

APPENDIX 2

The Monitoring Risk and Improving System Safety (MoRISS) checklist – Rationale and Evidence



| | Domain and Item | Category | Rationale and Evidence |
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| | 1. MEDICATION SAFETY | | |
| | CONTROLLED DRUGS | | |
| 1. | <ul style="list-style-type: none"> Securely Stored. | MANDATORY | NHS Scotland – A guide to Good Practice in the management of controlled drugs in Primary Care |
| 2. | <ul style="list-style-type: none"> Up-to-date register exists. | MANDATORY | NHS Scotland – A guide to Good Practice in the management of controlled drugs in Primary Care |
| 3. | <ul style="list-style-type: none"> Stock balances are undertaken at appropriate time intervals based on practice usage. | MANDATORY | NHS Scotland – A guide to Good Practice in the management of controlled drugs in Primary Care |
| 4. | <ul style="list-style-type: none"> Any out-of-date stock is appropriately disposed. | MANDATORY | NHS Scotland – A guide to Good Practice in the management of controlled drugs in Primary Care |
| | EMERGENCY DRUGS & EQUIPMENT | | |
| 5. | <ul style="list-style-type: none"> Your usual supplies are available in sufficient quantities. | ESSENTIAL | UK Government - Storage, Distribution and Disposal of Vaccines: The Green Book: Chapter 3 |
| 6. | <ul style="list-style-type: none"> Evidence of monthly stock check and expiry date rotation | ESSENTIAL | UK Government - Storage, Distribution and Disposal of Vaccines: The Green Book: Chapter 3 |
| 7. | <ul style="list-style-type: none"> Evidence of monthly equipment check (e.g. nebuliser, defibrillator, airways, anaphylaxis) | ESSENTIAL | UK Government - Storage, Distribution and Disposal of Vaccines: The Green Book: Chapter 3 |
| 8. | <ul style="list-style-type: none"> The location of emergency equipment is adequately signposted throughout the premises (e.g. prominent notice in each room) | ESSENTIAL | UK Government - Storage, Distribution and Disposal of Vaccines: The Green Book: Chapter 3 |

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| | PRESCRIPTION & PADS | | | |
| 9. | <ul style="list-style-type: none"> Securely stored. | MANDATORY | National Services Scotland – Security of Prescription Forms Guidance | |
| 10. | <ul style="list-style-type: none"> Serial numbers for prescription pads are recorded and stored. | MANDATORY | National Services Scotland – Security of Prescription Forms Guidance | |
| | VACCINATIONS | | | |
| 11. | <ul style="list-style-type: none"> Cold chain temperature recording at least once daily. | MANDATORY | UK Government - Storage, Distribution and Disposal of Vaccines: The Green Book: Chapter 3 | |
| 12. | <ul style="list-style-type: none"> Storage facility is locked & alarmed. | ESSENTIAL | National Services Scotland – Guidance on Vaccine Storage & Handling | |
| 13. | <ul style="list-style-type: none"> Evidence of expiry date rotation. | ESSENTIAL | UK Government - Storage, Distribution and Disposal of Vaccines: The Green Book: Chapter 3 | |
| 14. | <ul style="list-style-type: none"> Your usual supplies are available in sufficient quantities. | ADVISABLE | UK Government - Storage, Distribution and Disposal of Vaccines: The Green Book: Chapter 3 | |
| | ALL OTHER DRUGS ON PREMISES | | | |
| 15. | <ul style="list-style-type: none"> Storage facility is secure. | ESSENTIAL | National Services Scotland – Guidance on Vaccine Storage & Handling | |
| 16. | <ul style="list-style-type: none"> Evidence of expiry date rotation. | ESSENTIAL | National Services Scotland – Guidance on Vaccine Storage & Handling | |
| | 2. HOUSEKEEPING | | | |
| | INFECTION CONTROL | | | |
| 17. | <ul style="list-style-type: none"> Clinical waste is disposed of in line with practice policy. | MANDATORY | UK Government – Healthcare Waste | |
| 18. | <ul style="list-style-type: none"> All staff are trained in standard infection control precautions, including hand hygiene and sharps/bite/splash management. | ESSENTIAL | UK Government – Protection against infection with blood-borne viruses | |
| 19. | <ul style="list-style-type: none"> Practice equipment is cleaned in line with practice policy. | ESSENTIAL | NHS – National specification for cleanliness: Primary Care & Dental premises | |
| 20. | <ul style="list-style-type: none"> Premises (floors, furnishings, surfaces, children's toys etc.) are cleaned in line with practice policy. | ESSENTIAL | NHS – National specification for cleanliness: Primary Care & Dental premises | |
| 21. | <ul style="list-style-type: none"> Laboratory specimens are handled and stored in line with practice policy. | ESSENTIAL | NHS Shetland – Clinical Laboratory – Sample transportation | |
| 22. | <ul style="list-style-type: none"> All staff are offered appropriate immunisation/boosters and | ESSENTIAL | Health & Safety Executive | |

