


Model Risk Assessment						Ref no.	COVID19	 NFCC National Fire Chiefs Council	
Activity	Fire and Rescue Services Assisting the Ambulance Service – Ambulance Driving and Patient/Ambulance personnel support					Status	Final		
Location						Initial assess.	TBC		
Section						Reviewed	TBC		
Assessed by				Specific		Next review	TBC		
Role /No/Dept.				Generic	X	Version no.	TBC		
Severity		Likelihood					Risk Rating		
		1. Rare	2. Unlikely	3. Possible	4. Very Likely	5. Almost Certain			
1	No Injury	1	2	3	4	5	Low Risk 1-5	Proceed	
2	First Aid	2	4	6	8	10	Medium Risk 6-12	Review control measures - proceed	
3	7 Day Injury	3	6	9	12	15	High risk 15-25	Do Not Proceed	
4	Major Injury	4	8	12	16	20			
5	Fatality	5	10	15	20	25			

Generic Hazard and Risk Information:

Driving Ambulances:

- Under normal road conditions
- Under blue light response conditions
- Conducting low speed manoeuvres / reversing

Providing Patient/Ambulance personnel support:

- Providing support to patients and ambulance personnel at all incident types
- Providing support to both patient and ambulance personnel at suspected/confirmed COVID-19 incidents

Activity	Hazard	Risk	Person at Risk		Existing Control Measures	Risk Rating			ACCEPT (Y or N)	Further control measures implemented from action plan – re-score	New Risk Rating			ACCEPT (Y or N)
			Staff	Other		L	X	S = RR			L	X	S = RR	
Ambulance Driving Preparing for driving duties	Fatigue prior to shift	<ul style="list-style-type: none"> Major injury Physiological stress Psychological stress Minor Injury 	✓	✓	<ul style="list-style-type: none"> Adhere to work time directive and internal welfare management systems Sufficiently nourished Sufficiently Hydrated Adequately rested Fit and well for duty Adherence to Management of Occupational Road Risk & EFAD Code of Conduct Adherence to Drugs and Alcohol Policy 	1	4	4	Y					
Preparing for driving duties including responding to incidents and routine driving	<p>Lack of vehicle awareness and unfamiliar use</p> <p>Inadequate vehicle familiarisation and training</p>	<ul style="list-style-type: none"> Vehicle Collision resulting in injury or death due to vehicle familiarity Major injury Physiological stress Psychological stress Vehicle collision resulting in damage due to vehicle familiarity Minor Injury 	✓	✓	<ul style="list-style-type: none"> Must have valid driving licence/ licence category Personal hygiene - washing hands, use of hand sanitising gels as per PHE guidance. Personnel to receive adequate familiarisation, training and instruction on Ambulance Service vehicles from competent staff. Vehicle inspection and checks completed and recorded at start of each shift. Checks completed following initial instruction and training that has been given by suitably trained and competent staff. Vehicle Adequately stocked with PPE and consumables Report and action any vehicle faults as per AS Procedures Induction training on all equipment that FRS personnel will use or be exposed to. 	1	5	5	Y					
Preparing for driving duties including responding to incidents and routine driving under time critical conditions i.e.	Lack of vehicle awareness and unfamiliar use	<ul style="list-style-type: none"> Vehicle Collision resulting in injury or death due to vehicle familiarity Major injury 	✓	✓	<ul style="list-style-type: none"> Instruction and training will be given by competent personnel on the first day when attending for duty. Vehicle induction training will include: 	3	5	15	N	AS to provide any vehicle literature that details use, layout and vehicle checks	2	5	10	Y

