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## RISK MANAGEMENT

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# RISK MANAGEMENT POLICY AND PROCEDURE

The aim of this policy is to ensure that Nursing Direct Healthcare Limited (hereinafter referred to as "Nursing Direct"), as a provider, offers clear guidance and support regarding the necessary measures and requirements for the effective management of risks. These measures shall be aligned with the industry's best practices, ensuring compliance with Nursing Direct's management responsibilities towards its Service Users and staff, including Agency Workers.

The aim of risk management is to ensure that risks are promptly identified and assessed, enabling the evaluation of potential adverse effects and the implementation of the most effective measures to mitigate, control, or reduce them.

This policy applies specifically when delivering care and support services to both adult and child Service Users. Nursing Direct recognises that safeguarding vulnerable children and adults from harm is a primary responsibility. As a registered provider, Nursing Direct is committed to delivering safe, effective, and high-quality care.

Risk can occur in various ways, sometimes resulting from accidents, incidents, hazards, or changes in how services are delivered, organised, or located. The promotion of Service Users' independence can also sometimes introduce risk. Risk management is a process by which staff including Agency Workers at Nursing Direct, identify and assess risk factors that could impact their ability to deliver safe, high-quality, efficient, and effective care. Nursing Direct will support their service users in maintaining as much independence as possible. This is achieved through personalised Care Plans that reflect each individual's wishes while managing associated risks and embracing positive risk-taking. Please refer to the Positive Risk-Taking Policy and Procedure of Nursing Direct.

## 1. PURPOSE

- 1.1 To identify and minimise risk in order to meet every individual staff including Agency Worker'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, it has taken into consideration the following legislation/regulations when complying with the policy;
  - The Care Act 2014
  - Care Quality Commission (Registration) Regulations 2009
  - Children Act 2004
  - Civil Contingencies 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 people may be affected by this policy:
  - Service Users
- 2.3 The following stakeholders may be affected by this policy:
  - Family/Friends/Next of Kin
  - Advocates/ Representatives
  - Commissioners (including Local Authority/NHS/ICB etc.)
  - External health professionals
  - Other relevant stakeholders/visitors/housing providers/contractors/suppliers where applicable

### 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 within Nursing Direct where escalation may be required to effectively manage individual risk areas
- 3.4 To learn from significant events that have occurred and been investigated to identify and minimise future risk areas
- 3.5 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 The Registered Manager and Nominated Individual of Nursing Direct have overall management responsibility for this policy and procedure.
- 4.2 This policy supports Nursing Direct with the identification of risk in order to keep Staff including Agency Workers, Service Users, professionals from stakeholder organisations 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.
- 4.3 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.
- 4.4 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.
- 4.5 Risk assessments will be carried out in each area of Nursing Direct and reviewed on a regular basis as identified by an appropriate risk matrix
  - 4.5.1 Nursing Direct will share the recorded results and actions taken where required
  - 4.5.2 Nursing Direct will ensure that appropriate training is provided to staff, including Agency Workers, who carry out this activity

- 4.6 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

- 4.7 The Registered Manager will designate one or more leads who are responsible for risk management, the risk register, 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 lead

- 4.8 Nursing Direct has key risk policies in place which are mandatory for all staff, including Agency Workers, to read and confirm they understand. Nursing Direct will ensure all policies are available to staff, including Agency Workers, on their website as well as on the OneTouch care management App, signposting any newly implement or updated policies and procedures.

#### 4.9 Service User Risk Management

Nursing Direct has a suite of policies and procedures with additional documents, forms, and processes in place to support managing risks of Service Users where 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 and confirm their understanding.

#### 4.10 Escalation Procedures

As part of an effective risk management strategy for key risk areas, 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 commissioning team as well as the Registered Manager completing any legally required notifications and informing appropriate insurers (If applicable).

The Registered Manager is responsible on behalf of Nursing Direct for ensuring appropriate escalations where required.

