

# COVID-19 Managers' Guide to Risk Assessment and full Risk Assessment Tool:

Assessment and Management of staff defined as vulnerable groups with Chronic Long Term Health Conditions, Clinically Extremely Vulnerable (the Shielding Group), Over 70s and Black, Asian and Minority Ethnic (BAME) staff.

All staff are required to complete a self-risk assessment to ensure their safety in the workplace. The self-risk assessment identifies staff members into one of two risk groups:

- General Population Risk Group OR
- A Vulnerable Risk Group

Public Health England (PHE) advice specifically recognises the health and wellbeing of staff who fall into 'vulnerable risk' groups as being at increased risk. These groups are Clinically Vulnerable and Clinically Extremely Vulnerable (the Shielding Group). People fall into one of the vulnerable groups if:

- they have specific or a combination of specific underlying health conditions
- aged over 70
- pregnant\*\*
- BME with underlying condition(s), or BME and aged over 55

People who fall into the **vulnerable groups** may be considered as being at **low, moderate or significant risk** in relation to the severity of Covid-19 should they contract it. This means that they are at increased risk compared with the general population and required a full risk assessment to ensure that effective controls are put in place to reduce exposure risks as far as reasonably practicable.

In line with NHS Employers guidance and NHS England, MFT are required to ensure that all staff at increased risk (therefore classified as 'vulnerable') have completed a **full COVID-19 risk assessment** with their line manager, whether they work in COVID-19 areas or other areas of the Trust. MFT staff are therefore requested to identify themselves as falling into the Vulnerable Groups as details above to enable managers to progress with a full COVID-19 risk assessment.

**Pregnant workers** should also have a full risk assessment – see separate Pregnant Workers Risk Assessment for further details.

The main objective is to minimise exposure and risk for the employee, and where possible enable them to continue working.

Managers should undertake a risk assessment for each team member who has identified themselves as falling into one or more of the above defined groups to make informed management-based decisions on role requirements, whilst considering the guiding principles below.



The risk assessment must be completed **<u>BEFORE</u>** an individual decides to self-isolate for any of the reasons above. Managers should consider the following when carrying out the risk assessment:

- Ensure you are using the most current version of this form which can be accessed via the Employee Health and Wellbeing pages accessing on the intranet or via the Learning Hub
- Recognise that staff may be very anxious and concerned about the current situation with Covid 19 and that advice and guidance is frequently changing which may cause confusion.
- Encourage staff to identify their health conditions or ethnicity and report any relevant issues, not making any assumptions about the employee.
- Reassure staff that MFT takes their health and wellbeing very seriously and that we will work to support them during these challenging times.
- Reinforce that there is not strong evidence that they (these groups) have a higher risk of contracting Coronavirus. For all with underlying health conditions it is however recognised that, should they become infected, they may suffer more severe symptoms and complications.
- Encourage staff to share any concerns which they have in connection with their role, training and PPE provision of requirements.
- Remind staff of the importance of maintaining good personal hygiene e.g. handwashing and social distancing.
- Reassure staff that using appropriate PPE already reduces risk and prevents transmission if used correctly

## **Risk Assessment**

Managers should use the risk assessment to record agreed actions or reasons why adjustments cannot be put in place. The form will be stored as a document within the Employee Record on the Empactis system and should be reviewed either monthly or when changes in circumstance require, whichever comes first.

If adjustments to help staff to remain in work are not feasible, you must discuss the situation with your HR Team before making a final decision. Remember to tell staff members that are self-isolating to report their absence via Absence Manager (MLCO - as per local absence reporting arrangements). These episodes will not count towards attendance triggers and will be categorised as medical suspension in ESR – this will be time-limited and reviewed regularly.

## **Process**

Managers should consider there are three aspects to the assessment of risk:

- 1. **Biology** these are the clinical/medical factors identified by the individual within their independent self-assessment that causes them to be considered for the full risk assessment
- 2. **Environment** these factors are now the consideration of management within the completion of the full risk assessment, what are the environmental risk factors and how can these be mitigated or addressed?
- 3. **Exposure** this is the final factor to consider within the full risk assessment. What is the exposure risk to the individual and how can this be mitigated or addressed?



To assist management in the process of risk assessment we have provided additional criteria for individuals with health concerns (see Appendix 1). However this is not exhaustive and **control of the environment and exposure** remain most important, rather than a focus on the specific medical condition, gender or ethnicity (**biology**).

Discuss with the staff member their role requirements and determine if they can remain in work having considered both the health risks and role risks (see Appendix 2), discuss each point and record underneath agreed actions or reasons for why adjustments cannot be put in place.