COVID-19 Pandemic which sees immediate request for FRS assistance	Inadequate vehicle familiarisation and training	<ul style="list-style-type: none"> Physiological stress Psychological stress Vehicle collision resulting in damage due to vehicle familiarity Minor Injury 			<ol style="list-style-type: none"> Daily inspection routine and relevant recording mechanisms The Safe operation of the vehicle and instrumentation Familiarisation with the operation and limits of bay doors Practical driver training <ul style="list-style-type: none"> All activities to be conducted under the guidance and supervision of competent person 					AS to provide any vehicle aide memoirs for FRS staff use						When first introduced to vehicle, time to be spent familiarising and driving vehicle to gain experience
Being Alerted and responding to incidents when on routine activity on ambulance	Sudden transition from routine activity to an emergency response	<ul style="list-style-type: none"> Musculoskeletal injury Increased heart rate Stress Vehicle collision 	✓	✓	<ul style="list-style-type: none"> Maintain awareness of surroundings 'Drive to arrive' principles Adhere to Emergency vehicle response procedures 	1	3	3	Y							
Being alerted and responding to incidents when not already on ambulance at time of call i.e. on a station	Colliding with objects; Slips, trips or falls Struck by moving vehicle	<ul style="list-style-type: none"> Major injury Musculoskeletal injury Increased heart rate Minor injury 	✓		<ul style="list-style-type: none"> Appropriate FRS issue footwear to be worn Walk don't run Access Routes kept clear/use of designated walkways Awareness of moving vehicles. Illumination of routes Use of signage to identify hazards Remain calm and pre-plan routes 	1	4	4	Y							
Response driving, proceeding to incidents under blue light conditions	Road Traffic Collisions Familiarity of Ambulance Service vehicles; Exposure to loud noise	<ul style="list-style-type: none"> Loss of life Major injury Musculoskeletal injury Damage to Service vehicles Reputational damage if incident occurs 	✓	✓	<ul style="list-style-type: none"> Suitable driver familiarisation and training of AS vehicle being driven Vehicle inspection and checks using AS daily check Ensure doors, lockers and equipment are secured before moving off Use vehicle seat belts Appropriate use of visual and audible warning devices (lights and horns) as per AS policy & procedures Utilise satellite navigation if required Evaluate weather and road conditions 	1	5	5	Y	Healthy co-workers in non-clinical settings should follow basic hygiene messaging but do not require PPE.						Any worker who becomes unwell with symptoms suggestive of Covid-19 should remove themselves from work and self-isolate

					<ul style="list-style-type: none"> • Windows to be closed when audible warning devices sounding • Adhere to Procedures for driving under Emergency response conditions • 'Drive to arrive' principles • Don appropriate PPE upon arrival, relevant to incident type. • All collision's will be reported and dealt with through AS procedures. FRS Control, H&S team also informed. • Adherence to AS Management of Occupational Road Risk & EFAD Code of Conduct • Compliance with Highway code 									
Routine, non-emergency response driving	Road Traffic Collisions; familiarity of Ambulance Service vehicles	<ul style="list-style-type: none"> • Loss of life • Major injury • Musculoskeletal injury • Damage to Service vehicles • Reputational damage if event occurs 	✓	✓	<ul style="list-style-type: none"> • Suitable driver familiarisation and training of AS vehicle being driven • Carry out vehicle inspection and checks as per AS procedure. • Ensure doors, lockers and equipment are secured before moving off • Use vehicle seat belts • Utilise satellite navigation if required • Evaluate weather and road conditions • Adhere to Speed limits and road regulations • All collision's will be reported and dealt with through AS procedures. FRS Control, H&S team also informed. 	1	5	5	Y	<p>Healthy co-workers in non-clinical settings should follow basic hygiene messaging but do not require PPE.</p> <p>Any worker who becomes unwell with symptoms suggestive of Covid-19 should remove themselves from work and self-isolate</p>				
Operating on or near carriageways	Struck by moving vehicles	<ul style="list-style-type: none"> • Loss of life • Major injury • Musculoskeletal injury 	✓		<ul style="list-style-type: none"> • Safe positioning of ambulance • Ensure sufficient resources to establish safe system of work supported by fire and police. • Utilise ambulance visual warning devices • Ensure it is safe to dismount ambulance • Utilise hi-vis jackets 	1	5	5	Y					