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| | are up-to-date (e.g Hepatitis B & Influenza). | | |
| | STOCKING OF CLINICAL ROOMS | | |
| 23. | <ul style="list-style-type: none"> Adequate Personal Protective Equipment (PPE) is available. | ESSENTIAL | Health & Safety Executive – Personal Protective Equipment |
| 24. | <ul style="list-style-type: none"> Single use only sterile and non-sterile gloves in a range of sizes (where necessary) with latex free alternatives are available. | ESSENTIAL | Health & Safety Executive – Personal Protective Equipment |
| 25. | <ul style="list-style-type: none"> Disposable hand and couch paper towels are available for use. | ESSENTIAL | NHS Professionals – CG1 Standard Infection Prevention & Control Guidelines |
| 26. | <ul style="list-style-type: none"> Liquid soap and Alco Gel are available. | ESSENTIAL | Healthcare Improvement Scotland – The provision of alcohol based products to improve compliance with hand hygiene |
| | CLINICAL EQUIPMENT MAINTENANCE | | |
| 27. | <ul style="list-style-type: none"> There is a date system for when equipment should be serviced and working status checked. | ESSENTIAL | Health & Safety Executive – Maintenance of work equipment |
| 28. | <ul style="list-style-type: none"> All significant items of clinical equipment are calibrated or maintained in line with manufacturer's instructions/service recommendations. | ESSENTIAL | UK Government – Managing medical devices |
| 29. | <ul style="list-style-type: none"> Equipment which is not in use/maintained is disposed of appropriately. | ESSENTIAL | UK Government – Managing medical devices |
| 30. | <ul style="list-style-type: none"> There is a log of all significant items of clinical equipment. | ADVISABLE | Health & Safety Executive – Selection and conformity of work equipment |
| | STOCKING OF CLINICAL ROOMS | | |
| 31. | <ul style="list-style-type: none"> Sharps containers are available correctly assembled, out of reach of children, not filled beyond indicator mark and do not contain inappropriate waste. | MANDATORY | UK Government – Managing medical devices |
| | CONFIDENTIAL WASTE | | |
| 32. | <ul style="list-style-type: none"> Identifiable patient information is disposed securely and confidentially (e.g. shredded) | MANDATORY | Scottish Government – NHS Records Management and Information Lifecycle |
| | 3. INFORMATION SYSTEMS | | |
| 33. | <ul style="list-style-type: none"> Password security policy is being followed (including remote access protocols) | MANDATORY | Information Commissioners Office – Information Security (Principle 7) |
| 34. | <ul style="list-style-type: none"> The practice Business Continuity Plan is up-to-date. | ESSENTIAL | NHS Scotland – Business Continuity Plan templates / |

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| | | | guidance | |
| 35. | <ul style="list-style-type: none"> • Latest software updates for all systems are installed (e.g. formulary, EMIS, Vision) | ESSENTIAL | UK Government – Data Protection Act 1998 | |
| 36. | <ul style="list-style-type: none"> • The back-up of all significant IT systems is verified. | ADVISABLE | Scottish Clinical Information Management in Practice | |
| 37. | <ul style="list-style-type: none"> • The back-up data is verified as accurate before disposal/shredding. | ADVISABLE | Scottish Clinical Information Management in Practice – Good Practice Guide | |
| RECORD KEEPING | | | | |
| 38. | <ul style="list-style-type: none"> • Clear evidence is available of accurate and up-to-date record keeping (e.g. data coding & summarising, allergy updates) | ADVISABLE | UK Government – Data Protection Act 1998 | |
| 4. PRACTICE TEAM | | | | |
| REGISTRATION CHECKS | | | | |
| 39. | <ul style="list-style-type: none"> • All clinicians are registered with regulators. | MANDATORY | General Medical Council – the licence to practise | |
| 40. | <ul style="list-style-type: none"> • All clinicians are registered with a defence union. | MANDATORY | British Medical Association - Medical indemnity guidance for GPs | |
| 41. | <ul style="list-style-type: none"> • Protecting Vulnerable Groups (PVG) checks are up-to-date. | MANDATORY | The Scottish Government – Types of disclosure | |
| 42. | <ul style="list-style-type: none"> • Doctors are on the Performer's list. | MANDATORY | The Scottish Government – Performers List National Application Arrangements | |
| CPR AND ANAPHYLAXIS TRAINING | | | | |
| 43. | <ul style="list-style-type: none"> • All staff have up-to-date CPR training. | MANDATORY | Resuscitation Council (UK) – Training of staff | |
| 44. | <ul style="list-style-type: none"> • All clinical staff have up-to-date anaphylaxis training. | MANDATORY | Health Protection Agency – National minimum standards for immunisation training | |
| 5. PATIENT ACCESS & IDENTIFICATION COMMUNICATION | | | | |
| 45. | <ul style="list-style-type: none"> • Information for patients on how to access the practice urgently or in an emergency is widely available in different formats (e.g. posters, leaflets, booklet, website) | MANDATORY | NHS Education for Scotland – The General Medical Services (GMS) contract | |

