



# RISK ASSESSMENT FOR RTT<sup>®</sup> THERAPISTS

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A risk assessment is an important step to protect Clients and other people who are visiting your premises or if you are using a clinic room. It is required to comply with UK Health and Safety at Work legislation.

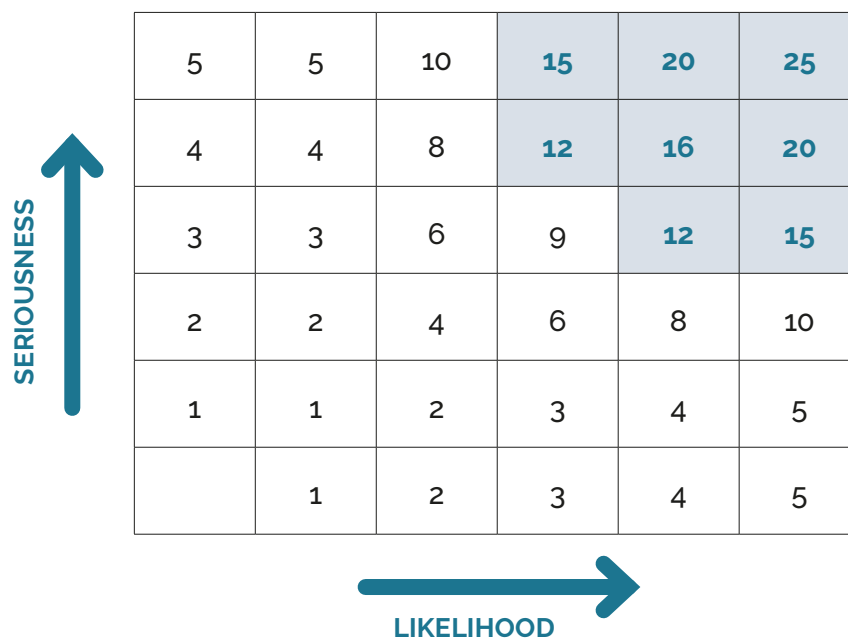
The purpose of the risk assessment is not to eliminate all health and safety risks, but to focus on those that could have the potential to cause real harm - so that sensible measures can be put in place to manage those risks. The risk assessment process is simply a careful examination of what in your work could cause harm to people so that you can weigh up whether enough has been done or more precautions should be put in place to prevent harm to those who could be affected.

The following information is to be assessed by the Therapist for you to delete what is not required and to add your own identified issues where you are practicing. This document aims to have captured the majority of health and safety hazards that are likely to be present in a home or therapy centre environment and to have identified who is likely to be affected by them. There are a number of health and safety hazards that are listed in this risk assessment, with a number of recommended ways of safely managing each hazard.

It is recommended that this assessment be reviewed on an annual basis at a minimum.

If there are any changes in circumstances that need to be taken into account between review periods, for example as a result of refurbishments or structural works to the building, the risk assessment should be updated to reflect those changes before/as they occur.

### KEY TO RISK ASSESSMENT:



	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
		1	2	3	4	5

**ROLES:** Therapist = T; Visitors =V; Client = C



## LIKELIHOOD AND SERIOUSNESS

### LIKELIHOOD CAN BE RANKED AS:

1 = **Very Unlikely** - It is very unlikely that harm will arise.

2 = **Unlikely** - It is unlikely that harm will arise.

3 = **Fairly Likely** - It is fairly likely that harm will arise.

4 = **Likely** - It is likely that harm will arise.

5 = **Very Likely** - It is very likely that harm will arise.

### SERIOUSNESS CAN BE RANKED AS:

1 = **Insignificant** - no injury.

2 = **Minor** - minor injuries only needing first aid (e.g. a small cut or graze that requires a plaster).

3 = **Moderate** - up to three day's absence / minor injury (cut requiring stitches) / temporary illness.

4 = **Major** - more than three days absence / major injuries/ broken bones/ permanent illness.

5 = **Catastrophic** - Death

L = How likely is the hazard to result in harm? On a scale of (1- 5) where 1 = low.

S = How serious could the harm be? On a scale of (1- 5) where 1 = low.

R = Risk Rating on a scale of (1-25), where 1=low.

RISK RATING	ACTION TO BE TAKEN
1 - 4	Risk acceptable no further action.
5 - 8	Risk low – look to try to reduce within twelve months.
9 - 12	Risk Medium but tolerable in short term – look to reduce within six months.
15 or 16	Risk medium to high - reduce risk within a month.
20	High risk - reduce risk within a week.
25	<b>Very high risk - Stop work immediately.</b>

## PREMISES DETAILS

Address:

Date of Risk Assessment:

Name of Therapist:

Signature of Therapist:

Planned Date of Risk Assessment Review:

Date Conducted:

Name of Therapist:

Signature of Therapist:

## HAZARDS

1	Slipping, Tripping, Falling Accidents and Injuries
2	Fire
3	Room Facilities where practicing
4	Electricity (including portable appliances)
5	Using Computers
6	Lone Working
7	Difficult Clients/Claims
8	Safeguarding Children
9	During session Abreaction
10	Personal safeguarding

## RTT® THERAPIST RISK ASSESSMENT FORM

Name:

Date:

HAZARDS	PEOPLE AT RISK			WHAT ARE YOU ALREADY DOING? GENERIC CONTROLS	LIKELY	SEV	RISK	WHAT FURTHER ACTION IS NECESSARY	ACTION BY WHOM	ACTION BY WHEN	DONE
	T	V	C								
<b>1.</b> Slips Trips and Fall Accidents and injuries	X	X	X	Attend to spills immediately – mop up with paper towels and ensure floor left dry.	2	3	5				
	X	X	X	Keep under desk spaces; walkways, aisles, doorways and corridors clear of items likely to cause a person to slip or trip.	3	3	6	Monthly check			
	X	X	X	Attend to any defects to floor coverings and carpets ensuring they are maintained in good condition.	2	3	5	Monthly check			
	X	X	X	Good lighting is provided and working in all areas.	2	2	4	Replace any bulbs as soon as possible.			
	X	X	X	First Aid Kit Available	2	3	5				
	X	X	X	All accidents, near misses, and incidents to be recorded	3	3	6	Keep a sheet for log with first aid kit.			

