



Risk Assessment Form

Use this form for any detailed risk assessment unless a specific form is provided. Refer to your Summary of Hazards/Risks and complete forms as required, including those that are adequately controlled but could be serious in the absence of active management. The Action Plan and reply section is to help you pursue those requiring action.

Name of Initial Assessor/Reviewer	John McLean	Post Held:	MR Safety Expert	
Department:	Imaging	Date (Initial Review):	8/2/2018	
Subject of Assessment: E.g.: hazard, task, equipment, location, people				

RAH MRI scan room and control suite

Hazards (Describe the harmful agent(s) and the adverse consequences they could cause)

The static magnetic field

Description of Risk

Describe the work that causes exposure to the hazard, and the relevant circumstances. Who is at risk? Highlight significant factors: what makes the risk more or less serious – e.g.: the time taken, how often the work is done, who does it, the work environment, anything else relevant.

Typically we aim to constrain static magnetic field levels of >0.5mT (5Gauss) to the MR scanner room. This defines the 'MR environment' as per the MHRA guidelines. When, for whatever reason, the 0.5mT field spills into adjacent rooms, these rooms are typically identified and form part of the Controlled Access Area (CAA) i.e. persons entering this area must be made aware of the risks and will typically complete an MR checklist. The 0.5mT static field level originates from a field strength that may be likely to interact adversely with a person's medical device.

At the RAH, it was noted during acceptance testing by MR physics that the 0.5mT field spills very slightly into the MR control room at the scanner room window but the MR control room does not form part of the formal, CAA, as it typically would under these circumstances. Thus, we consider here the risk to staff and patients from the 0.5mT static field not being classified as a CAA.

The overspill of the 0.5mT static field is very slight and only at an area very close to the scanner room window. A place that a patient would certainly not be present and a place which staff are highly unlikely to be present. Thus, we consider the slight spillage of the 0.5mT to be a low risk to patients and staff who may have active implanted medical devices.

Existing Precautions	Describe how they might fail to prevent adverse outcomes.
The position of the 0.5mT static field spill over is not accessible to patients. Staff are also highly unlikely to be at this position.	A staff member might proceed to this exposed area for no reason, though it should be noted the area of concern is not easily accessible i.e. one would have to climb over the MR
If a member of staff is required to work in the immediate vicinity of the MR room window (within 30cm) in the CT/MR control room, then they must complete an MR checklist, similar to as if they were performing duties within the CAA.	console worktop. Furthermore, such a staff member must first, have an active implanted medical device, and then, get this implant to the point of concern. Something which is unlikely and high unlikely respectively.
MR Staff will be made aware of the risk of the 0.5mT field line over spill in the departmental local rules.	
While not a defined MR CAA, the control room to the shared MR/CT control suite does have a degree of restricted access.	

Level of Risk - Is the control of this risk adequate?

Give more than one risk level if the assessment covers a range of circumstances. You can use the 'matrix' to show how 'likelihood' and 'consequences' combine to give a conclusion. Also, be critical of existing measures: if you can think how they might fail, or how they could be improved, these are indications of a red or orange risk.

Risk Matrix

Likelihood	Impact/Consequences				
	Negligible	Minor	Moderate	Major	Extreme
Almost Certain	Medium	High	High	V High	V High

Likely	Medium	Medium	High	High	V High
Possible	Low	Medium	Medium	High	High
Unlikely	Low	Medium	Medium	Medium	High
Rare	Low	<u>Low</u>	Low	Medium	Medium

Very High	High	Medium	Low

Current risk level

Given the current precautions, and how effective and reliable they are, what is the current level of risk? **Green** is the target – you have thought it through critically and you have no serious worries. Devise ways of making the risk green wherever you can. **Yellow** is acceptable but with some reservations. You can achieve these levels by reducing the inherent risk and or by effective and reliable precautions.

High (Orange) or Very High (Red) risks are unacceptable and must be acted on: use the Action Plan section to summarise and communicate the problems and actions required.

Action Plan (if risk level is High (Orange) or Very High (Red)

Use this part of the form for risks that require action. Use it to communicate, with your Line Manager or Risk Coordinator or others if required. If using a copy of this form to notify others, they should reply on the form and return to you. Check that you do receive replies.

Describe the measures required to make the work safe. Include hardware – engineering controls, and procedures. Say what you intend to change. If proposed actions are out with your remit, identify them on the plan below but do not say who or by when; leave this to the manager with the authority to decide this and allocate the resources required.

Proposed actions to control the problem List the actions required. If action by others is required, you must send them a copy	By Whom	Start date	Action due date

Action by Others Required - Complete as appropriate: (please tick or enter YES, name and date where appropriate)

Report up management chain for action	
Report to Estates for action	
Contact advisers/specialists	
Alert your staff to problem, new working practice, interim solutions, etc	

Reply

If you receive this form as a manager from someone in your department, you must decide how the risk is to be managed. Update the action plan and reply with a copy to others who need to know. If appropriate, you should note additions to the Directorate / Service Risk Register.

If you receive this as an adviser or other specialist, reply to the sender and investigate further as required.

Date of last review	As per QPulse record	Next review date:	As per QPulse record