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|   | **Interim Risk Assessment & Risk Management Protocol – Use of ‘as directed’ labelled medications** |

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| **RISK ASSESSMENT** |
| **Name** |  | **Reference Number** |  |
| **Identified Risk** | Risk of medication Errors due to use of ‘as prescribed’ medication |
| **Assessment Date** | 28/06/2023 |
| **Risk Factors (Please circle the Likelihood & Severity scorings)**  | **Likelihood** | **Severity** |
| Rare | 1 | None / Trivial | 1 |
| Unlikely | 2 | Minor / No Injury | 2 |
| Likely | 3 | Moderate / First Aid | 3 |
| Very Likely | 4 | Severe / Medical assistance | 4 |
| Almost Certain | 5 | Extreme / Fatal | 5 |
| **Risk Matrix** | **=** | **Severity** |
| **Likelihood** | **1** | **2** | **3** | **4** | **5** |
| **1** | 1 | 2 | 3 | 4 | **5** |
| **2** | 2 | 4 | 6 | 8 | 10 |
| **3** | 3 | 6 | 9 | 12 | 15 |
| **4** | 4 | 8 | 12 | 16 | 20 |
| **5** | 5 | 10 | 15 | 20 | 25 |
| **Risk Level and Action** | **Level** | **Action** |
| 1 – 4 | NO CURRENT RISK | No further action, but ensure controls are maintained and monitored |
| 5 – 9 | LOW RISK | Develop management plan and review quarterly |
| 10 – 16 | MEDIUM RISK | Develop management plan and review monthly |
| 16+ | HIGH RISK | Develop management plan and review subject to each occurrence |
| **Assessment Summary & Ongoing Notes****(List here the medications that are labelled ‘as directed’ and the notes on resolving through to completion.)** |  |
| **Author(/s)** | **Print Name** | **Position / Relation** | **Signature** |
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| **RISK MANAGEMENT PLAN** |
| **Purpose** | The purpose of this risk management plan is to identify the increased risk of medication Errors due to use of ‘as prescribed’ medication |
| **Risks** | **The following risks need to be considered when using medications labelled ‘as directed’****• Risk of medication error causing harm to the individual for whom the medication is prescribed** |
| **Immediate Risk Mitigation** | All medications that are administered to individuals are required to have specific administration instructions. This can be an issue and is often picked up on an audit or if there is an error. If ‘as directed’ labelled medications are found within a service, the following steps will be taken to mitigate the interim risk whilst the issue is resolved; **Step 1 - Carry out an audit and identify all medications that do not contain proper administration instructions or have ‘as directed’ as the instruction.** **Step 2 – Immediate action - Ensure that the relevant information is available from the BNF for that medication and is available and accessible for staff to refer to.** **Step 3 – Make a written request to the prescriber to add the specific administration details for that individual’s medication. While this is in progress continue to make sure that all staff who administer medication have access to the BNF pages relevant to that medication.** **(Add in extra steps that pertain to the operations of your service)**  |
| **Author(/s)** | **Print Name** | **Position / Relation** | **Signature** |
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| **Cosignatories** **(Staff Team)** | **Print Name** | **Position / Relation** | **Signature** |
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|  | **RISK ASSESSMENT REVIEW**  |  |
| **Date** | **Notes** | **Name & Signature** |
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