

COVID-19 Staff Risk Assessment form

Employee Name:

Date:

Area/Team/Service:

Directorate/School:

Job Role:

This individual Risk Assessment and process has been developed to help ensure the safety of all our staff.

The risk assessment looks to assess your risks and to safeguard those of you at most risk of adverse or serious reactions to Covid-19 infection, based on the emerging data and evidence available to date.

The outcome of the risk assessment process will determine next steps and may result in no change to your current working arrangements, a move away from higher risk areas or working from home arrangements, if possible. If there is any doubt about the most appropriate next steps, we will seek advice from our Human Resources (HR) or Occupational Health provider immediately.

The risk assessment is very straightforward and should be completed by you individually and sent to your line manager for discussion about any underlying health conditions or other risk factors identified. It should be a meaningful conversation and exploration of any risk factors, including your individual perception of the risks to you.

Where there is agreement, and it is clear there are increased risks to you because of the Covid-19 situation which cannot be mitigated by the control measures in the workplace Covid-19 risk assessment, your line manager will provide support and make necessary adjustments to mitigate those individual risks, which may include HR or Occupation Health referral / advice.

The risk assessment is necessary for us to undertake our duty of care to each of you. We need both health and equalities-type information to carry out a proper risk assessment. The information will be kept confidential to line manager if in case of dispute, etc.

It is important that you share any underlying health conditions with us so we can assess the risk to you and ensure you are able to work safely. If you feel unable to discuss any health conditions with your manager please contact HR and we can arrange a discussion with an independent person, such as Occupational Health. This risk assessment will be reviewed when circumstances change, such as when lockdown standards are changed. The assessment will be kept by your manager until the COVID-19 restrictions have been eased.

INTRODUCTION

Emerging evidence suggests that, alongside underlying health conditions and, there are four other key demographic factors that can affect people's vulnerability, or 'risk factor' in relation to COVID-19 health outcomes:

- Age
- Gender
- Ethnicity
- Occupation

This risk assessment is designed to enable an assessment of individual staff members at most risk of infection and adverse or serious reactions to Covid-19 infection, based on the emerging data and evidence currently available.

In simple terms older people, men, and people from Black and Asian and Minority Ethnic (BAME) communities appear to be at greater risk from Covid-19 severe infection

The causes of these increased risk factors are not yet fully understood, and further research is currently taking place. Even though we do not fully understand the causes, it is important for us to take notice of what the evidence is telling us so far.

We are asking line managers and colleagues that falls into the categories described above to carry out an individual risk assessment; this should take into consideration colleagues' age, gender, and ethnicity risk factors – particularly where there is a combination of factors that include underlying health conditions.

The risk assessment should be a meaningful conversation and exploration of the risk factors and perception of the colleague. Where there is agreement that the risk factors can be mitigated to everyone's satisfaction no change is needed. Where however it is clear there are increased risk for a colleague the line manager must provide support, and make necessary adjustments to mitigate those risks.

The Human Resources, as well as the Safety, Health and Wellbeing teams, can provide advice and support to the line manager and colleague in concluding an approach that supports the individual, and, should any adjustment to staffs working arrangement place a strain on services, these issues must be escalated to ensure support is provided to resolve the issues as quickly as possible.

** From 1 August 2020:*

If you were previously in the "clinically extremely vulnerable group" and therefore shielding, it is important that you discuss any return to work with your line manager before returning. This discussion should consider the risks, as outlined in this risk assessment tool, but also the job role and personal impact shieling may have had on you. An agreed approach can then be reached about a suitable and safe return. Further guidance can be found here – ["Guidance on shielding and protecting people who are clinically extremely vulnerable from COVID-19"](#)

INFORMATION FOR YOU ABOUT SOME OF THE RISKS ASSOCIATED WITH COVID-19

Occupation

It is important to consider job roles when establishing risk to individuals following completion of this risk assessment. Those employed in roles that can implement robust social distancing and hygiene measures, are highly unlikely to be infected. Similarly, those roles where there is little or no contact with unknown people carry little risk.

