

# 9 Risk assessment and other issues in a nursing home

## Background

**Name:** Jacquey Thurlow

**Safety representative:** Six years

**Job-title:** Staff nurse

**Employer:** Cheviot Nursing Home, (Balkerne Gardens Trust). Essex

**Setting/speciality:** 31 bedded nursing home, run by charitable trust (local)



**“I originally worked as a staff nurse in the community. The district nurse I worked with was an RCN Steward and Health & Safety Representative, and she encouraged me to participate in various meetings and activities. I became involved but eventually became generally disillusioned with the NHS and left its employ. Four years ago I began work in a Nursing Home.**

### Developing the role in a nursing home

At my interview the director of the trust saw that I was an RCN safety representative and her response was ‘Yippee!’ Both she and the manager were very pleased for me to continue with my role which I did not begin to develop until after I had settled into life at Cheviot Nursing Home.

I started by having discussions with the nominated health and safety person who looked after all four of the units within the trust. When she emigrated, it was decided that health and safety (H&S) responsibility would be better dealt with within each individual unit.

I spend one or two days a month working on a variety of issues. I’ve developed an annual visual checklist for all the rooms in the building, written policies and procedures,

delivered training Sessions and participate in the monthly checks which are performed throughout the building.

The role is quite different in a nursing home to that of a hospital ward, in that the whole building is covered, including the kitchen, boilers, bathrooms, inside and outside, not just one area. A lot of this work isn’t very exciting but it is important and necessary for the safe and smooth operation of our service.

I meet with the H&S forum (which covers the four units) every three months and have raised awareness of various issues such as: security, criminal records bureau checks, staffing, building security. For example, when a visitor comes there are various health and safety issues – we have a door answering system with intercom but someone needs to meet the visitor, make sure they sign in as they enter, and that they know the fire drill. We also need be aware of the client response to the visitor to ensure that they are welcome. I have also highlighted nursing to the overweight and obese patients to raise awareness of the limitations we could be faced with in the future.

I look at the risk assessments, to see that they are updated every month. I look at things like the alarm system, personal safety alarms, check that the H&S policy is on

the notice-board, and H&S inductions have been carried out for new staff. I do H&S training every month at one or other of the units. I plan to develop a second stage of training to update staff.

We're lucky in that health and safety is well supported throughout organisation. We have very good staffing levels and high standards of care which our Commission for Social Care Inspection report reflects. Also because there is a good regular workforce, it means we can develop relationships with people, and gradually build up their knowledge base.

I attend the RCN regional health and safety representative meetings in Cambridge regularly and find them a very useful tool. At these meetings participants are able to 'network', share good practice and come away having learned something useful.

### **Risk assessments and monthly check**

We undertake a risk assessment throughout the entire

premises, and perform monthly supervised checks. It's extremely well supported. Everyone's encouraged to get involved; nurses, assistants and kitchen staff also take part. Staff carry out the safety checks. Each month a new person does it, so that gradually everyone becomes more aware of the H&S issues. If I tried to get the same thing across sitting in a classroom people would get bored. Getting them involved is a good learning experience and helps to make people more aware of H&S in general.

At the end of the day if everyone on the premises is aware of health and safety issues we will all be working in an environment where staff, residents, visitors, contractors, etc. feel safe and secure. What better surroundings to work in! This in turn leads to a happy and productive workforce."

### **Becoming a RCN safety representative**

If you are interested in becoming a safety representative you can find further information on the RCN website [www.rcn.org.uk/support/becoming\\_activist/how\\_to\\_become\\_a\\_representative](http://www.rcn.org.uk/support/becoming_activist/how_to_become_a_representative)