- 4.11 Risk management (and in particular, significant events) will be a standing agenda item for relevant good governance, quality assurance and all other 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 Register

All risks will be identified and assessed. Significant risks, or those which cannot immediately be resolved, will be added to the risk register at Nursing Direct. The risk register will indicate the likelihood and severity of each risk type (care, support, clinical and non-clinical).

Standard forms will be available for reporting risk and all staff including Agency Workers will understand where to find these as well as how they must be submitted and to whom. Each risk will be reviewed regularly according to the risk score by Nursing Direct and the Registered Manager to ensure and embed a safety culture.

## 5.2 Risk Management

The Registered Manager and any other designated risk managers will check risk reports when they are received and regularly review all areas to:

- Identify risks
- Assess identified risks Evaluate identified risks
- Eliminate any identified risk, where appropriate
- Introduce control measures to reduce risks to the most acceptable level where possible
- Develop or locate and arrange delivery of appropriate training to reduce risk level where this is possible
- Provide an up-to-date risk report based on the risk register at Nursing Direct
- Implement a process of monitoring and review of the current risk status and systems on a regular basis, including updated risk management systems following the implementation of workplace procedures

## 5.3 Risk Assessments

5.3.1 Nursing Direct recognises that risk assessments are a critical element of risk management culture at Nursing Direct for effective health and safety risk management.

5.3.2 Risk assessments are carried out and used to prevent accidents, incidents, and ill health by identifying the hazards that exist and considering how best they can be managed through introducing control measures, applying appropriate training (where possible) as well as monitoring and reviewing them on a regular basis.

5.3.3 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.

## 5.4 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 established systems to identify the need for operational, service user, individual staff (including agency workers), and service-specific risk assessments. These systems ensure that all required assessments are implemented, monitored, and reviewed as appropriate.

Specific risk assessments, where needed, will clearly define any escalation process required in order to manage the identified risk effectively.

## 5.5 Operational Health and Safety Requirements

Nursing Direct will:

- Alongside the Registered Manager, a competent person or persons will be appointed to carry out risk assessments, recording their details on the displayed Health and Safety Law poster or in individual leaflets supplied
- Carry out suitable and sufficient risk assessments of all business areas and activities at Nursing Direct
- Identify and undertake specific risk assessments that Nursing Direct is legally required to carry out
- Carry out detailed risk assessments on hazardous activities
- Implement the control measures, further actions including escalation and monitoring required to reduce risks identified in risk assessments
- Bring the significant findings of the risk assessments to the attention of those affected and record these on the risk register for action with any interim mitigation possible
- Amend risk assessments when changes occur and review them regularly to ensure that they are kept up to date
- 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, in particular, the identification of hazards and the implementation of control measures to remove or reduce the risk
- Communicate applicable Service User safety alerts from the Medicines and Healthcare products Regulatory Agency (MHRA) and the Central Alerting System (CAS) to the Registered Manager on receipt, and retain a record of all Service User safety alerts received and any associated actions taken
- Ensure that there is a Business Continuity Plan in place that sets out the emergency plan in place to comply with:
  - The Civil Contingencies Act 2004
  - Data Protection and Cyber Security
  - Pandemic Planning (including COVID-19)
  - Any other identified risk that may have a significant impact on business continuity

## 5.6 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 time scale 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.

## 5.7 Areas of Risk

Other general areas of risk which must be reviewed include, but are not limited to:

- Business continuity, including emergency preparedness
- Governance, including Service User safety, clinical and support interventions
- Environmental
- Finance, including insurance Governance
- Human resources
- Information governance, including cyber attacks
- Legal and regulatory
- Medicines
- Operations
- Premises
- Strategic
- Technology

## 5.8 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, processes, 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

## 5.9 Major Incidents - Business Continuity Plan including policy and procedures

- 5.9.1 Contingency plans for major incidents set out in the Business Continuity Plan will be kept up to date and kept in line with local and national guidance.
- 5.9.2 Business continuity plans will be subject to regular testing, monitoring and review as required.

