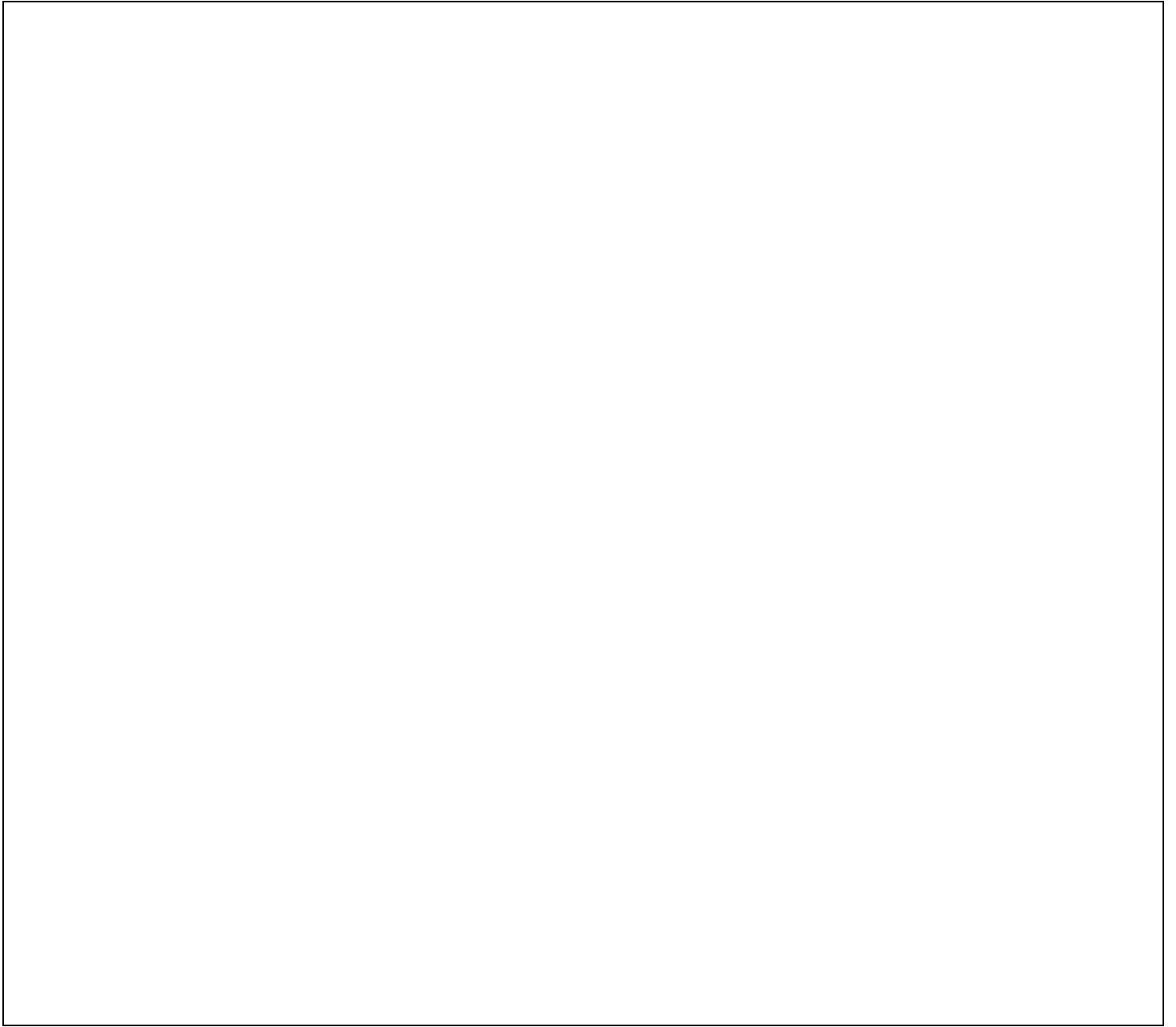


APPENDIX 1 – TRUST RISK ASSESSMENT FORM

SOUTHERN HEALTH & SOCIAL CARE TRUST		
RISK ASSESSMENT FORM		Risk ID No ID:
Directorate: CYPS	Facility/Department/Team:	Date:
Where is this being carried out? (e.g. Trust premises/home of client/staff/ private nursing home etc)	Objective(s) i.e. Corporate, Legislative requirements etc.:	
Risk Title: (Threat to achievement of objective)		
 Outline the potential for harm: <i>(Consider injury to client, staff, litigation, etc)</i>		
 Description of Risk: <i>(Describe the risk being assessed identifying who is at risk e.g. patient/staff/other care provider)</i>		



Summary of current control measures: (Consider equipment, staffing, environment, policy/procedure, training, documentation, information - this list is not exhaustive).