					<ul style="list-style-type: none"> • Dismount on safest side of ambulance, • Request Highways Authority for incidents on trunk roads • Operate inside any cordons that have been established 									
Low speed manoeuvring	Collisions with people, vehicles or objects	<ul style="list-style-type: none"> • Loss of life • Major injury • Minor Injury • Musculoskeletal injury • Damage to Service/other vehicles 	✓	✓	<ul style="list-style-type: none"> • Inform person's in vicinity before moving vehicles • Visual inspection of area prior to manoeuvre • Appoint guides to assist with manoeuvre outside of vehicle, using hand signals and hand-held radio where required. • Adhere to agreed signals from appointed colleague • Observe cameras, vehicle sensors and/or other driver assistance features • All collision's will be reported and dealt with through AS procedures. FRS Control, H&S team also informed. • Adherence to AS Management of Occupational Road Risk • Comply with Highway code 	1	5	5	Y					
<u>Patient/Ambulance Personnel support</u> Manual Handling (Lifting, moving, operating equipment)	Poor lifting/handling techniques; Carrying / using kit e.g. stretcher / wheelchair; Getting kit in and out of ambulance / properties with equipment; Slips, trips or falls whilst moving equipment	<ul style="list-style-type: none"> • Major Injury • Minor injury • Fracture • Musculoskeletal injury 	✓	✓	<ul style="list-style-type: none"> • Undertake dynamic risk assessment for task to be carried out • Utilise Manual handling hierarchy of hazard control measures • Personal hygiene - washing hands, use of hand sanitising gels. • Adopt correct manual handling techniques as per training • Reduce the size or weight of the load • Utilise mechanical advantage to assist • Group manual handling activities are co-ordinated • Pre-plan and assess any routes to be used • Keep travel distances as short as possible 	2	3	6	Y	All crews to be familiar with and adhere to PHE guidance on COVID-19 PPE – Table 2 & Table 4. (12 April 2020) AS will provide appropriate PPE to be used in divergent settings.				

					<ul style="list-style-type: none"> Utilise any carrying handles on suitably rated equipment Equipment with wheels to be pushed to scene and not carried Adhere to safety signage Request additional resources if required Instruction and training of lifting and moving aids to be provided by AS to FRS personnel. PPE for suspected confirmed infectious substances must be aligned to PHE and AS guidance 									
Manual Handling (Lifting, moving, handling patients or casualties)	<p>Poor lifting/handling techniques;</p> <p>Using equipment such as stretcher / wheelchair to move patients;</p> <p>Lifting patients into / onto stretchers / wheelchairs, carry chairs;</p> <p>Movement of patients up and down stairs or in confined or restricted spaces;</p> <p>handling patients from floors;</p>	<ul style="list-style-type: none"> Minor injury Fracture Musculoskeletal injury 	✓	✓	<ul style="list-style-type: none"> Undertake dynamic risk assessment for task to be carried out Utilise Manual handling hierarchy of hazard control measures Personal hygiene - washing hands, use of hand sanitising gels as per PHE guidance. Utilise correct PPE for task Instruction and training of lifting and moving aids to be provided to FRS Utilise mechanical advantage or manual handling aids to assist Adopt correct manual handling techniques as per training Reduce the size or weight of the load e.g. remove heavy clothing Group manual handling activities are co-ordinated Pre-plan and assess any routes to be used. Keep travel distances as short as possible Utilise any carrying handles on suitably rated equipment Equipment with wheels to be pushed to scene and not carried Adhere to safety signage 	2	3	6	Y	<p>AS staff will ensure that as far as reasonably practicable, vehicles are fully stocked with the available small handling aids as per inventory.</p> <p>They will be used under the supervision of AS staff, ensuring that aids are always used where appropriate and communicated to FRS staff.</p> <p>All crews to be familiar with and adhere to PHE guidance on COVID-19 PPE – Table 2 & Table 4. (12 April 2020)</p> <p>AS will provide appropriate PPE to be used in differing settings.</p>				

