

Appendix 9: Generic Risk Assessment

Site Name:		Block Name:	
Site Address:		Block No:	
Post Code:		Block Type:	
Site Reference No (SRN):		Surveyor Name:	
Site Type:		Survey Date:	
NHS Board:			

GENERIC RISKS:	CONTROL MEASURE
HAZARD	CONTROL MEASURE
REMOTE SITES	<p>Some of the sites within the NHS estate are remotely located, particularly in the NHS Western Isles, NHS Orkney and NHS Shetland areas. These will create their own unique challenges in terms of carrying out inspections, and surveys will require to be flexible and adaptable when scheduling visits to these locations as the staff may become storm or fog bound, despite the best intentions of the ferry or flight operators, as such all surveyors should carry the following items at all times for any remote locations.</p> <ul style="list-style-type: none"> • Mobile phones and charges • Cash to facilitate unexpected additional overnight stays or delays • Spare warm clothing • Emergency rations, e.g. food, drinks, chocolate etc. • Fully stocked first aid kit <p>In addition, when inspecting remote sites, all surveyors should contact their office once survey is complete, and when back at main base</p>
LONE WORKING	All inspections to be carried out by minimum 2 surveyors, although they can split up to cover various locations while on site. The only exception to this would be very small sites, where it is not cost effective to send 2 surveyors. In these instances, the Survey Partner will ensure their Lone Working policy is enforced.
WORKING AT HEIGHT – ACCESS	All building appraisal will generally be undertaken from ground level, but where safe access is available, e.g. parapet walls or barriers over 1,100mm high, flat or pitched roof areas can be surveyed, access to these areas will be strictly in accordance with any roof permits issued by the local NHS Board
SITE ACCESS	All survey teams will be briefed in local health and safety matters by the local site contact and advised of any particular site specific hazards. All surveyors will strictly comply with these rules
POSSIBLE HAZARDOUS MATERIALS	All surveyors should obey any statutory signs at premises warning of hazardous materials and comply with all instructions and safety measures detailed
SUSPECT ASBESTOS CONTAINING MATERIALS (ACMs)	All surveyors should familiarise themselves with any available site asbestos management plan and be aware of any locations where asbestos may be present
PERSONAL PROTECTION EQUIPMENT (PPE)	All surveyors will be issued with appropriate PPE, e.g. high visibility vests etc. these should be worn at all appropriate times
RESTRICTED HOSPITAL AREAS	All surveyors will access any restricted areas, e.g. intensive care wards, operating theatres strictly by local agreement, and will wear any required additional clothing such as gowns, masks etc.
INFECTION CONTROL	<p>All surveyors will utilise hospital provided hand wash facilities before entering and leaving all ward areas. In addition, no ties will be worn during surveys to minimise risk of cross infection</p> <p>No surveyor will enter any wards where winter vomiting or similar are present</p>

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MANUAL HANDLING	No manual handling will be involved with this survey exercise	
CLIENT VEHICLES	All surveyors should be aware that certain areas within the hospitals will have heavy vehicular traffic e.g. accident and emergency, delivery areas etc. as such they will require extra vigilance in these areas where electric powered vehicles are present. All surveyors will wear high visibility vests for all external area at all times	
FIRE SUPPRESSION SYSTEMS	All surveyors should seek advice from local NHS contracts in the event of any areas having gaseous or similar fire suppression systems. All surveys should then be undertaken strictly in accordance with written procedures	
GENERAL FIRE AND SAFETY PROCEDURES	When inspecting occupied buildings, all surveyors should familiarise themselves with local procedures, locations of fire exits, timing of weekly alarm test etc.	
SITE SPECIFIC RISKS:		
HAZARD	CONTROL MEASURE	
SHEET TO BE REVIEWED AND SIGNED BY ALL SURVEYORS		
DATE:	NAME:	SIGNATURE:
DATE:	NAME:	SIGNATURE:
DATE:	NAME:	SIGNATURE:
DATE:	NAME:	SIGNATURE:
DATE:	NAME:	SIGNATURE:
DATE:	NAME:	SIGNATURE:
DATE:	NAME:	SIGNATURE: