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THIS POLICY IS FOR:	Staff including Agency Workers (temporary workers), Commissioners and Service Users

## RISK MANAGEMENT

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# RISK MANAGEMENT POLICY AND PROCEDURE

## 1. PURPOSE

- 1.1 To identify and minimise risk in order to meet every individual employee's right to a healthy and safe place of work.
- 1.2 To identify and minimise risk to ensure that Service Users receive safe, effective care and support services, the delivery of which respects their needs and treats them with dignity and respect.
- 1.3 To identify, monitor and manage risk sufficiently including escalation and to safeguard all Staff including Agency Workers, Service Users, and members of the public effectively.
- 1.4 To ensure that all current health and safety legislative and regulatory requirements, including best practice guidance, are included, and factored into all workplace risk assessment and management systems.
- 1.5 To support Nursing Direct in meeting the relevant Key Lines of Enquiry and Quality Statements as outlined by the Care Quality Commission (CQC).
- 1.6 To meet the legal requirements of the regulated activities that {Nursing Direct} is registered to provide:
  - Civil Contingencies Act 2004
  - The Care Act 2014
  - Care Quality Commission (Registration) Regulations 2009
  - Children Act 2004
  - Control of Substances Hazardous to Health Regulations 2002
  - The Controlled Drugs (Supervision of Management and Use) Regulations 2013
  - Employment Rights Act 1996
  - Equality Act 2010
  - The Hazardous Waste (England and Wales) Regulations 2005
  - The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
  - Health and Social Care Act 2008 (Registration and Regulated Activities) (Amendment) Regulations 2015
  - Health and Safety at Work etc. Act 1974
  - The Medical Devices (Amendment) Regulations 2012
  - Medicines Act 1968
  - The Misuse of Drugs (Safe Custody) Regulations 1973
  - Health and Social Care (Safety and Quality) Act 2015
  - Data Protection Act 2018
  - The Control of Substances Hazardous to Health Regulations 2002
  - Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)
  - UK GDPR

## 2. SCOPE

- 2.1 The following roles may be affected by this policy:
  - All Staff including Agency Workers
- 2.2 The following Service Users may be affected by this policy:
  - Service Users
- 2.3 The following stakeholders may be affected by this policy:
  - Family
  - Advocates
  - Representatives
  - Commissioners
  - External health professionals
  - Local Authority
  - NHS
  - Housing Provider Partners (Where applicable)
  - Other Visitors

## 3. OBJECTIVES

- 3.1 To identify and manage risk within Nursing Direct for the purpose of the prevention of accidents.
- 3.2 To provide assurance that risks at all levels of Nursing Direct are appropriately assessed, prioritised, addressed and monitored.
- 3.3 To highlight a clear process where escalation may be required in order to effectively manage individual risk areas.
- 3.4 To learn from significant events that have occurred and been investigated in order to identify and minimise future risk. Nursing Direct will work within a framework of openness and honesty, and the duty of candour will be applied where applicable.

## 4. POLICY

- 4.1 This policy supports Nursing Direct with the identification of risk in order to keep Staff including Agency Workers, Service Users, multidisciplinary professionals, and other visitors, safe and free from harm by preventing accidents and adverse incidents, together with learning from significant incidents when they do occur, in order to minimise any future risks.