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| | STANDARDISED PATIENT IDENTIFICATION (ID) VERIFICATION | | |
| 46. | <ul style="list-style-type: none"> Information has a patient ID process using two approved patient identifiers and the practice team can describe how it is applied. | ESSENTIAL | World Health Organisation – Patient Identification |
| 47. | <ul style="list-style-type: none"> Patient ID is always confirmed by all staff (over the telephone, face-to-face, when filing or handling records/results, writing prescriptions referrals) using two of the following three characteristics: Full name, date of birth, postal address (gender and CHI number if known/available can also be used). | ESSENTIAL | World Health Organisation – Patient Identification |
| | 6. HEALTH AND SAFETY | | |
| | BUILDING SAFETY AND INSURANCE | | |
| 48. | <ul style="list-style-type: none"> Practice policies on electrical and fire safety are adhered to. | MANDATORY | Health & Safety Executive – Electrical Safety |
| 49. | <ul style="list-style-type: none"> Public and Employer's liability insurance are up-to-date and displayed. | MANDATORY | Health & Safety Executive – Employers Liability (Compulsory Insurance) Act 1969 |
| 50. | <ul style="list-style-type: none"> A system for recording and notifying accidents/violent incidents/near misses is in operation. | MANDATORY | Health & Safety Executive - RIDDOR - Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 |
| 51. | <ul style="list-style-type: none"> First aid arrangements are in place (a first aid box is available and all staff are aware of trained first aiders). | MANDATORY | Health & Safety Executive – First Aid at work |
| | STAFF HEALTH AND WELLBEING | | |
| 52. | <ul style="list-style-type: none"> The workstations of all Display Screen Equipment (DSE) users provide adequate space and are assessed to Health & Safety legal standards. | MANDATORY | Health & Safety Executive – Display Screen Equipment |
| 53. | <ul style="list-style-type: none"> All relevant staff are trained in manual handling procedures. | MANDATORY | Health & Safety Executive – Manual Handling |
| 54. | <ul style="list-style-type: none"> All staff have access to related training opportunities (e.g needle stick injury, threatening behaviour, health & safety/fire safety) | MANDATORY | Health & Safety Executive – Providing training and information |
| 55. | <ul style="list-style-type: none"> All partners and staff have clear work roles and designated tasks, and workloads are balanced. | ADVISABLE | Health & Safety Executive – What are the management standards |
| 56. | <ul style="list-style-type: none"> The practice recognises the existence of work-related stress and accepts the need to identify its symptoms and resolve or | ADVISABLE | Health & Safety Executive – Work related stress |

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| | manage contributory factors. | | |
| 57. | <ul style="list-style-type: none"> Regular team meetings are held to review practice performance, raise issues and problems seek resolutions. | ADVISABLE | Scottish Patient Safety Programme – Safequest Safety Climate Survey |
| 58. | <ul style="list-style-type: none"> Access to training in handling threatening behaviour is available to all staff. | ADVISABLE | Health & Safety Executive – Violence in health and social care |
| 59. | <ul style="list-style-type: none"> Every team member of the admin and clinical team will have a training plan in place, and have access to safety relevant training opportunities e.g. SEA, incident reporting. | ADVISABLE | Good Clinical, Management and Administrative Practice e.g. as recommended by all care regulators, professional bodies and NHS Boards for Continuing Professional Development related to improving the quality and safety of health care |
| ENVIRONMENTAL AWARENESS | | | |
| 60. | <ul style="list-style-type: none"> Routine checks for hazards to staff, patients, children and visitors are undertaken internally (e.g. spillages, worn flooring, low hanging or protruding objects) and externally (e.g. broken glass, spillages, obstructions). | ADVISABLE | Health & Safety Executive – Risk management |
| 61. | <ul style="list-style-type: none"> General thermal and lighting comfort (heating and cooling where necessary) is achieved within the premises. | ADVISABLE | Health & Safety Executive – Risk management |