All managers are advised to give consideration to the requirements for members of their team who have either clinical contact with patients and/or social contact with patients and colleagues and to look at ways this can be reduced, including home working and other measures. This will not be possible or appropriate for all staff, particularly those in front-line roles but, consideration should be given for the above groups as a minimum.

Management may incur situations where an individual identifies as medium to significant risk but does not wish to move away from their working role/duties/activity. In these instances, the mitigations to risk should be clearly documented and the ongoing exposures or environmental factors highlighted in the documentation with confirmation of understanding/acceptance of risk by the member of staff.

### **Vulnerable Household Members**

If a member of staff has high risk or vulnerable household members, it is recommended the risk assessment is completed and depending upon the outcome of this, the member of staff may wish to consider options such as relocating into staff accommodation to enable them to remain in work or looking at how they maintain safe practise at home.

Where a staff member is the main carer i.e. the higher risk individual or person with a shielding letter is a child, the member of staff should be considered as the higher risk individual and assessed appropriately.

## Clinically Extremely Vulnerable (Staff who have received a Shielding Letter):

Individuals who fall into this category will be contacted nationally regarding the requirements to remain at home currently until the current period of shielding is paused on 1st August 2020. A full individual risk assessment should be undertaken and regularly reviewed using current government and trust guidance to enable line managers to consider the options available for the individual to continue to work in their current role or to undertake alternate duties during this period.

#### Post Risk Assessment

- Record your conversations within the employee's personal file in the Empactis system and update as required.
- Review the situation regularly to see if any further considerations of change are possible or required due to changes in guidance. The frequency of the review will be dependent on the outcome of the assessment, if the employees' circumstances change or they request a further review.



For further advice regarding risk assessments contact the Employee Health and Wellbeing Team via ehw@mft.nhs.uk or by phoning 0161 276 4289.

Please note that the Employee Health and Wellbeing Intranet site has general advice and support regarding Coronavirus (COVID-19) as well as links to external resources which managers may find helpful.



## **Individual Risk Assessment Checklist for COVID19**

Name of Staff Member	
Employee Number	
Job Title	
Hospital/MCS/MLCO/Corporate Function	
Department/Ward	
Name of Assessor/Line Manager	
Date of Assessment	

INDIVIDUAL HEALTH	Tick answer		Indicate which risk group the employee falls within and any	
ASSESSMENT	Yes	No	additional information	
Individual has completed a self- risk assessment form and has confirmed their assessment			<ul> <li>General Population Risk Group</li> <li>Vulnerable Group</li> <li>Age</li> <li>BAME</li> <li>Long Term Condition</li> <li>Pregnancy</li> <li>Other [please specify]</li> </ul>	
If the employee is in a vulnerable group, what risk level do they fall into?	•	Low Mode Signif	□ erate □ ficant □	

If the staff member falls into a **Vulnerable Risk group**, please complete the risk assessment algorithm and proceed with the **full COVID-19 risk assessment**, document actions below.

If the staff member falls into the **General Population Risk group**, a full COVID-19 risk assessment is not required but staff should follow general infection control guidance:

- Observe good hand hygiene, with frequent use of soap and water or alcohol-containing gel.
- Observe social distancing guidelines.
- Use appropriate personal protective equipment (PPE) as per Trust guidance.
- Observe isolation requirements for known or suspected COVID-19 cases.
- Ensure infection control training is up to date.

We must all follow infection control precautions which reduce the risk of becoming infected and taking the infection home.



**STAFF OPT OUT.** \*\*\*Only complete the section below if the staff member does not wish to proceed with a full manager risk assessment, otherwise progress to the assessment form\*\*\*

I have discussed with the above-named employee that their individual self-risk assessment places them in the **Vulnerable Risk group**. At this time, they have stated they do not wish

to progress with a full manager risk as any time in the future.	sess	ment but th	ey are awa	are they can re	quest or	ne at
Signature Staff Member						
Signature Manager						
Date						
QUESTIONS TO CONSIDER -	(A	ppendix	2) Pleas	e complete	with	the
appropriate information, as a rec	-					
Are they able to maintain so distancing in their normal duties? they required to be face to face opatients for treatment delivery assessment? What is their requirement work with colleagues on a face to face to face.	with or it to					
Are they able to avoid Aerosol General Procedures (AGPs) – For clinical staff?	_					
Are they able to avoid direct exposure suspected or confirmed COVID19 case						
Are they able to work in an alternal location or in another role (tempor redeployment)?						
Are they able to work alternative hours avoid risk factors?	s to					
Are they able to undertake any work video conferencing or telephone call attend meetings, telephone/remconsultations?	e.g.					
Are they able to work remotely e.g. home? Discuss which work activi could be undertaken.						
Are they able to work in an office on the own or with a reduced number of peop						