- 4.2 The management of identified risks within care, support, and any clinical and nursing practices in relation to Service Users will form part of established governance systems and processes at Nursing Direct.
- 4.3 Risk reports and findings from any care, support, clinical and non-clinical significant events will be used by Nursing Direct to identify and learn from risks and to inform how they will be managed in the future to prevent harm.
- 4.4 Relevant risk assessments will be carried out for each service user package of care and reviewed on a regular basis as identified by Nursing Direct. Nursing Direct will share the recorded results and actions taken where required. Nursing Direct will ensure that guidance and support is provided to Staff including Agency Workers who carry out this activity upon induction, or as and when required.
- 4.5 All Staff including Agency Workers must:
- Be aware of and understand risk in its many forms, how it may present, and who could be harmed.
  - Be able to identify adverse incidents and significant events, understand how they occurred and what to change to prevent any recurrence.
  - Be able to assess the potential severity and harm of any risk posed to them, other Staff including Agency Workers, Service Users, and visitors.
- 4.6 Nursing Direct will be responsible for risk management and recording risk assessments as well as recording and investigating significant events. The Registered Manager will take overall responsibility for these areas and will work in partnership with any designated clinical lead.
- 4.7 Nursing Direct has key risk policies in place which are mandatory for all Staff including Agency Workers to read. Nursing Direct will implement and signpost to policies and procedures that may be required.
- 4.8 **Service User Risk Management**  
Nursing Direct has a suite of policies and procedures with additional documents, forms, and processes in place to support Service Users to manage risks where they are able to do so.
- Where Service Users are unable to manage their own risk, additional policies and procedures are in place to ensure that safety is paramount in providing care and treatment.
- Nursing Direct has key risk policies in place which are mandatory for all Staff including Agency Workers to read.
- Nursing Direct will implement and signpost to policies and procedures that may be required for the management of Service User risks.
- 4.9 **Escalation Procedures**  
As part of an effective risk management strategy for key risk areas as outlined in sections 4.7 and 4.8, Nursing Direct has policies and procedures in place that define any escalation procedures in order to manage risk safely at all times. These processes outlined in the individual policies and procedures ensure that when risk meets certain criteria, escalation takes place. This includes but is not limited to multidisciplinary teams (MDT) and health professional partners, relevant governing bodies, the health and safety team, commissioning team as well as Nursing Direct completing any legally required notifications and informing appropriate insurers (If applicable).
- Nursing Direct management team are responsible for ensuring appropriate escalations take place where required.
- 4.10 Risk management (and in particular, significant events) will be a standing agenda item for relevant good governance meetings, quality assurance meetings and management meetings at Nursing Direct where up-to-date reports will be presented for discussion, analysis, and learning, and to inform operational planning alongside a process of continual improvement.

## 5. PROCEDURE

- 5.1 **Risk Assessments and Management**  
Nursing Direct recognises that risk assessments are a critical element of risk management culture at Nursing Direct for effective health and safety risk management.
- Risk assessments are carried out and used to prevent accidents, incidents, and ill health by identifying, assessing, evaluating, and eliminating risks and considering how best they can be managed through introducing control measures, appropriate training (where possible) as well as monitoring and reviewing on a regular basis.
- Based on these assessments, Nursing Direct understands what systems, environments and methods of work are safe, as well as ways to prevent the occurrence of health and safety issues.
- 5.2 **Specific Risk Assessments**  
Specific risk assessments are required by certain health and safety guidance and regulations. These regulations may contain a specific reference to the requirement for a risk assessment or they may refer to statutory or regulatory compliance requirements.
- Nursing Direct has systems in place that will highlight requirements for any Service User or service-specific risk assessments and will ensure that these are in place, monitored and reviewed where applicable.
- Specific risk assessments, where needed, will clearly define any escalation process required in order to manage the identified risk effectively. Nursing Direct will amend risk assessments when changes occur and review them regularly to ensure that they are kept up to date.
- Nursing Direct will ensure that Staff including Agency Workers receive appropriate induction, mandatory/specialist/any role-specific training, and any associated competency assessments in the principles of risk assessment to remove or reduce the risk.
- 5.3 **Incident Analysis**  
Incident reports will be presented for discussion at the relevant monthly governance and quality assurance meetings, with actions recorded and a named person responsible for undertaking and completing agreed actions within a set timescale to reduce the likelihood of any similar recurrence. It is important to remember that significant events may take many forms, for example, adverse events, accidents and near misses, or examples of both good and bad practice, performance or feedback received.
- 5.4 **Processes which May Identify Risks**  
Nursing Direct may identify risks from one or more of the following:
- Adverse incident trends (available from analysis or incident reports)
  - Serious incident requiring investigation
  - Proactive risk assessment (in preparation for a major project)
  - Audit, support, clinical, financial, process, internal or external

- Feedback from Service Users, surveys, or questionnaires
- Complaints, concerns, and compliments
- NICE and other professional guidance from regulatory bodies
- Observation or supervision

#### 5.5 Reporting Accidents and Near Misses

- In the event of an accident/incident that causes injury, Staff including Agency Workers must ensure that the injured person is being appropriately cared for by suitably qualified professionals.
- When the injured person has been treated and is safe, the full details must be reported to Nursing Direct to be formally recorded on the Radar Healthcare Reporting System.
- The record will be regularly inspected by Nursing Direct.
- Accident, incidents, and events will be reported to the respective authority, e.g. Local Authorities, CCG's or the Care Quality Commission as required and when necessary. This process may include implementation of the Duty of Candour policy and procedures.
- Any 'near miss' incident which occurs must also be reported using the appropriate process. It must also be reported as an incident for investigation and analysis using the Radar Healthcare Reporting System, and for onward discussion at the appropriate governance meetings.

