

COVID 19 RISK ASSESSMENT



Carried out by: Joseph Kinsella

Date of next review:

Date assessment was carried out:

COVID-19 Alert Level: Nationwide Lockdown*

What are the hazards?	Who might be harmed and how?	Risk grade before?	What are you already doing to control the risks?	Risk grade after?	What further action do you need to take to control the risks?	Who needs to carry out the action and by when?
The transmission of COVID-19 within office areas.	<ul style="list-style-type: none"> Staff External Visitors Cleaners Vulnerable Staff e.g. Pregnant workers, those with existing underlying health conditions Anyone else who physically comes in contact with you in relation to your business. 	High	<p>Hand Washing</p> <ul style="list-style-type: none"> Hand washing facilities with soap and water in place. Stringent hand washing taking place for a minimum of 20 seconds. Drying of hands with disposable paper towels. Gel sanitiser units placed in all schemes and offices where washing facilities not readily available, specifically at front entrances and in meeting/training rooms. Individual bottles of sanitiser will be provided for each desk for use throughout the day. 'Wash hands' and 'Hand washing guide' posters placed in bathrooms. All employees have been issued contactless keys so as to minimise the need for physical contact with door handles and other objects and surfaces. <p>Cleaning</p> <ul style="list-style-type: none"> Frequently cleaning and disinfecting objects and surfaces that are touched regularly particularly in areas of high use such as door handles, light switches, reception area using appropriate cleaning products 	Low	<ul style="list-style-type: none"> To remain vigilant to any government updates and legislation changes. <p><u>Hand Washing</u></p> <ul style="list-style-type: none"> Create and place hand washing guidance posters in ECH's and Office toilets. <p><u>Cleaning</u></p> <ul style="list-style-type: none"> Staff to be encouraged to disinfect desks, laptops, computers and phones. 	Managing Director and COVID Coordinator - to be assessed on an ongoing daily basis.

			<p>and methods particularly anti-bacterial wipes and sprays.</p> <ul style="list-style-type: none"> • Visiting staff (Supervisors for example) must always use the same desk and should thoroughly clean the workstation before and after use. • If it is not possible to always use the same desk, the workstation must still be thoroughly cleaned before and after use. <p>Social Distancing</p> <ul style="list-style-type: none"> • Reducing the number of persons in any work area to comply with the 2-metre distance as stated within government legislation. If it is not possible to keep 2 metres apart, staff are to stay 1 metre apart, plus use of necessary PPE, as well as taking extra steps to stay • Taking steps to review work schedules including start & finish times/shift patterns, working from home etc. to reduce number of workers on site at any one time. Also relocating workers to other tasks. • Staff will stagger their arrival to the office (individual start times and shifts allow this naturally). • Staff should actively reduce the congestion of staff in doorways and thoroughfares. • Chevron tape has been laid out on the office floor for ease of identifying areas and reduce congestion. • Conference calls to be used instead of face to face meetings. • Hot desking will be prohibited unless it is not possible for visiting staff to always use the same workstation. • Staff should liaise with colleagues in close proximity to organise their weeks in regard to days in the office and working from home, this will keep the numbers of staff in the office at any one time to a minimum. • Staff must actively look to reduce the person to person contact they have by using fixed teams of 3 or 4. Staff should use the 3CX as much as possible to keep in 			
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			<p>contact with people – this includes those at the other end of the office or across the Courtyard.</p> <ul style="list-style-type: none"> • Staff should only use the toilet in their Suite/floor. • Ensuring sufficient rest breaks for staff. • Social distancing also to be adhered to in communal areas e.g. Kitchen. <p>PPE - Wearing of Masks</p> <ul style="list-style-type: none"> • Office staff will wear face masks (Type IIR) when required to do so e.g. when going to the door to receive parcels from couriers or when signing in external visitors. As well as when care staff have to come into the office after having delivered care (where this is essential and unavoidable). • Face masks must be worn properly by all staff. IE – covering the nose and the mouth. <p>Temperature Checks</p> <ul style="list-style-type: none"> • On entering the offices, all staff, external visitors, contractors and members of the public will be temperature checked using a contactless digital thermometer. • Daily temperature readings are emailed to the COVID Coordinator for record keeping and auditing purposes • Individual office staff cannot administer their own temperature check and will require assistance to do this. • Anyone that has a temperature that is high (37.8C) will not be allowed entry to the office and will have to return home where they can seek advice on what to do next. Throughout this situation, staff members and management will remain in communication to make sure the correct steps are being taken and the COVID Co-ordinator will be informed. <p>Symptoms of Covid-19</p>			
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			<ul style="list-style-type: none"> • If anyone becomes unwell with a new continuous cough, high temperature, or sudden change to sense of smell or taste in the workplace, they will be sent home and advised to follow the stay at home guidance. • Line managers will maintain regular contact with staff members during this time and will arrange for a COVID-19 test to be completed. • If advised that a member of staff or public has developed Covid-19 and were recently on our premises, the management team will contact the Public Health Authority to discuss the case, identify people who have been in contact with them and will take advice on any actions or precautions that should be taken. <p>The transmission of COVID-19 within Black, Asian and Minority Ethnic (BAME) Staff</p> <ul style="list-style-type: none"> • Allowing BAME Staff to work from home as much as possible. • Redeploying BAME Staff to the safest available on-site role, enabling them to keep an appropriate distance away from others. • Reducing BAME Staff shift lengths so they have less interaction with other people. • Providing BAME Staff with additional personal protective equipment (PPE). • Staggering BAME Staff's start time so they travel when public transport and congestion into the workplace is less busy. 			
The transmission of COVID-19 whilst providing care & support services.	<p>All care staff.</p> <p>In particular staff 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>	Medium	<p>Hand Washing</p> <ul style="list-style-type: none"> • Staff will be continually encourage to practice good hand hygiene through regular staff communications. (staff Portal and Text messages) and weekly Care Notes. • Gel sanitiser units placed in all schemes and offices where washing facilities not readily available, 	Low	<ul style="list-style-type: none"> • To remain vigilant to any government updates and legislation changes. 	Managing Director and COVID Coordinator - to be assessed on an ongoing daily basis.