					<ul style="list-style-type: none"> Request additional resources if required Hoist and vehicle winches to be used where available for movement of patients. Only operated by AS staff or FRS staff who have received suitable training. PPE for suspected confirmed infectious substances must be aligned to PHE and AS guidance. 									
Moving/Lifting Bariatric Patients	<p>Contact with casualties / fatalities</p> <p>Contact / possible exposure to COVID-19</p>	<ul style="list-style-type: none"> Crush injuries Muscular skeletal Injuries Contamination of bodily fluids Fatigue Slips trips and falls 	✓	✓	<ul style="list-style-type: none"> Utilise Manual handling hierarchy of hazard control measures Instruction and training of lifting and moving aids to be provided to FRS Avoid manual handling if Possible, e.g. patient self-release or place self in mechanical aid. Utilise mechanical advantage or manual handling aids to assist Adopt correct manual handling techniques as per training Reduce the size or weight of the load e.g. remove heavy clothing Ensure all Group manual handling activities are co-ordinated Pre-plan and assess any routes to be used and Keep travel distances as short as possible Utilise any carrying handles on suitably rated equipment Equipment with wheels to be pushed to scene and not carried Adhere to safety signage Request additional resources if required Follow PHE and governmental guidance Decontamination procedures following 'possible' exposure 	2	5	10	Y	<p>AS staff will ensure that as far as reasonably practicable, vehicles are fully stocked with the available small handling aids as per inventory.</p> <p>They will be used under the supervision of AS staff, ensuring that aids are always used where appropriate and communicated to FRS staff.</p> <p>All crews to be familiar with and adhere to PHE guidance on COVID-19 PPE – Table 2 & Table 4. (12 April 2020)</p> <p>AS will provide appropriate PPE to be used in differing settings.</p>				

Use of medical equipment	Inappropriate or incorrect use of equipment	<ul style="list-style-type: none"> Potential Injuries of varying degree/loss of life caused by inappropriate/incorrect use 	✓	✓	<ul style="list-style-type: none"> Fire Service personnel given instruction/training by Ambulance Service staff on equipment they may be expected to use prior to use. Medical equipment would only be used in support of Ambulance Service clinician and under their strict guidance, supervision and instruction. Competent and qualified Ambulance Service staff to lead in operation of equipment, and only supported by FRS staff in exceptional circumstances when the above criteria have been met and its use would improve the outcome for patient Medical equipment suitably cleaned / decontaminated after use under supervision of Ambulance Service clinician and in line with PHE guidance Personal hygiene - washing hands, use of hand sanitising gels in line with PHE guidance Utilise protective gloves and any other PPE as per PHE guidance 	1	5	5	Y					
Dealing with incidents where infectious substances/biohazards may be present	Contact with patients with blood borne diseases, flu, scabies etc. Exposure to biohazards	<ul style="list-style-type: none"> Biological infection Staff become infected; become ill; potentially resulting in death 	✓		<ul style="list-style-type: none"> Dynamic risk assessment to carried out on all occasions Adhere to PHE Infection control procedures. Personal hygiene - washing hands, use of hand sanitising gels as per PHE guidance. FRS staff will only assist ambulance service where the correct levels of PPE are obtained. PPE for suspected confirmed infectious substances must be aligned to PHE and AS guidance Staff vaccinations as per Service policy 	1	5	5	Y	<p>ALL activities that are to be undertaken in supporting AS will only be done under strict Supervision, guidance and instruction of AS staff</p> <p>The strictest adherence to the existing control measures specifically in relation to good and thorough hygiene, PPE, decontamination and safe practices under the supervision and</p>				