Are these controls: (a) Effective or (b) Require Further Action *(if [b], complete Action Plan)*

Please list control measures considered but discounted and why (where appropriate):

Initial Assessment of Risk	Likelihood e.g. Likely	Consequence/ Impact e.g. Moderate	Risk Rating VLow(Green), Low(Yellow), Moderate (Amber) or High(Red)
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ACTION PLAN OF FURTHER CONTROL MEASURES REQUIRED (risk treatment):

Action/Treatment	Action Lead	Start Date	Target Date	Progress/Review Date
Date of first review (to be determined by risk rating)				
Predicted Risk Assessment once all control measures are implemented. (Residual Risk rating)	Likelihood e.g. Likely	Consequence/ Impact e.g. Moderate		Risk Rating VLow(Green), Low(Yellow), Moderate (Amber) or High(Red)

ANTICIPATED RESOURCE IMPLICATIONS (details and cost)	£			
Increase in over time payments				
Funding identified?	Yes	No	N/A	Source of funding

Action	Date	By Whom (PRINT & SIGN)
To be managed by Facility/Department Team Manager/Leader		
Referred to Divisional Risk Register		
Referred to Directorate Risk Register		
Shared with another Team/Directorate Risk Committee for information/consideration		
Referred to Trust Risk Management Forum		
Referred to Corporate Risk Register		
Referred to Board Assurance Framework		

Risk Assessor(s)		
Name (PRINT & SIGN)	Designation	Date
Manager		
Name (PRINT & SIGN)	Designation	Date

MONITORING			
Summary of current position			
Current Risk Rating	Likelihood e.g. Likely	Consequence/ Impact e.g. Moderate	Risk Rating VLow(Green), Low(Yellow), Moderate (Amber) or High(Red)
Name (PRINT & SIGN)	Designation		Date of Review

Impact (Consequence) Levels					
Likelihood Scoring Descriptors	Insignificant(1)	Minor (2)	Moderate (3)	Major (4)	Catastrophic (5)
Almost Certain (5)	Medium	Medium	High	Extreme	Extreme
Likely (4)	Low	Medium	Medium	High	Extreme
Possible (3)	Low	Low	Medium	High	Extreme
Unlikely (2)	Low	Low	Medium	High	High
Rare (1)	Low	Low	Medium	High	High

Risk Likelihood Scoring Table			
Likelihood Scoring Descriptors	Score	Frequency (How often might it/does it happen?)	Time framed Descriptions of Frequency
Almost certain	5	Will undoubtedly happen/recur on a frequent basis	Expected to occur at least daily
Likely	4	Will probably happen/recur, but it is not a persisting issue/circumstances	Expected to occur at least weekly
Possible	3	Might happen or recur occasionally	Expected to occur at least monthly
Unlikely	2	Do not expect it to happen/recur but it may do so	Expected to occur at least annually
Rare	1	This will probably never happen/recur	Not expected to occur for years

HSC Regional Impact Table – with effect from April 2013 (updated June 2016 & August 2018)