			<p>specifically at front entrances and in meeting/training rooms.</p> <ul style="list-style-type: none"> • Staff are provided with sanitiser to use in the community and these can be replenished in the both operational offices. <p>Cleaning</p> <ul style="list-style-type: none"> • Frequently cleaning and disinfecting objects and surfaces that are touched regularly throughout work places and tenant/service user homes using appropriate cleaning products and methods. <p>Social Distancing</p> <ul style="list-style-type: none"> • Comply with social distancing guidelines of 2 metres wherever possible. Although this will not be possible for some parts of delivering care staff need to remain vigilant in the work place or service user homes. • Staff should actively reduce the congestion of staff in doorways and thoroughfares. • Ensuring sufficient rest breaks for staff. • Social distancing also to be adhered to in common areas, toilets, kitchen and changing areas. • Staff should ask additional family member or friends that might be visiting a SU to either leave the room, wait outside or return after the call is completed to reduce the number people in close proximity. <p>PPE</p> <ul style="list-style-type: none"> • Where Risk Assessment identifies wearing of gloves, disposable aprons, Type IIR face masks and eye protection (goggles or shield) as a requirement of the job. These will be provided for all staff. • Care staff are trained on how to remove PPE carefully to reduce contamination and how to dispose of them safely and how to put on PPE correctly. 			
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			<ul style="list-style-type: none"> Staff are to strictly adhere to PPE guidelines and seek guidance if at all unsure. <p>Temperature Checks</p> <ul style="list-style-type: none"> Home care staff should routinely take their own temperature before starting work. ECH care staff will have their temperatures taken before delivering any care and these temperatures are reported to the operational office. Anyone that has a temperature that is high (37.8C) will not be allowed entry to the site and will have to return home where they can seek advice on what to do next. Throughout this situation, staff members and management will remain in communication to make sure the correct steps are being taken. <p>Symptoms of Covid-19</p> <ul style="list-style-type: none"> If anyone becomes unwell with a new continuous cough, high temperature, or sudden change to sense of smell or taste in the workplace, (or any other currently recognised and identified COVID symptom), they should contact the operation office. Those working in the community will be advised to remain at home and a test will be booked. Those working in Extra Care Housing will be sent home and a test will be booked. Line managers will maintain regular contact with staff members during this time and a COVID-19 test to be arranged on their behalf. If advised that a member of staff or public has developed Covid-19 and were recently on our premises, the management team will contact the Public Health Authority to discuss the case, identify people who have been in contact with them and will take advice on any actions or precautions that should be taken. 			
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			<ul style="list-style-type: none"> • 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. • Additional PPE will be provided to staff that may require it (those designated as 'clinically extremely vulnerable' or the 'clinically vulnerable') so they can change more frequently. • To facilitate a return for staff, who have had to shield or isolate, we can adjust working locations and task where reasonably practical. • Returners will be working individually and not be rostered as 1 half of a double up or have new staff shadow them. • Managers will stay in contact with Staff members, as part of a welfare check, each week to ensure they are comfortable in their role and keeping up with service delivery guidance. <p>The transmission of COVID-19 within Black, Asian and Minority Ethnic (BAME) Staff</p> <ul style="list-style-type: none"> • Deploying BAME Staff to the safest available on-site role, enabling them to keep an appropriate distance away from others. • Reducing BAME Staff shift lengths so they have less interaction with other people. • Providing BAME Staff with additional personal protective equipment (PPE). • Staggering BAME Staff's start time so they travel when public transport and congestion into the workplace is less busy. 			
The transmission of COVID-19 during the recruitment process.	<ul style="list-style-type: none"> • Staff conducting interviews. • Prospective staff members. • New staff members. 	Medium	<p>Enquiries and Applications</p> <ul style="list-style-type: none"> • These are to be dealt with in the normal way by making contact with the candidate via telephone or video call to discuss the application. 	Low	<ul style="list-style-type: none"> • To remain vigilant to any government updates and legislation changes. 	Managing Director and COVID Coordinator - to be assessed weekly.