					<ul style="list-style-type: none"> Staff required to assess environment when dealing with patients (especially where needles may be prevalent) All activities to be conducted in support of and under strict supervision, guidance and instruction of AS staff. Decontamination of equipment/PPE to be undertaken in accordance with AS procedures Correct disposal methods for contaminated PPE 					<p>guidance of AS staff must be adopted.</p> <p>All crews to be familiar with and adhere to PHE guidance on COVID-19 PPE – Table 2 & Table 4. (12 April 2020)</p> <p>AS will provide appropriate PPE to be used in differing settings.</p>				
Dealing with incidents where the patients are suspected or confirmed of having COVID-19	<p>Close Contact with patients;</p> <p>Exposure to biohazard</p> <p>Exposure to COVID-19</p>	<ul style="list-style-type: none"> Contract COVID-19 Biological infection 	✓		<ul style="list-style-type: none"> Prohibit eating, drinking and smoking in hazard areas Dynamic risk assessment to be carried out on all occasions Adhere to Infection control and hygiene policies & procedures Personal hygiene - washing hands, use of hand sanitising gels as per PHE guidance. PHE and government guidance in place for COVID-19 and ambulances trusts As far as reasonably practicable a distance of 2-metres will be maintained from the patient Where close patient contact is required, strict PPE procedures must be adopted. The minimum PPE level will reflect PHE and government guidance PPE must strictly follow the guidance provided in the 'NFCC COVID-19 PPE Guidance (April 2020)' Personal Decontamination procedures to be undertaken following incident's in line with AS, PHE, NFCC and government guidance for COVID-19; 	3	5	15	N	<p>ALL activities that are to be undertaken in supporting AS will only be done under strict Supervision, guidance and instruction of AS staff</p> <p>The strictest adherence to the existing control measures specifically in relation to good and thorough hygiene, PPE, decontamination and safe practices under the supervision and guidance of AS staff must be adopted.</p> <p>All crews to be familiar with and adhere to PHE guidance on COVID-19 PPE – Table 2 & Table 4. (12 April 2020)</p> <p>AS will provide appropriate PPE to be used in differing settings.</p>	2	5	10	Y

					<ul style="list-style-type: none"> • Ensure correct PPE is being worn • Where possible, request animals/pets be locked away outside or in other rooms • Ambulance Service to contact Control to request RSPCA if required 					be used in differing settings				
Attending RTCs	<p>Moving vehicles/traffic</p> <p>Sharps, glass dust etc.</p> <p>Bodily fluids from casualties</p>	<ul style="list-style-type: none"> • Loss of life • Major injury • Head injury • Minor injury • Inhalation of dust • Eye Injury • Musculoskeletal injury • Biological hazards 	✓	✓	<ul style="list-style-type: none"> • Initiate cordons • Awareness of moving vehicles • Helmets to be worn • Appropriate high visibility PPE to be worn • Suitable RPE to be worn in risk area i.e. near potential glass dust; close patient contact • Eye protection to be worn • Nitrile gloves to be worn for dealing with casualties • Hearing protection if required. • Conduct activities under direction and supervision of Ambulance Service crew member • Act under overall guidance from the Fire Incident Commander if operating inside risk area (inner cordon) • Decontamination of PPE and equipment if contaminated 	1	5	5	Y	<p>All crews to be familiar with and adhere to PHE guidance on COVID-19 PPE – Table 2 & Table 4. (12 April 2020)</p> <p>AS will provide appropriate PPE to be used in differing settings</p>				
Providing Patient/ambulance personnel support	Work related stress as a result of increased exposure to unfamiliar incidents, casualties / fatalities	<ul style="list-style-type: none"> • The potential for employees to suffer from the adverse effects that can be caused or made worse by stress in the workplace. • Absenteeism • Deterioration in mental health • Fatigue/Welfare concerns • On duty injuries • Musculoskeletal injuries from driving activity 	✓		<ul style="list-style-type: none"> • Removal from scene of operations • Line manager support • Instigate Employee Assistance programme • A service manager will be appointed to staff as welfare officer / 'buddy system' and point of contact. • Access to FRS mental health support systems • Access to OH department • Support from AS staff/managers and signposting if required • Signpost to third sector organisations 	4	2	8	Y					