DOMAIN	IMPACT (CONSEQUENCE) LEVELS [can be used for both actual and potential]				
	INSIGNIFICANT (1)	MINOR (2)	MODERATE (3)	MAJOR (4)	CATASTROPHIC (5)
PEOPLE <i>(Impact on the Health/Safety/Welfare of any person affected: e.g. Patient/Service User, Staff, Visitor, Contractor)</i>	<ul style="list-style-type: none"> Near miss, no injury or harm. 	<ul style="list-style-type: none"> Short-term injury/minor harm requiring first aid/medical treatment. Any patient safety incident that required extra observation or minor treatment e.g. first aid Non-permanent harm lasting less than one month Admission to hospital for observation or extended stay (1-4 days duration) Emotional distress (recovery expected within days or weeks). 	<ul style="list-style-type: none"> Semi-permanent harm/disability (physical/emotional injuries/trauma) (Recovery expected within one year). Admission/readmission to hospital or extended length of hospital stay/care provision (5-14 days). Any patient safety incident that resulted in a moderate increase in treatment e.g. surgery required 	<ul style="list-style-type: none"> Long-term permanent harm/disability (physical/emotional injuries/trauma). Increase in length of hospital stay/care provision by >14 days. 	<ul style="list-style-type: none"> Permanent harm/disability (physical/emotional trauma) to more than one person. Incident leading to death.
QUALITY & PROFESSIONAL STANDARDS/ GUIDELINES <i>(Meeting quality/ professional standards/ statutory functions/ responsibilities and Audit Inspections)</i>	<ul style="list-style-type: none"> Minor non-compliance with internal standards, professional standards, policy or protocol. Audit / Inspection – small number of recommendations which focus on minor quality improvements issues. 	<ul style="list-style-type: none"> Single failure to meet internal professional standard or follow protocol. Audit/Inspection – recommendations can be addressed by low level management action. 	<ul style="list-style-type: none"> Repeated failure to meet internal professional standards or follow protocols. Audit / Inspection – challenging recommendations that can be addressed by action plan. 	<ul style="list-style-type: none"> Repeated failure to meet regional/ national standards. Repeated failure to meet professional standards or failure to meet statutory functions/ responsibilities. Audit / Inspection – Critical Report. 	<ul style="list-style-type: none"> Gross failure to meet external/national standards. Gross failure to meet professional standards or statutory functions/ responsibilities. Audit / Inspection – Severely Critical Report.
REPUTATION <i>(Adverse publicity, enquiries from public representatives/media Legal/Statutory Requirements)</i>	<ul style="list-style-type: none"> Local public/political concern. Local press < 1day coverage. Informal contact / Potential intervention by Enforcing Authority (e.g. HSENI/NIFRS). 	<ul style="list-style-type: none"> Local public/political concern. Extended local press < 7 day coverage with minor effect on public confidence. Advisory letter from enforcing authority/increased inspection by regulatory authority. 	<ul style="list-style-type: none"> Regional public/political concern. Regional/National press < 3 days coverage. Significant effect on public confidence. Improvement notice/failure to comply notice. 	<ul style="list-style-type: none"> MLA concern (Questions in Assembly). Regional / National Media interest >3 days < 7days. Public confidence in the organisation undermined. Criminal Prosecution. Prohibition Notice. Executive Officer dismissed. External Investigation or Independent Review (e.g. Ombudsman). Major Public Enquiry. 	<ul style="list-style-type: none"> Full Public Enquiry/Critical PAC Hearing. Regional and National adverse media publicity > 7 days. Criminal prosecution – Corporate Manslaughter Act. Executive Officer fined or imprisoned. Judicial Review/Public Enquiry.
FINANCE, INFORMATION & ASSETS <i>(Protect assets of the organisation and avoid loss)</i>	<ul style="list-style-type: none"> Commissioning costs (£) <1m. Loss of assets due to damage to premises/property. Loss – £1K to £10K. Minor loss of non-personal information. 	<ul style="list-style-type: none"> Commissioning costs (£) 1m – 2m. Loss of assets due to minor damage to premises/ property. Loss – £10K to £100K. Loss of information. Impact to service immediately containable, medium financial loss 	<ul style="list-style-type: none"> Commissioning costs (£) 2m – 5m. Loss of assets due to moderate damage to premises/ property. Loss – £100K to £250K. Loss of or unauthorised access to sensitive / business critical information Impact on service contained with assistance, high financial loss 	<ul style="list-style-type: none"> Commissioning costs (£) 5m – 10m. Loss of assets due to major damage to premises/property. Loss – £250K to £2m. Loss of or corruption of sensitive / business critical information. Loss of ability to provide services, major financial loss 	<ul style="list-style-type: none"> Commissioning costs (£) > 10m. Loss of assets due to severe organisation wide damage to property/premises. Loss – > £2m. Permanent loss of or corruption of sensitive/business critical information. Collapse of service, huge financial loss
RESOURCES <i>(Service and Business interruption, problems with service provision, including staffing (number and competence), premises and equipment)</i>	<ul style="list-style-type: none"> Loss/ interruption < 8 hour resulting in insignificant damage or loss/impact on service. No impact on public health social care. Insignificant unmet need. Minimal disruption to routine activities of staff and organisation. 	<ul style="list-style-type: none"> Loss/interruption or access to systems denied 8 – 24 hours resulting in minor damage or loss/ impact on service. Short term impact on public health social care. Minor unmet need. Minor impact on staff, service delivery and organisation, rapidly absorbed. 	<ul style="list-style-type: none"> Loss/ interruption 1-7 days resulting in moderate damage or loss/impact on service. Moderate impact on public health and social care. Moderate unmet need. Moderate impact on staff, service delivery and organisation absorbed with significant level of intervention. Access to systems denied and incident expected to last more than 1 day. 	<ul style="list-style-type: none"> Loss/ interruption 8-31 days resulting in major damage or loss/impact on service. Major impact on public health and social care. Major unmet need. Major impact on staff, service delivery and organisation - absorbed with some formal intervention with other organisations. 	<ul style="list-style-type: none"> Loss/ interruption >31 days resulting in catastrophic damage or loss/impact on service. Catastrophic impact on public health and social care. Catastrophic unmet need. Catastrophic impact on staff, service delivery and organisation - absorbed with significant formal intervention with other organisations.

