Clinical Risk Assessment and Management Policy

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1. Introduction

This policy when implemented should reflect anti-discriminatory practice. Any services, interventions or actions must take into account any needs arising from race, gender, age, religion and belief, language, communication, sensory impairment, disability.

Clinical Risk Assessment involves working with service users in the identification and further investigation of factors associated with an increased probability of specified risk behaviours occurring. The systematic collection of information to determine the degree to which risk is present, or is likely to pose problems at some point in the future for the patient or the general public. (McClelland, 2002)

Clinical Risk Management involves developing flexible strategies aimed at preventing the negative event from occurring or, if not possible, minimising the harm caused. (Best Practice in Managing Risk 2007)

South Staffordshire and Shropshire NHS Foundation Trust is committed to working with service users, their families and carers and fully acknowledge the pivotal role of all of those individuals in the identification and management of clinical risk.

South Staffordshire and Shropshire NHS Foundation Trust have a responsibility to ensure all employees have an understanding of the principles of Clinical Risk Assessment and Management. This policy will set the standards for the practice and training and will reflect the requirements of Care Quality Commission, and the Best Practice in Risk Management (2007), and the training for Clinical Risk Assessment and Management.

2. Purpose

This policy outlines the principles of Clinical Risk Assessment and Clinical Risk Management that will apply to all services provided by South Staffordshire and Shropshire NHS Foundation Trust and the training that employees will undertake to ensure safe and effective Clinical Risk Assessment and Management.

Clinical Risk Assessment and Clinical Risk Management are fundamental to the care of individuals in receipt of all Trust services.
3. Scope

This policy applies to all employees with direct contact with service users (clinical practitioners where competency in clinical risk assessment, formulation and management is required to fit their role). There are mandatory training requirements for this group of employees.

Other employees who have regular contact with service users, their families and carers will have an awareness of clinical risk issues and the important role in the care of service users.

Other practitioners who work with service users, their families and carers through partnership agreements, interagency integrated working arrangements, service level agreements, honorary contracts and educational placements will adhere to the principles and standards in this policy and will have access to the Trust training programme if they identify that need.

This Policy aims to:

- Clarify the scope and methods of clinical risk assessment
- Outline the systems by which clinical risk models and clinical risk assessments tools used in services are authorised and registered by the Trust
- Clarify the standards of Clinical Risk Assessment and Clinical Risk Management practice.
- Set standards for the documentation and communication of Clinical Risk Assessment and Intervention/care plans.
- Describe the training requirements for employees.

4. Requirement & Management of Clinical Risk Assessment

Clinical Risk Assessment and Clinical Risk Management are on-going, dynamic processes and will be under constant review, not once only activities. The level of identified risk for an individual informs treatment options. Formal clinical risk assessment will be completed on initial contact with new services throughout the service user’s journey and then at regular intervals will be reviewed; changes will be noted and acted upon.

Clinical risk assessment, clinical risk formulation, intervention/care planning will be completed and reviewed at critical points in the service user’s journey of care.

All assessments, reviews, plans, changes to plans and treatment options, are to be documented in the service user’s clinical record together with the evidenced rationale for any changes that have taken place. The Clinical Risk Assessment must be carried out by an appropriately trained and qualified member of staff in collaboration with the service user, their significant other and all related agencies.
5. Responsibilities

The Chief Executive is responsible for assuring this policy is implemented within the Trust.

The Director of Quality and Clinical Performance is responsible for:

- The development, monitoring and review of this policy and practice standards
- The provision of appropriate mandatory foundation training and education to support the policy standards.

The Associate Director of Quality and Risk is responsible for:

- Co-ordinating the Register for Approved Risk Assessment and Management Models and Tools
- The Clinical Audit Project Group that monitors the implementation of this policy and reports to the Quality Governance Committee.

The Risk & Claims Manager is responsible for:

- Developing the curriculae and co-ordinating the delivery of the training programmes in Clinical Risk Assessment and Management.

Service Directors, Clinical Directors and Service Managers are responsible for:

- Implementation and monitoring of this policy in their areas of responsibility
- Ensuring that systems and processes are in place and monitored to meet the requirements outlined in this policy
- The provision of appropriate specialist training and education to support the policy standards.

Team leaders, departmental heads, ward and unit managers are responsible for:

- Ensuring that all appropriate employees in posts (Qualified Practitioners) in the Trust clinical services attend the appropriate training within 3 months of appointment and with updates as outlined within section 7.2 of this policy.
- Implementation of the clinical risk assessment and management processes that are documented within this policy.

Trust employees working in roles to provide healthcare in direct clinical contact with service users (Qualified Practitioners) are responsible for:

- Ensuring awareness of the content of this policy
- Carry out clinical risk assessments in line with the standards detailed within this policy
- Maintaining their individual competence in Clinical Risk Assessment and Clinical Risk Management and attending training as required by their roles
6. **Process For Monitoring Compliance And Effectiveness**

Monitoring of the implementation of this policy will be through monitoring of and responding to exception reports including Serious Incidents, incidents and near misses.

7. **References**

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