Healthcare and care occupations, that require close daily contact, involving personal and intimate care with people that are likely to be infected, particularly in indoor environments, are at greatest risk of the infection. For these workers, strict controls over activities and the use of PPE should already be in place and workers who have diagnosed underlying health conditions (see below), that put them at increased risk, should not be undertaking these roles. Other occupations that have close contact, such as teachers and other school staff, are less likely to be exposed when compared to healthcare and care workers, particularly in care settings, but should still be considered as of greater risk than those with little or no daily contact with people or office based staff.

Public Transport - You should also consider the safe use of public transport particularly if you have to regularly travel for journeys of longer than 15 minutes. Mitigate the risk by traveling outside peak times where possible, maintain social distancing and of course you are required to wear a suitable face covering.

Are you aware of the health conditions associated with an elevated COVID-19 Risk?

The Government are advising those who have underlying health conditions to work from home where possible. If that is not possible, they can only return to a workplace if it has been designated as COVID-19 secure and therefore has suitable controls in place, including social distancing measures:

Significant Underlying Health Condition:

- solid organ transplant recipients
- people with specific cancers:
 - 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 chronic obstructive pulmonary disease (COPD)
- people with rare diseases that significantly increase the risk of infections (such as severe combined immunodeficiency (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

Moderate Underlying Health Conditions:

- are 70 or older
- are pregnant
- have a lung condition that's not severe (such as asthma, COPD, emphysema or bronchitis)

- have heart disease (such as heart failure)
- have diabetes
- have chronic kidney disease
- have liver disease (such as hepatitis)
- have a condition affecting the brain or nerves (such as Parkinson's disease, motor neurone disease, multiple sclerosis or cerebral palsy)
- have a condition that means they have a high risk of getting infections
- are taking medicine that can affect the immune system (such as low doses of steroids)
- are morbidly obese (a BMI of 40 or above)

You may have underlying health conditions not listed above, but that may put you at increased risk. You should be able to provide a letter from a medical practitioner confirming this and discuss with your manager the best approach to manage those risks.

Are you aware of other factors associated with an elevated Covid-19 Risk?

The emerging evidence suggests there are three key things that can affect an individual vulnerability, or 'risk factor': Age, Gender, and Ethnicity. It appears that older people, men, and people from Black, Asian and Minority Ethnic (BAME) communities are at greater risk from Covid-19 serious infection. The causes of these increased risk factors are not yet fully understood, and further research is taking place right now. Even if we don't know the causes, it is important for us to respond to what the evidence is telling us.

Age:

The evidence shows that older age is a clear risk factor. Compared to people in their 40s, people in their 60s are at greater risk, and this increases significantly for those in their 70s. So, in our teams we need to make sure we are acting to reduce older colleagues' exposure to the virus.

Gender:

The risk for men of becoming seriously ill from COVID-19 appears to be twice as likely than for women. This seems to start to increase with the age from 40 up to 85. We need to consider people's gender when assessing their risk from COVID-19, especially amongst older colleagues.

Pregnancy:

There's no evidence that pregnant women are more likely to get seriously ill from coronavirus. They have though been included in the list of people at moderate risk as a precaution and should be considered in that category for the purposes of this assessment. This is mainly because pregnant women can sometimes be more at risk from viruses such as flu.

Ethnicity:

The relationship between ethnicity and COVID-19 infection and severity of illness is complex and likely to be a combination of factors. Evidence suggests that COVID-19 may have a disproportionate impact on people from Black, Asian and Minority ethnic (BAME) groups. A recent study by Public Health Englandⁱ found that people from Black ethnic groups were more likely to be diagnosed with the infection compared to White British. Death rates from COVID-19 were highest among people of Black and Asian ethnic origin and had between 10 and 50% higher risk of death than White British. Although initial findings did not consider multiple other risk factors such as presence of underlying conditions, we are taking these findings seriously and, on this basis, we must take colleagues' ethnicity into account, when assessing their individual risk from COVID-19 infection.

