

SERVICE PROVISION & WORKPLACE COVID-19 RISK ASSESSMENT.



Hazard	Those at risk	Risk Grading before	What are you doing already to control risks?	Risk Grading after	Further action & by whom
<p>The transmission of COVID-19 while providing care & support services</p>	<p>All staff, including those that have been shielding or self-isolating due to advice from PHE at the start of the pandemic based on their age or ongoing health conditions.</p>	<p>Medium</p>	<p>Further consideration to staff safety and PPE requirements when accepting new packages of care.</p> <p>All processes in regarding to considering packages of care should stay the same. However before care is delivered an initial risk assessment where possible should take place by phone, prior to entering the premises or at 2 metres social distance on entering to establish the 'case definition'.</p> <p>New Service Users that meet the following criteria are considered 'extremely vulnerable'.</p> <ul style="list-style-type: none"> • Solid organ transplant recipients. • People with specific cancers: <ul style="list-style-type: none"> ○ people with cancer who are undergoing active chemotherapy ○ people with lung cancer who are undergoing radical radiotherapy ○ people with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment ○ people having immunotherapy or other continuing antibody treatments for cancer ○ people having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors ○ people who have had bone marrow or stem cell transplants 	<p>Low</p>	<p>Assessment to be reviewed weekly in line with updated government guidance and local transmission rate by SMT. Managing Director is ultimately responsible.</p>

			<p>in the last 6 months, or who are still taking immunosuppression drugs</p> <ul style="list-style-type: none">• People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe COPD.• People with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as SCID, homozygous sickle cell).• People on immunosuppression therapies sufficient to significantly increase risk of infection.• Women who are pregnant with significant heart disease, congenital or acquired. <p>Starting care packages for Service Users that meet the criteria on the above list, staff and the individual must be issued with the appropriate PPE. This will require both the SU and the member of staff to wear a face mask during all care visits.</p> <p>As a precaution PPE (wearing a face shields) should be adhere to for the first 14 days of the care package regardless. If it has been determined that the Service User doesn't not meet any of the above criteria than the levels of PPE can be reduced after this initial 14 days.</p> <p>For accepting packages as part of a hospital discharge. 'Case definition' should also be identified as part of the package acceptance. Based on the answers to these questions an assessment should be made as to the level of PPE required while delivering care.</p> <p>As precaution, the enhanced levels of PPE should be adhere to for the first 14 days of a new care package regardless. If it has been determined that the Service User doesn't not meet any of the above criteria than the levels of PPE can be reduced after this initial 14 days.</p> <p>For existing care packages that have been admitted to hospital but are now ready to return home all of the above assessment questions should be asked.</p> <p>We will not accept the referral if they the Service User has not been tested. We require a negative text result before acceptance. We require a temperature check of the Service User 48hrs before discharge.</p> <p>New referrals should not be accepted with less than 48hrs notice to allow</p>		
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			<p>preparation and implementation.</p> <p>Existing packages can be accepted without a test if admitted for 72hrs or less.</p> <p>The provision of PPE will be a risk based approach. Regardless of the definition of the Service User the normal level of PPE should be worn by staff. This should include gloves and aprons. Staff should wash their hands at regular intervals or use sanitizing gel/rub when this is not possible.</p> <p>Staff are required to actively observe social distancing rules whenever possible.</p> <p>Prior to returning to work any 'Returners' are required to meet with their manager (this can be done remotely if preferred) so all safety measures can be discussed and clarified.</p> <p>Staff are to strictly adhere to PPE guidelines and seek guidance if at all unsure.</p> <p>Additional (more) PPE can be provided to those staff so they can change more frequently, especially face masks.</p> <p>To facilitate a return we can adjust working locations. Staff that would normally work in the community can be rostered to work within an ECH (however this might be in an alternative location – Wellington or Bridgwater for example).</p> <p>Returners will be working individually and not be rostered as 1 half of a double up.</p> <p>Returners will not be allocated any new staff as part of a shadow shift. Staff can be bad matched to the following Service Users:</p> <ul style="list-style-type: none">• Those that are confirmed to be COVID-19 positive.• Those self-isolating (with symptoms).• Those self-isolating (without symptoms).• Those recently (within 14 days) returned from hospitals. <p>From July the furlough scheme will allow staff to have a phased return so staff can do shorter hours of work to ease back into things. Based on this arrangement staff could be rostered to visit the same SUs while working to limit the contact with others.</p>		
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The transmission of COVID-19 throughout the workplace	All staff	High	<p>Staff are required to actively observe social distancing rules whenever possible.</p> <p>All staff stagger their arrival to the office (individual start times and shifts allow this naturally) but staff should actively reduce the congestion of staff in doorways and thoroughfares. If there are staff in these areas, hold back and make way for a clear path of entry.</p> <p>Staff may be asked to move desks (temporarily) to increase the distance between staff. You will be able to return to your normal desk once it is safe to do so.</p> <p>Staff are not to 'hot desk'. Visiting staff (Supervisors for example) must always use the same desk and should thoroughly clean the workstation before and after use, using antibacterial wipes or sanitizer.</p> <p>Where staff have been able to work from home relatively efficiently, fulfilling all tasks, these will continue, but start returning to the office on staggered days. Staff are to liaise with the colleagues in close proximity to organise their weeks in regards to days in the office and working from home - to keep the numbers of staff in the office at any one time to a minimum.</p> <p>Staff must actively look to reduce the person to person contact they have by using fixed teams of 3 or 4 – only working with the same people and work in sub-teams within offices. Co-ordinators/Training etc.</p> <p>Staff must use 3CX as much as possible to keep in contact with people – this includes those at the other end of the office or in different office locations</p> <p>Where possible staff are encouraged to take their breaks outside, away from their desk and other staff to reduce the numbers in the office.</p>	Med/Low	Assessment to be reviewed weekly in line with update government guidance and local transmission rate by SMT. Managing Director is ultimately responsible.

			<p>Staff are now encouraged to bring their own food rather visit a shop which then increases the contact with members of the general public and thus increased risk of transmission.</p> <p>Staff are to increase the number of times they are washing your hands in the office. Individual bottles of sanitizer will be provided for each desk for use throughout the day. It will be staffs' responsibility to use this and make sure that it is topped up.</p> <p>Whether or not there are office cleaners, everyone will now be required to clean their own work station before leaving the office. This will include sanitizing the desk, phone and workstation.</p> <p>Limit the number of visitors – including care staff, to the office to only 1 at a time. Couriers or deliveries are to maintain their distance and deliver outside of door.</p> <p>There should be no more than 1 member of staff using the kitchenette areas in offices.</p> <p>Staff should only use the toilet designated to them in the office.</p> <p>Stay alert to potential symptoms. We are in the unique position that we are able to get staff tested. If you are have symptoms, or live with someone that does then please inform your manager and we can arrange to get you and them tested. If you have any COVID symptoms, please do not come to work.</p>		
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