HSC Regional Impact Table – with effect from April 2013 (updated June 2016 & August 2018)					
DOMAIN	IMPACT (CONSEQUENCE) LEVELS [can be used for both actual and potential]				
	INSIGNIFICANT (1)	MINOR (2)	MODERATE (3)	MAJOR (4)	CATASTROPHIC (5)
ENVIRONMENTAL <i>(Air, Land, Water, Waste management)</i>	<ul style="list-style-type: none"> Nuisance release. 	<ul style="list-style-type: none"> On site release contained by organisation. 	<ul style="list-style-type: none"> Moderate on site release contained by organisation. Moderate off site release contained by organisation. 	<ul style="list-style-type: none"> Major release affecting minimal off-site area requiring external assistance (fire brigade, radiation, protection service etc.). 	<ul style="list-style-type: none"> Toxic release affecting off-site with detrimental effect requiring outside assistance.

Green Risks (Low)

Identified risks which fall in the green area are deemed as low (acceptable) risks and may require no immediate action, but must be monitored regularly to assess if and when action is required. These risks must be entered onto the local Risk Register.

Yellow Risks (Medium)

Identified risks which fall in the yellow area are deemed medium risk to the Trust but require action to reduce the risk. Responsibility for taking action would normally remain at a local level within the appropriate Directorates / Service Areas and be entered on the Team / Service Risk Register.

Where these risks cannot be managed locally they should be forwarded to the appropriate Directorate Governance Fora for consideration for further local action, resourcing or acceptance by the Directorate Governance Fora for the Directorate Risk Register.

These risks must be entered on the local risk register and where appropriate the Directorate Risk Register for information and monitoring purposes.

Amber Risks (High)

Identified risks which fall in the amber area are deemed high risk to the Trust and require prompt action to reduce the risk to an acceptable level. When risks cannot be reduced locally they should be submitted to the Directorate Governance F o r a f o r c o n s i d e r a t i o n a n d r e c o m m e n d e d action, i.e. further local action, resourcing or acceptance.

Where these risks cannot be managed within the Directorate they should be referred to the Senior Management Team for consideration and/or addition to the Corporate Risk Register.

These risks must be entered on the local risk register and where appropriate the Directorate Risk Register.

Red Risks (Extreme)

Identified risks which fall in the red area are deemed extreme risk to the Trust and must be reported to the appropriate Director and Chief Executive. Immediate action is required to reduce the level of risks to an acceptable level. The appropriate Director will ensure the implementation of a time monitored action plan with regular reports to the Chief Executive and Governance Committee.

SMT will be the gate keepers of the Corporate Risk Register and will use the following criteria to inform their decision making in escalating risks to the Corporate Risk Register.

- The risk represents an issue that has the potential to hinder achievement of one or more of the corporate objectives
- The risk cannot be addressed at directorate level
- It requires further control measures to reduce or eliminate the risk
- It is likely to require considerable input of resources to resolve the risk (finance, people, time, etc)

These risks will be entered onto the Directorate, and if appropriate the Corporate Risk Register(s) for monitoring by the SMT.