Please place a x against each factor in table - age, gender & ethnicity and condition

This will provide a total score: e.g. A 60-year-old Asian male with no underlying health conditions would allocate scores as follows:

Age (band 50-69) – score 2
 Gender & ethnicity (Male Asian) – score 4
 Condition status (No underlying Health Condition) – score 1
 Total Score = 7 (category B)

RISK	SCORE	1	SCORE	2	SCORE	4	SCORE	5
AGE	Below the age of 50		50-69		70+		80+	
GENDER AND ETHNICITY	Female White		Female Asian		Male Asian			
			Male White		Female Black			
			BAME community (not identified as Black or Asian)		Male Black			
STATUS OF YOUR HEALTH CONDITION	None Known				Moderate Risk		High Risk	
	No underlying health conditions				Staff that are identified as having moderate Underlying Health Conditions or are pregnant		Staff that are identified as having significant Underlying Health Conditions	

TOTAL RISK SCORE AND SUGGESTED ACTION

Total Score 3-5	Total Score 6-12	Total Score 12	Any Individual Score of 5
Category A	Category B	Category C	Category D
Continue working in current environment following all safety precautions	<p>Discuss with employee about working arrangements and risk mitigation such as adjustments, social distancing and staggered use of public transport.</p> <p>For all staff who are identified as having a moderate Underlying Health Condition or are pregnant”, work from home where able or redeploy to work where able to work from home. Where not able, employ in roles where social distancing and strict</p>	<p><i>Hierarchy of Controls:</i></p> <ol style="list-style-type: none"> 1. Work from Home where possible 2. Change/place in roles where they can Work from Home 3. Only place in low risk roles (e.g. no close personal care activities, or regular exposure to numerous and unknown persons) 4. Place in roles where 2m social distancing and stringent hygiene can be maintained 5. Mitigate with 1m+ rule 6. Provide PPE. 	<p><i>Hierarchy of Controls:</i></p> <ol style="list-style-type: none"> 1. Work from Home where possible 2. Change/place in roles where they can Work from Home 3. Only place in low risk roles (e.g. no close personal care activities, or regular exposure to numerous and unknown persons) and where stringent hygiene and social distancing controls are in place

	hygiene rules can be applied.		
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Discussion Notes & Agreed Outcomes & Adjustments

1. Reiterate confidential nature of discussion
2. Confirm mutual understanding of why the risk assessment was needed and check understanding of risks, refer to the detail on page two
3. Talk about risk factors and scores, explore what that now means with your manager
4. Talk about and explore any concerns or issues concerning the suggested action within the category scored on page 5.
5. Agree next steps
6. If there is any doubt in relation to a declared or known underlying health condition, obtain Occupational Health advice
7. Regularly review assessment considering changes in government advice and individuals circumstances

Some Examples of adjustments and controls to consider if at greater risk:

- *Home/Remote working if the staff member is enabled (staff member does have access to equipment and Wi-Fi or access has been requested from IT)*
- *Redeployment to lower risk area or where able employ in roles where able to maintain 2m social distance from colleagues and service users*
- *Limit duration of close interaction with service user (e.g. prepare everything in advance away from service user)*
- *Limit regular interaction with unknown persons*
- *Whether public transport / rush hour can be avoided through adjustments to work hours.*
- *Seeking information from service user before interaction/visits and requesting that only service user is in attendance for home visits/outreach where possible*
- *Phased return to work for those previously shielding*
- *Consider the use of PPE*

Confirmation of agreement:

I can confirm that any information contained in this risk assessment is reflective of the conversation held and agreement reached:

Line Manager's Name (Print Name)	
Signed	
Date	
Staff Name (Print Name)	
Signed	
Date	

ⁱ Public Health England, June 2020: Disparities in the risk and outcomes of COVID-19
