

HIQA OUTCOME 007

HEALTH SAFETY AND RISK MANAGEMENT

RISK MANAGEMENT POLICY

Issue Date:	June 2014
Reviewed:	10 th December 2015
Reviewed:	8 th August 2016
Reviewed:	25 th Sept 2017
Revision Date:	August 2018

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POLICY STATEMENT

Purpose:

The purpose of this policy is to outline the requirements for risk management referred to in Paragraph 16 of schedule 5 of the Health Act 2007 for all MooreHaven Centre staff.

It provides a framework for staff which includes identification, assessment, management and ongoing review of risks throughout the service.

The focus of risk management is on successfully managing risk rather than on the system of risk management. Risk management is a continuous process and MooreHaven Centre service strives to develop a risk management culture where staff members are encouraged to manage risks systematically.

Scope

This policy applies to all staff of MooreHaven Centre Services. It is designed to ensure:

1. That risk management practices are integrated into all aspects of service delivery rather than risk management being viewed as an isolated operation.
2. All hazards /risks are identified and managed proactively.
3. All incidents, complaints and near misses are effectively managed and responded to appropriately.

Responsibility

1. Overall responsibility for the management of risk rests on the Board of Management in conjunction with the General Manager of MooreHaven Centre Services
2. It is the responsibility of the Line manager(s) to ensure this policy and all procedures related to it are adhered to.
3. It is also the responsibility of each staff member to follow this policy and all procedures related to it.

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Defining Risk Management

The World Health Organization describes risk management as “a means of identifying, assessing, prioritizing and controlling risks across an organization, with a coordinated and cost-effective application of resources to minimize, monitor, and control the probability and/or impact of adverse events or to maximize the realization of opportunities”. It is a key element in providing safe and effective support to people within the service.

Risk Management Cycle

The process of risk management involves a cycle of identifying risks. Risks are identified from observation, incident accidents/near misses, reporting systems, individual risk assessments, complaints logs, evaluating their potential consequences and determining the most effective methods of reducing the chances of them occurring and reducing the impact if they do occur. The cycle is completed by a system of regular reviewing/monitoring and reporting. This cycle ensures arrangements for the identification, recording and investigation of and learning from serious incidents or adverse events involving residents, staff members and visitors.

Guidance for Designated Centre's Risk Management HIQA 2013



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Risk Identification

Risk identification determines what might happen that could affect the objectives of an individual or a service, and how those things might happen. The identification of a risk involves a balanced approach, which looks at what is and is not an acceptable risk. It should be a view based on the aspirations of the individual with a disability that aims to support them to achieve the best quality of life for that person.

MooreHaven Centre must also comply with the Safety Health and Welfare at Work Act (2005) with regard to the assessment of risk and sharing of information. MooreHaven Centre has in place a Health and Safety policy statement. Each home has an Individualized ancillary safety statement which includes specific Health and Safety measures and actions in place.

MooreHaven Centre has in place a Child Protection Policy and a Safeguarding of Vulnerable Persons at Risk of Abuse Policy which sets out clearly how the protection of vulnerable children and adults is placed at the core of the organizations' services. These policy documents detail what is to be done to protect children and adults, how it is to be done and who are the key people in the organisation to do it.

Risk Assessment

Risk assessment is the overall process of risk analysis and risk evaluation. Identifying what could go wrong? How big a problem is it? What else can we do? It involves collecting and reviewing information through observation, communication, reporting (Accident Incident Near Miss reports) and using this information to consider the risk and/or the person's right to pursue their wishes or preferences and balance these considerations with the duty of care to avoid situations of unnecessary and unconsidered risk. This is part of MooreHaven Centres' ongoing work with service users, and is reflected in all residents Individual Care Plans and Person Centered plans. Manual Handling Risk Assessments and General Risk assessments are carried out for each resident as part of their Individual Assessment Care Plan. When a risk is identified a General Risk Assessment Form is completed. The likelihood of an event occurring and the severity of the impact should it occur is used to produce an overall rating for the risk. The HSE impact table is used to assign a risk rating to an event based on the Likelihood by impact – see HSE Impact Table Page 10.

Risk Treatment/Controls

Risk treatment is the process of systematic analysis and informed decision making, about identified risks and includes the activity of exercising a duty of care where risks are identified in the overall aim of eliminating or reducing the level of risk. Plans should include actions to be taken to manage the risks, the persons responsible and any possible time frame for actions.

Measures and Controls in place to deal with specified risks

1. Missing Person

In the event that a person is deemed to be missing certain actions will be taken as outlined in the Attendance Monitoring and Missing Service User Policy. Attendance Monitoring and Missing Service User Policy ensures that all necessary steps are taken, quickly and effectively, to ensure the safe identification of the location of the individual. All staff available will be involved in the process of location identification after ensuring the safety of all other service users. Documentation will be prepared for dissemination to An Garda Síochána and others who may be involved in the search. The HSE and family will also be informed. The procedure gives clear direction on what the senior member of staff should do once the individual has been located and a review of the individual's Assessment care plan will take place along with a risk assessment. **See Missing Person Plan at the end of the Attendance Monitoring Policy & Missing Person Plan.**

2. Accident, Incident or near miss to a resident, visitor or staff

The Centre will take preventative measures by taking all reasonable precautions to guard against what we can reasonably foresee happening to ensure the safety of residents, staff and visitors to the Residential Homes.

