

## Risk Assessment Guidance – COVID-19

### Introduction

Preserving and protecting the health, safety and wellbeing of staff and keeping them well is critical for the NHS as we respond to the coronavirus outbreak (COVID-19). It is essential that NHS organisations take every effort to support the physical and mental wellbeing of our people to enable them to stay healthy and protect themselves, colleagues, patients and families as we continue to deliver services through this challenging period.

### Staff with comorbidity and those in higher risk groups

The Government is actively reviewing the advice to protect those people who are at significantly increased risk from COVID-19 due to underlying health conditions.

The staff groupings:

### 1) Staff in the very high risk groups who are ‘extremely vulnerable from covid -19’

We are aware that the NHS in England will now be directly contacting staff who are deemed to be at very high risk to recommend that they take more stringent measures to protect themselves due to specific clinical conditions. Staff will be contacted by the NHS Business Services Authority, GP practice or Specialist, week commencing 23 March; however as an organisation we want to ensure that we proactively put measures in place to support the health and wellbeing of staff in these particular groups:

1. Solid organ transplant recipients
2. People with specific cancers:
  - People with cancer who are undergoing active chemotherapy or radical radiotherapy for lung cancer
  - 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.
3. People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe COPD
4. People with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as SCID, homozygous sickle cell)
5. People on immunosuppression therapies sufficient to significantly increase risk of infection
6. People who are pregnant with significant congenital heart disease

We have been advised to inform you that you should not contact your GP or healthcare team but to wait until they contact you directly. **Staff identifying to this category, will be supported to work remotely. This group will be advised to follow the guidance on shielding for a minimum period of 12 weeks.**

<https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>

## **2) Staff in 'at risk' groups with 'increased risk of severe illness from COVID – 19'**

In addition, advice from Government confirmed that the groups of people who should take particular care to minimise their social contact were:

- People over the age of 70
- Other adults who would normally be advised to have a flu vaccine (such as those with chronic disease)
- Chronic (long-term) respiratory diseases, such as asthma, chronic obstructive pulmonary disease (COPD), emphysema or bronchitis
- Chronic heart disease, such as heart failure
- Chronic kidney disease
- Chronic liver disease, such as hepatitis
- Chronic neurological conditions, such as Parkinson's disease, motor neurone disease, multiple sclerosis (MS), a learning disability or cerebral palsy
- Diabetes
- Problems with your spleen – for example, sickle cell disease or if you have had your spleen removed
- A weakened immune system as the result of conditions such as HIV and AIDS, or medicines such as steroid tablets or chemotherapy
- Being seriously overweight (a BMI of 40 or above)
- Pregnant women

Pregnant women in their first or second trimester, that is under 28 weeks' gestation, pregnant women should only be supported to continue working if the risk assessment advises that it is safe for them to do so. This means that employers must remove any risks (that are greater in the workplace than to what they would be exposed to outside of the workplace).

For pregnant women from 28 weeks' gestation, or with underlying health conditions such as heart or lung disease at any gestation, a more precautionary approach is advised. Women in this category should be recommended to stay at home. For many healthcare workers, this may present opportunities to work flexibly from home in a different capacity, for example by undertaking telephone or videoconference consultations, or taking on administrative duties.

<https://www.rcog.org.uk/globalassets/documents/guidelines/2020-04-21-occupational-health-advice-for-employers-and-pregnant-women.pdf>

## **3) Black, Asian and minority ethnic staff**

Emerging evidence indicates that black, Asian and minority ethnic (BAME) communities are disproportionately affected by COVID-19. Furthermore, the evidence suggests that the impact may also be higher among men and those in the higher age bracket. The reasons for this are not yet fully understood, a government inquiry into the reasons why has been launched, but more immediate action is needed in the interim to mitigate risks. As a precautionary basis it is recommended that employers should risk-assess staff at a potentially greater risk and make appropriate arrangements accordingly.

We will continue to support all staff to stay well and at work. We will make adjustments to enable this wherever possible. Adjustments may include working remotely or moving to a lower risk area. Line managers will complete a risk assessment and if appropriate seek advice from the Occupational Health and Wellbeing Team and/or HR. **This should be reviewed regularly as these are dynamic risks that will change over time.**

Actions to be taken for staff will depend upon the general level of risk to the group that the individual belongs to, any comorbidity affecting an individual, their condition and how stable it is. Where a condition is unstable and there may be an increased risk to staff, these conversations should be undertaken with those staff by their manager, their manager may need to seek support from the Occupational Health & Wellbeing Team and/or HR. Where staff, have to be redeployed or work from home, consideration should be given to what duties they can continue to carry out in a role, and what support they will need to do this.

## Risk Assessment

Name		Work area	
Manager		Date Of This Assessment	

No	Hazard / Risk Identified	Control Measures
1	<p><b><u>Staff in the very high risk groups 'extremely vulnerable group'</u></b></p> <ol style="list-style-type: none"> <li>1. Solid organ transplant recipients</li> <li>2. People with specific cancers:               <ul style="list-style-type: none"> <li>• People with cancer who are undergoing active chemotherapy or radical radiotherapy for lung cancer</li> <li>• People with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment</li> <li>• People having immunotherapy or other continuing antibody treatments for cancer</li> <li>• People having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors.</li> <li>• People who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs.</li> </ul> </li> <li>3. People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe COPD</li> <li>4. People with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as SCID, homozygous sickle cell)</li> <li>5. People on immunosuppression therapies sufficient to significantly increase risk of infection</li> <li>6. People who are pregnant with significant congenital or acquired heart disease</li> </ol>	<p>This group will be advised to follow the guidance on shielding for a minimum period of 12 weeks. <b>These employees cannot remain in work</b> during this time, but if well, may wish to explore home working.</p> <p><a href="#">Shielding guidance</a></p>
		<b>Actions Agreed</b>

