NHS Greater Glasgow and Clyde

ID: DR-GGC-RISK-067

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	Blair Johnston	**Post Held:**	Clinical Scientist
Department:	**MRI Physics**	**Date (Initial Review):**	**24/01/19**

Subject of Assessment: E.g.: hazard, task, equipment, location, people

Use of ferromagnetic sound recording equipment in the Magnet Room

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

MRI scanners generate a very powerful magnetic field that strongly attracts ferromagnetic items into the bore of the magnet.

- Projectile risk – damage to the scanner, equipment or may hit someone in its path
- Rotational risk – device may rotate to align with the magnetic field

These effects are especially pronounced at higher field strengths.

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.

- This risk assessment relates to ferromagnetic sound recording equipment. If non-ferromagnetic then there is no risk from the static field.
- Anyone in the scan room when recording equipment brought in is at risk
- No risk to patients/volunteers as this equipment should not be brought in or used unless the room is empty
- There is potential for sound recording equipment to be damaged by introducing it to a large static magnetic field

Existing Precautions

Summarise current controls In place	**Describe how they might fail to prevent adverse outcomes.**
- Devices will be checked beforehand using a handheld magnet and will not enter the room unless deemed safe to do so by an MRSE or an HCPC registered clinical scientist under the delegated authority of an MRSE - Staff must not stand between the device and the MRI scanner - The equipment will not be required in the room on a regular basis - Equipment should be brought into the room slowly	There is always the potential for human error and for a member of staff to inadvertently take a strongly ferromagnetic object into the scanning room.

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	**Low**	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