These measures include:

1. Staff recruited are trained and qualified in their roles
2. A new staff member will receive an induction from the PIC and work beside a staff member in each of the residential homes for at least 3 hours.
3. All processes and procedures with regard to medication management are outlined and explained through the induction process. Clerical work with regard to medication charts and reports are explained in detail as part of the induction process.
4. All visitors to the homes are welcome provided their intended purpose is known and they sign the visitors' book
5. Good standards of housekeeping, cleanliness are kept to ensure the premises are safe with regard to any discernible hazards for residents, staff and visitors.
6. The Safety Statement outlines the measures to be taken to control the risks in each house for any identified hazards
7. Near Misses and incidents are recorded and suitable new measures are implemented to ensure no repeat occurrences as far as is reasonably practicable. An ABC chart is completed with regard to any 'acting out' incidents.
8. Annual maintenance is conducted on appliances/ installations or bi-annually, if necessary.

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9. Preventative maintenance is taken to fix in time, before something breaks down or reaches a stage of wear and tear that could lead to a breakdown
10. The Person in Charge monitors the standards of cleanliness in line with the weekly, monthly check sheets and by physically walking around and checking the properties.
11. A log of incidents and near misses is kept and they are analysed to learn from them, to track patterns and to take appropriate measures for dealing with them.

In the event of an injury to a resident, visitor or staff, as per First Aid Policy, the supervising staff will ensure that where necessary first aid is provided and the individual is cared for and made safe. The senior member of staff on duty will take responsibility to ensure that any actions required ensuring the safety of all residents, visitors and staff is undertaken immediately. Where required the PIC or the General Manager of the Service will be informed. Relevant documentation will be completed (Incident, Accident, Near miss form) along with witness reports. These reports will be submitted to the line manager for that area and logged within MooreHaven Centre Health & Safety Accident Incident near miss database for analysis.

3. Aggression, Violence/Self Harm. (See Management of Behaviours that Challenge Policy).

In certain circumstances when persons behave in a way that may compromise their welfare such as self harm, Actual or potential aggression and violence towards others, action may need to be taken to prevent someone from putting themselves or others at serious risk of harm. If a person who uses the service makes a decision to continue behaviour that is hazardous, risks will need to be reviewed and Individual Behaviour Management plans amended to ensure the safety of all concerned. Occasionally, restrictive measures may need to be put in place and crisis responses may be required where identified risks have an increased potential for harmful outcomes. In these circumstances a multi disciplinary approach is taken and the service users themselves are involved. Any actions taken in response to risk always take into account service users' rights and dignity as per MooreHaven Centre Mission statement. Specific training in MAPA is offered to staff members, this training works to enhance understanding and management of disruptive aggressive, and/or violent behaviour. Should the risk be deemed a medium to high risk then professional help will be sought.

If a person becomes highly anxious, then the following steps are taken:

The Residential Co-ordinator will visit the person in their home and spend time on a 1:1 basis to try and ascertain what is causing the anxiety.

If needs be seek medical help and inform families to get their co-operation.

Speak to psychiatrist re: current medication.

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Take resident to their GP for a full medical examination in case there is an underlying medical condition.

Once the reason(s) are ascertained speak to all personnel involved in case changes have to be made.

If there is any mention of self harm we follow the advice given by the psychiatrist. Should it be the first time self harm is mentioned the GP or out of hours CareDoc is informed and advice sought.

A risk assessment form is completed and the risk is ranked accordingly.

Risk Review/Monitoring

It is necessary to monitor and review the effectiveness of all steps of the risk management process. All Risk assessments carried out include review dates. The use of evidence-based practice, supervision and support are essential in providing an opportunity to discuss concerns and refine ideas, as well as to review the progress of the implementation of risk management. Service users and staff members have support from their key workers and line managers to uphold and inform better decision-making around risk. This process is also facilitated through the resident's person centred planning process.

Risk Reporting

By regulation, certain adverse incidents and other events are reported to the Chief Inspector in the Health Information and Quality Authority (the Authority). There are in existence within MooreHaven Centre many policies and procedures to support this Risk Management Policy. They are available for all residents, employees and families.

These include:

- Health and Safety statement
- Accident, Incident, Near Miss
- HSE Risk Assessment Tool / Impact Table
- Management of Behaviours that Challenge
- Manual Handling Risk Assessment Form
- General Risk Assessment Form
- Service users Charter of rights
- Protection of Vulnerable Adults – Trust in Care
- Missing service user
- Individual Behaviour Management support plans
- MooreHaven Centre Mission statement
- National HSE policy – Vulnerable Adults at Risk of Abuse Policy

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References

Health Information and Quality Authority. *Guidance for Designated Centres Risk Management* November 2013

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Reviewed: 8th August 2016

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