No	Hazard / Risk Identified	Control Measures
2.	<p><b><u>Staff in 'at risk' groups 'increased risk of severe illness from covid-19'</u></b>            In addition, advice from Government confirmed that the groups of people who should take particular care to minimise their social contact were:</p> <ul style="list-style-type: none"> <li>• People over the age of 70</li> <li>• Other adults who would normally be advised to have a flu vaccine (such as those with chronic disease)</li> <li>• Chronic (long-term) respiratory diseases, such as asthma, chronic obstructive pulmonary disease (COPD), emphysema or bronchitis</li> <li>• Chronic heart disease, such as heart failure</li> <li>• Chronic kidney disease</li> <li>• Chronic liver disease, such as hepatitis</li> <li>• Chronic neurological conditions, such as Parkinson's disease, motor neurone disease, multiple sclerosis (MS), a learning disability or cerebral palsy</li> <li>• Diabetes</li> <li>• Problems with your spleen – for example, sickle cell disease or if you have had your spleen removed</li> <li>• A weakened immune system as the result of conditions such as HIV and AIDS, or medicines such as steroid tablets or chemotherapy</li> <li>• Being seriously overweight (a BMI of 40 or above)</li> <li>• Pregnant women (see advice and link in the above guidance)</li> </ul>	<p>Adjustments <b>may include working remotely or moving to a lower risk area.</b></p> <p>Actions to be taken for staff will depend upon their condition and how stable it is. Where a condition is unstable and there may be an increased risk to staff, these conversations should be undertaken with those staff with their manager, their manager may need to seek support from the Occupational Health &amp; Wellbeing Team and/or HR.</p> <p>Where staff, have to be redeployed or work from home, consideration should be given to what duties they can continue to carry out in a role, and what support they will need to do this.</p> <p><a href="#">Stay at home guidance including 'at risk' group</a></p> <hr/> <p><b>Actions Agreed</b></p>

No	Hazard / Risk Identified	Control Measures
3.	<p><b><u>BAME staff who are considered a greater risk from COVID-19</u></b></p> <p>Emerging evidence indicates that Black, Asian and minority ethnic (BAME) communities are disproportionately affected by COVID-19, therefore, coming from a BAME background is to be taken as a risk in itself, but also be aware of and take account of other factors and possible comorbidities that can increase the risk to BAME staff still further, such as the following considerations and conditions:</p> <ul style="list-style-type: none"> <li>• age</li> <li>• being male</li> <li>• visceral obesity</li> <li>• diabetes and metabolic syndrome</li> <li>• hypertension</li> <li>• ischaemic heart disease</li> <li>• chronic lung disease</li> <li>• vitamin D deficiency</li> </ul> <p>A government inquiry into the reasons why has been launched, but more immediate action is needed in the interim to mitigate risks. As a precautionary basis it is recommended that employers should risk-assess staff at a potentially greater risk and make appropriate arrangements accordingly.</p>	<p>Adjustments may include working remotely or moving to a lower risk area, this should also include discussion with regards to the most suitable PPE. However, current practice remains that PPE should be allocated in accordance with clinical category.</p> <p>Actions to be taken for staff will depend upon their condition and how stable it is. Where a condition is unstable and there may be an increased risk to staff, these conversations should be undertaken with those staff with their manager, their manager may need to seek support from the Occupational Health &amp; Wellbeing Team and/or HR.</p> <p><b>Where staff, have to be redeployed or work from home, consideration should be given to what duties they can continue to carry out in a role, and what support they will need to do this.</b></p> <p><a href="#">BAME considerations NHS Employers</a></p> <p><a href="https://www.nhsemployers.org/covid19/health-safety-and-wellbeing/risk-assessments-for-staff">https://www.nhsemployers.org/covid19/health-safety-and-wellbeing/risk-assessments-for-staff</a></p>
		<b>Actions Agreed</b>

No	Hazard / Risk Identified	Control Measures
4	Staff living in a household with someone who is in an 'at risk' group	<p>The advice currently does not require individuals who live with high risk vulnerable people to isolate. Such staff can <b>therefore come into work as normal</b>.</p> <p>These staff should follow advice on good hygiene including:</p> <ul style="list-style-type: none"> <li>• Social distancing;</li> <li>• only providing care that is essential;</li> <li>• washing hands when arriving home and at regular intervals using soap and water for at least 20 seconds or use hand sanitiser; cover your mouth and nose with a tissue or your sleeve (not your hands) when coughing and/or sneezing;</li> <li>• put used tissues in the bin immediately and wash hands afterwards;</li> <li>• do not visit or provide care if you are unwell and make alternative arrangements for their care;</li> <li>• provide information on who they should call if they feel unwell, how to use NHS111 online coronavirus service and leave the number for NHS 111 prominently displayed;</li> <li>• find out about different sources of support that could be used and accessing further advice on creating a contingency plan is available from <a href="#">Carers UK</a>.</li> <li>• look after your own well-being and physical health during this time.</li> </ul> <p><a href="#">Guidance on living with vulnerable household members</a></p>
		<b>Actions Agreed</b>

<b>COMPLETED BY</b> (Please print name /Designation)		<b>SIGNATURE</b> <b>DATE</b>	
<b>APPROVED BY</b> (Manager – Please print name)		<b>SIGNATURE</b> <b>DATE</b>	

**Any changes to health or work will require a regular review of the risks and actions required to mitigate those risks**