#### 5.6 Escalation Procedure

Nursing Direct will ensure through governance and audit systems that, where escalations are required, these take place and this includes to regulatory bodies, legal representatives and, where appropriate, Nursing Direct Insurers where a requirement is in place to notify them of certain incidents/events that take place.

#### 5.7 Significant Events

The recognition, recording, analysis and responsive or remedial actions associated with significant events must be used to inform service planning and development and to improve quality and performance.

The learning from significant events will be used in a positive way for the benefit of Service Users and Staff including Agency Workers - not to identify individuals and apportion blame. Any disciplinary matters will be addressed and worked through in accordance with the relevant policies and procedures at Nursing Direct.

From time to time, significant events may act as catalysts and bring about major change to the practices at Nursing Direct or to Service User outcomes, etc. The details of this type of significant event and its effects may assist other organisations when presented or shared wider than the team at Nursing Direct.

Any sharing of information will be carried out in line with the requirements of UK GDPR, and data protection policies and procedures at Nursing Direct.

#### 5.8 Learning From Incidents - Operational, Governance, Quality Assurance Meetings

To ensure that learning from incidents is open, transparent, and focused on continuous improvement and outcomes, Nursing Direct will ensure that all Staff including Agency Workers and stakeholders can be involved in order to have the opportunity to share and learn from incidents and significant events.

Nursing Direct will;

- Prepare and plan how any planned meeting is to be conducted to ensure that everyone has an equal chance to contribute to the discussion and the outcome
- Utilise investigation reports, notifications, and professional feedback to inform the learning and decision-making process
- Produce a lessons learnt report and any associated time-limited action plan for remedial actions

## 6. DEFINITIONS

### 6.1 Staff including Agency Workers

#### 6.1.1 Staff

Denotes the employees of Nursing Direct Healthcare Limited.

#### 6.1.2 Agency Workers

Refers to individuals who are contracted with Nursdoc Limited or another employment business as an Agency Worker (temporary worker) provided to Nursing Direct Healthcare Limited to perform care services under the direction of Nursing Direct.

### 6.2 Nursing Direct

Nursing Direct, also known as Nursing Direct Healthcare Limited, is the entity regulated by the CQC (Care Quality Commission) and responsible for the care service provision, contracted to provide homecare services to service users in their homes, in placements, essential healthcare facilities and in the community.

### 6.3 Nursdoc Limited

As the sister company to Nursing Direct Healthcare Limited, Nursdoc Limited acts as an employment business, specialising in providing staffing solutions to the healthcare sector.

### 6.4 CQC (Care Quality Commission)

CQC throughout this policy, the term "CQC" refers to the Care Quality Commission (CQC) which is the independent regulator of health and social care in England.

### 6.5 Actions

A specific, measurable, achievable, relevant, and time-specific piece of work that is to be completed, that will address an identified gap in control or assurance.

### 6.6 Risk Assurance

Evidence that supports the measurement of controls in place to ensure they are operating effectively and that the desired outcome is being achieved.

### 6.7 Risk Controls

These are the management systems and processes that Nursing Direct has in place to manage risks. Examples include policy guidance, Staff including Agency Worker training, appropriate skill mixes and Staff including Agency Worker numbers, etc.


## 6.8 Governance

The management systems, processes, and behaviours by which Nursing Direct leads, directs and controls its functions to achieve its organisational objectives, to achieve safety and quality, and the way in which it relates to Service Users and carers, the wider community and partner organisations

### OUTSTANDING PRACTICE

To be 'outstanding' in this policy area you could provide evidence that:

- All members of Nursing Direct understand that risks can rarely be completely eliminated. They can, however, be mitigated and anticipated, and identifying risks and adverse events should be used as learning, development, and service improvement opportunities in a blame-free environment.
- Thorough and robust risk assessments are carried out on a regular basis with outcomes shared and implementation of all resulting actions monitored.
- All risks identified are reported and recorded and, together with analysis and remedial action, then discussed in governance meetings for learning and development as well as information.
- All identified risks are acted upon with the process for exploring, agreeing, and implementing the actions shared throughout Nursing Direct and with stakeholders.
- All Staff including Agency Workers are aware of how to identify and report a risk as well as how to report significant events, for example, accidents, incidents and near misses.

COMPLETED DATE:	
SIGN OFF DATE:	
REVIEW DATE:	
SIGNED:	 Marc Stiff – Group Managing Director