			<p>Interviews</p> <ul style="list-style-type: none"> • Interviews should be conducted via virtual means where possible. Interviews can be conducted over the phone as a last resort. Candidates should complete the Full Application before the interview as usual. <p>Offering a Position of Employment</p> <ul style="list-style-type: none"> • When offering a candidate a position, this can also be done via virtual means or by phone. • Candidates should email over the screen shots, photos or scans of ID documents which can be used to complete the DBS. Original copies will need to be brought in on the candidates first day so appropriate copies can be taken and documents verified. • The offering of the position, set-up and contracts will be completed in the normal manner. • Reference checks will also be conducted in the normal manner. <p>Induction</p> <ul style="list-style-type: none"> • While we are still advised to continue Social Distancing, induction intake for new staff will be limited to 4 new starters. This will allow delivery of inductions to be carried out at a safe distance. However if recruitment is buoyant alternative locations for training should be sought to accommodate more starters. This should be a maximum of 8. • Training for care workers will only involve the mandatory courses and shadowing to allow new starters to work independently at a faster rate. • For all personally delivered courses, social distancing guidelines will be adhered to. • Training will be delivered via online course where social distancing is not possible. 			
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			<ul style="list-style-type: none"> • New starters will be contacted before training to check they are well and they will enter the training room directly to limit their access to other staff. • Those attending the induction will be subject to all requirements for those visiting the office (wearing masks, facilities and taking temperature) • New starters working within Schemes will shadow staff members, with a pragmatic approach, and will adhere to Service User requests for not allowing anymore staff in their house than necessary. • In the event staff are concerned about sharing a car with a new starter, then they should travel separately and mileage will be reimbursed. • Shadowing in the community will also be undertaken pragmatically and safely. <p>Hand Washing</p> <ul style="list-style-type: none"> • Hand washing facilities with soap and water in place. • Stringent hand washing taking place. • Drying of hands with disposable paper towels. • Gel sanitiser units placed in all schemes and offices where washing facilities not readily available, specifically at front entrances and in meeting/training rooms. • Individual bottles of sanitiser will be provided for each desk for use throughout the day. • 'Wash hands' and 'Hand washing guide' posters placed in bathrooms. <p>Social Distancing</p> <ul style="list-style-type: none"> • New applicants attending the office for Induction training will be subject to all Social Distancing measures within the office and training room. • Prospective employees, new starters, interviewers and trainers should use the closest toilet to them and limit contact with other staff members and service users. • Social distancing also to be adhered to in common areas. 			
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			<ul style="list-style-type: none"> Trainers will conduct the training course from behind the screen provided. <p>PPE - Wearing of Masks</p> <ul style="list-style-type: none"> Staff will be required to wear a face mask throughout the training course. <p>Temperature Checks</p> <ul style="list-style-type: none"> On entering the offices, all staff, external visitors, contractors and members of the public will be temperature checked using a contactless digital thermometer. Individual office staff cannot administer their own temperature check and will require assistance to do this. Anyone that has a temperature that is high (37.8C) will not be allowed entry to the office and will have to return home where they can seek advice on what to do next. Throughout this situation, staff members and management will remain in communication to make sure the correct steps are being taken. <p>Symptoms of Covid-19</p> <ul style="list-style-type: none"> If anyone becomes unwell with a new continuous cough, high temperature, or sudden change to sense of smell or taste in the workplace, (or any other currently recognised and identified COVID symptom) they will be sent home and advised to follow the stay at home guidance. Line managers will maintain regular contact with staff members during this time and test will be arranged. If advised that a member of staff or public has developed Covid-19 and were recently on our premises, the management team will contact the Public Health Authority to discuss the case, identify people who have been in contact with them and will 			
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			<p>take advice on any actions or precautions that should be taken.</p> <p>The transmission of COVID-19 within Black, Asian and Minority Ethnic (BAME) Staff</p> <ul style="list-style-type: none"> • Deploying BAME Staff to the safest available on-site role, enabling them to keep an appropriate distance away from others. • Allowing BAME Staff to conduct interviews via phone/video call where possible. • Allowing prospective BAME staff to be interviewed via phone/video call where possible. • Reducing BAME Staff shift lengths so they have less interaction with other people. • Providing BAME Staff with additional personal protective equipment (PPE). • Staggering BAME Staff's start time so they travel when public transport and congestion into the workplace is less busy. 			
Transmission of COVID-19 via new and prospective service users.	<ul style="list-style-type: none"> • Staff • Existing Service Users • Extremely vulnerable groups • Vulnerable groups – Elderly, Pregnant workers, those with existing underlying health conditions 	High	<p>Accepting New Packages of Care/Hospital discharges</p> <ul style="list-style-type: none"> • For accepting packages as part of a hospital discharge. 'Case definition' should also be identified as part of the package acceptance as well as asking the following questions: <ol style="list-style-type: none"> 1. Was the original admission COVID-19 related? 2. Is the SU COVID-19 positive? 3. Has the SU been tested for COVID-19 and what is the result? 4. If yes, are the result ready or still pending? 5. Has the SU shared a ward with other patients that are COVID-19 positive? 6. Is it the recommendation of the health professional the SU self-isolates on their return home? 7. Is the SU symptomatic? 8. Are they returning home to someone that is COVID positive, symptomatic or required to self-isolate? <p>New Service Users that meet the following criteria are considered 'extremely vulnerable'.</p>	Medium/Low	<ul style="list-style-type: none"> • To remain vigilant to any government updates and legislation changes. 	Managing Director, COVID Coordinator, ECH Managers -to be assessed weekly.