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	T	V	C								
<b>2. Fire</b>	X	X	X	Emergency evacuation procedures in place and tested regularly	1	5	6	Statutory requirement to be carried out 6 monthly. In external premises information on procedures should be displayed.			
	X	X	X	Carpets and furniture are fire resistant	1	2	3				
<b>3. Room and Facilities where practicing</b>		X	X	Toilet facilities with hand wash and towel available & Clean	2	2	4	Check clean before commencing sessions.			
			X	Water for Client available if needed	4	1	4	May need to have bottled water and cup available)			
			X	Comfortable chair at angle to prevent falling	2	2	4				
	X			Chair position considered if need to leave room	1	3	4				
		X	X	Insurance in place in case of any accident	2	5	7	Insurance is essential			
	X			Familiarise yourself with any Practice Room Hire Policies	2	2	4				

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4. Electricity including portable appliances e.g. phones	X			Defective equipment /cables taken out of use and promptly replaced.	3	2	5				
5. Using Computers (Skype/Zoom session)	X			Workstations and equipment positioned to ensure good posture and to avoid glare and reflections on the screen.	2	3	5				
			X	Client fully briefed on what to do if connection fails	4	1	4				
	X		X	Disclaimer form and payment completed before session	2	2	4				
6. Lone Working	X			Pre Assessment of Client before you meet them	2	3	5				
	X			Clear Pricing policy stated to Client to avoid any misunderstanding	2	2	4				
	X		X	Never say you will cure someone	2	3	5				
	X			Consider phone contact person pre/ after each session with call back protocols	2	3	5				
	X			Set clear boundaries with Client	2	3	5				
	X			Consider home working V Practice Room at a centre.	2	2	4				
	X		X	Always complete the intake form and have disclaimer form signed	2	3	5				

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<b>7.</b> Difficult Clients/Claims	X			Document sessions and retain for relevant period	2	3	5				
	X			Be prepared before contacting Clients post sessions catch up	2	3	5				
	X			Don't over commit to Clients	2	3	5				
	X			Ensure you leave enough time between Clients based on their issues	3	1	4				
			X	Tell Clients that additional issues may come up after their session	4	1	5				
<b>8.</b> Safe-guarding Children	X		X	Insurance to Cover working with Children	3	3	6				
	X		X	DBS (UK)/relevant security check to meet territory regulations. Check up to date and correct level for working with children/vulnerable adults	3	3	7	Essential if working with children in the UK. Carry out own research for regulations where you work.			
	X		X	Parental consent forms signed	3	3	6				
	X		X	Prepared for contacting Local Authority etc.	3	3	6	Ensure you have all relevant numbers to hand.			
	X		X	Consult with child on telling parents information that needs to be shared and best way to do this	1	3	4	Principles: Do no harm; duty of care; respecting client dignity;			
			X	Location for parents/guardian to wait	3	1	4				



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9. During a session abreaction			X	Confirm in a safe space	2	2	4				
			X	Client to take some deep breaths	2	2	4				
			X	Inform them normal as they are letting go of emotions	2	2	4				
			X	Tell Client only reviewing not reliving	2	2	4				
10. Personal Safeguarding	X			Maintain work life balance.	3	2	5	Don't over commit to sessions			
	X			Be aware of Client body language	2	3	5	Use relaxing techniques for Client			
	X			Maintain Network of support including Tutorials & RTT® groups	2	2	4				
	X			Consider Yoga/Meditation	2	1	3				
	X			Keep hydrated and have water available.	2	2	4				
	X		X	Familiarise yourself with any Practice Room Hire Policies	3	4	7	Password protect any electronic documents. Hard copy documents to be kept in a locked cabinet. Securely dispose of documents no longer relevant			
	X		X	Set boundaries with the Client before visit and before session starts. Seek their agreement to rocking their head etc.	3	3	6				

## RTT® THERAPIST RISK ASSESSMENT FORM – CONTROLS ACTION SHEET

ACTIONS IDENTIFIED AND REQUIRED FROM THE RISK ASSESSMENT	TIMESCALE	RESPONSIBLE PERSON	ACTIONS COMPLETED (Please initial when complete)
Monthly check on lighting; passage ways and for build up of waste	Monthly	Therapist	
Fire evacuation test	6 Monthly	Therapist or site manager for external premises	
Ensure log sheet available for recording any accidents	Within 6 months	Therapist	
Fire – keep record of fire checks & evacuation tests	Monthly	Therapist or manager of external premises	
Have in place adequate insurance	Before taking paying clients	Therapist	
DBS clearance obtained and consent forms completed by Guardians/ parents	Before working with Children or vulnerable adults	Therapist	
Ensure records are kept secure, and disposed of securely	Monthly	Therapist	