## 5.10 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 monitored by a designated risk manager and the Registered Manager
- Accident, incidents, and events will be reported to the respective authority, e.g. Local Authorities, CCG's and other service users 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 and to the most senior person at Nursing Direct, as well as to the Registered Manager. It must also be reported as an incident for investigation and analysis using the usual method and for onward discussion at the appropriate governance meetings
- All completed incident events may form part of an annual (or more frequent) significant events report to be approved and signed off by the Registered Manager for organisational governance and continuous improvement purposes

## 5.11 Escalation Procedure

- 5.11.1 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.
- 5.11.2 Examples of issues that may require escalation include:
- Certain accidents, incidents or near miss events
  - Complex behaviours such as acts of violence in the workplace or threats to members of staff including Agency Workers
  - Deterioration of the health/mental health of Service Users; this may include those with a forensic history
  - Complaints/concerns that may trigger safeguarding or health and safety thresholds
  - The Registered Manager will liaise with the Safeguarding lead
  - Workplace health and safety conditions
  - The Registered Manager will liaise with the Safety Officer
  - Conflicts of interest
  - Information/data protection breaches
  - The Registered Manager will liaise with the Data Protection Officer

This list is not exhaustive and staff including Agency Workers should refer to individual risk management policies that identify when escalation is required, detail the arrangements for who staff including Agency Workers have to escalate to and within what timescales.

## 5.12 Significant Events

- 5.12.1 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.
- 5.12.2 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.
- 5.12.3 From time to time, significant events may serve as catalysts for major changes at Nursing Direct, affecting practices, Service User outcomes, or staff including Agency Worker structures. Documenting and sharing the details and impacts of such events may provide valuable insights for other organisations beyond the Nursing Direct team. 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.

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

- 5.13.1 Nursing Direct will ensure that learning from incidents is open, transparent, and focused on continuous improvement and outcomes.
- 5.13.2 Nursing Direct will ensure that staff including Agency Workers and stakeholders, will be involved in order to have the opportunity to share and learn from incidents and significant events.
- It is important for everyone to be able to participate as much as possible by giving and receiving information about the content of the meeting. For example, a breakdown of the event and learning so far, thoughts and recollections before the meeting and questions or other points to explore about remedial actions
- 5.13.3 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
  - Invite people from outside of Nursing Direct when, or if, this is appropriate (for example, people with specific sector or product knowledge, Service User representatives, the wider multidisciplinary health and social care team, Local Authorities, CCGs, and other service users, CQC)
  - 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 **CAS**  
The Central Alerting System (CAS) is a web-based cascading system for issuing patient safety alerts, important public health messages and other safety critical information and guidance to the NHS and others, including independent providers of health and social care
- 6.6 **MHRA**  
Medicines and Healthcare products Regulatory Agency which operates the Central Alerting System and issues CAS alerts
- 6.7 **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.
- 6.8 **Risk Scoring/Rating**  
Risk score involves the use of the 5x5 risk matrix, with impact and likelihood being multiplied to reach the risk score. The scoring system allows individual risks to be prioritised. Risk scores are not intended to be precise mathematical measures of risk, but are a useful tool to help in the prioritisation of action plans for the treatment of risk
- 6.9 **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 staffing numbers
- 6.10 **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
- 6.11 **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

## OUTSTANDING PRACTICE

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

- All staff including Agency Workers of Nursing Direct understand that risks can rarely be completely eliminated. They can, however, be anticipated and mitigated or minimised or reduced. 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 the purposes of information, learning and development as well as quality improvement
- All identified risks are acted upon with the processes 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 risks as well as how to report significant events, including accidents, incidents and near misses.

COMPLETED DATE:	23/06/2025
SIGN OFF DATE:	23/06/2025
REVIEW DATE:	23/06/2026
SIGNED:	 Marc Stiff – Group Managing Director