			<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 in the last 6 months, or who are still taking immunosuppression drugs - 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. • When 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 – including face masks. Service User and the member of staff wear face mask during all care visits, where possible – for Service Users who cannot physically wear a mask, additional precautions are to be put in place. • As a precaution enhanced levels of PPE (wearing a face mask) will be adhered to for the first 7 days of the care package regardless. If it has been determined that the Service User does not meet any of the above criteria then the levels of PPE can be reduced after this initial 7 days. 			
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			Existing Care Packages <ul style="list-style-type: none"> For existing care packages that have been admitted to hospital but are now ready to return home all of the above COVID-19 based assessment questions will be asked. The appropriate PPE should be worn when accepting new and existing packages of care. In the event the Service User is unable to wear a mask then an individual risk assessment should be carried out as to whether the package can safely proceed without the Service User wearing a mask and this should be completed before accepting/agreeing to start the care package. Referrals for new Service Users that have not been tested will not be accepted. We require a negative test result before acceptance. We require a temperature check of the Service User 48hrs before discharge. New referrals should not be accepted with less than 48hrs notice to allow preparation and implementation. Existing packages can be accepted without a test if admitted for 72hrs or less. 			
Mental health and wellbeing affected through isolation or anxiety about coronavirus	Staff	High	<ul style="list-style-type: none"> Have regular keep in touch meetings/calls with people working at home to talk about any work issues Talk openly with workers about the possibility that they may be affected and tell them what to do to raise concerns or who to go to so they can talk things through. Involve workers in completing risk assessments so they can help identify potential problems and identify solutions. Keep workers updated on what is happening so they feel involved and reassured. Discuss the issue of fatigue with employees and make sure they take regular breaks, are encouraged to take leave, set working hours to ensure they aren't working long hours Signpost staff to the Employee Assistant Program - Health Assured - where they can assess independent advice and support for mental health, financial and wellbeing. 	Low	<ul style="list-style-type: none"> Share information and advice with workers about mental health and wellbeing Consider an occupational health referral if personal stress and anxiety issues are identified 	Managing Director, COVID Coordinator, Line Managers and ECH Managers -to be assessed weekly.

People becoming unwell and exhibiting COVID symptoms while on-site or a symptomatic person using a site	Staff	High	<ul style="list-style-type: none"> • If a member of staff becomes unwell in the workplace with coronavirus symptoms (a new, continuous cough, a high temperature, sudden change of taste or smell or any other currently recognised COVID symptom) they should be sent home and advised to follow government advice to self-isolate. A test will also be arranged for the staff member to be completed. • The following actions should be taken within the workplace: <ul style="list-style-type: none"> - All surfaces that a symptomatic person has come into contact with must be cleaned and disinfected, especially objects visibly contaminated with body fluids and all potentially contaminated high contact areas such as toilets. - Public areas where a symptomatic individual has passed through and spent minimal time, such as corridors, but which are not visibly contaminated with body fluids, can be cleaned thoroughly as normal. - Cleaning staff should use disposable cloths or paper roll and a combined detergent disinfectant solution. - Cleaning staff must wear appropriate PPE. - Waste from cleaning of areas where possible cases have been (including disposable cloths and tissues) should be “double-bagged” and tied off; it should be placed in a secure holding area for 72 hours before being disposed of in general waste. 	Low	<ul style="list-style-type: none"> • If other staff members begin to exhibit symptoms then this will be considered an outbreak and the senior management will decide how to move forward. 	Managing Director, Senior Management and COVID Coordinator.
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