Actions discussed and agreed:
Outcome following assessment:  Remain in role, local measures agreed Alternative work arranged Working remotely/from home
☐ Other (provide details)
Signature of Assessor/Line Manager:
Signature of Staff Member:

## **Ongoing Management - Individual Risk Assessment for COVID19**

Date	Have there been any changes in health status or guidance?	If yes – how does this impact upon the assessment	Actions discussed and agreed	Signature of Line Manager/ Assessor	Signature of Staff Member	Planned next review date:

## **APPENDIX 1 - Consideration Groups for Risk Assessment**

		Risk	Level
Risk Factor	LOW RISK	MODERATE RISK	SIGNIFICANT RISK
Age  Evidence has shown that men over 60 and BAME staff over 55 have an increased risk of severe effects from COVID-19 should they encounter the virus	KISK	Men over the age of 60 with underlying health conditions which, if taken in isolation, may be considered low risk  All BAME staff over the age 55	Over 70 years of age  Men over the age of 60 with serious underlying health conditions  – actions should be taken for staff dependent upon their condition and how stable it is, there may be a requirement through a manager referral to seek EHW support in addressing this
Autoimmune/ Immunity		Problems with the spleen such as sickle cell disease, splenectomy or asplenic Weakened immune system as a result of HIV/AIDS, SLE/Lupus	Organ transplant and remaining on ongoing immunosuppression medication  Workers having immunotherapy or other continuing antibody treatments for cancer  Workers receiving treatment for rheumatoid arthritis i.e. Methotrexate, Hydroxychloroquine, Sulfasalazine – actions should be taken for staff dependent upon their condition and how stable it is, there may be a requirement through a manager referral to seek EHW support in addressing this

	Risk Level		
Risk Factor	LOW RISK	MODERATE RISK	SIGNIFICANT RISK
BAME Some BAME workers may have a disproportionately increased risk of COVID-19 Understanding the evidence around this is complex and ongoing	Workers with no underlying health conditions and less than 55 years old	Workers with no underlying health conditions over the age of 55 years old  Workers with an underlying health condition that, if taken in isolation, would suggest they are low risk  (Particular attention should be paid to BAME workers with high blood pressure, diabetes or asthma)	Workers with serious underlying health conditions – actions should be taken for staff dependent upon their condition and how stable it is, there may be a requirement through a manager referral to seek EHW support in addressing this
Cancer		Chemotherapy or radiotherapy in the last six months	Undergoing active chemotherapy or radiotherapy  Cancers of the blood or bone marrow such as Leukaemia who are at any stage of treatment  People who have had bone marrow or stem cell transplants in the last 6 months or who are still taking immunosuppression drugs
Cardiac Conditions	Previous heart attack with no ongoing problems; controlled high blood pressure, etc.	Chronic heart disease such as heart failure, ongoing angina	

	Risk Level			
Risk Factor	LOW	MODERATE RISK	SIGNIFICANT RISK	
	RISK			
Diabetes	Controlled by diet or tablets with no diabetic complications	Well controlled on insulin and with no diabetic complications	Diabetic complications or poor glucose control	
Medication/ Treatment		Workers taking medications such as steroid tablets, chemotherapy or immune modulators	Workers having treatment which can affect the immune system such a protein kinase inhibitors or PARP inhibitors	
			Workers taking any of the following medication:  Azathioprine Mycophenolate (both types) Cyclosporin Sirolimus Tacrolimus	
Metabolism and Other	Minor derangement of liver function.	Chronic liver disease such as active hepatitis Chronic kidney disease	Workers with rare diseases and inborn errors such as SCID or homozygous sickle cell disease  Severe diseases of body systems such as severe kidney disease (dialysis)	
Neurological	Mild multiple sclerosis only with sensory or visual changes Stable mild cerebral palsy	Chronic conditions such as Parkinson's Disease, Motor Neurone Disease, Multiple Sclerosis or Cerebral Palsy  Learning disabilities (from the point of view of being able to follow PPE and other guidance)		

		Risk	Level	
Risk Factor	LOW MODERATE RISK SIGNIFICANT RISK RISK			
Pregnancy	Please advise your manager if you are pregnant and they will undertake the pregnancy risk assessment with you.			
Respiratory Disease	Mild asthma – never hospitalised, not needing oral steroids	Chronic (long-term) disease such as problematic asthma, COPD, emphysema or bronchitis	Severe chest conditions such as cystic fibrosis or severe asthma (requiring hospital admissions or courses of steroid tablets)	
Weight		Having a BMI of 40 or above (seriously obese)		

## **Additional Considerations**

Should a worker have two or more low risk health considerations it is advised managers consider raising the health risk to moderate.

Should a worker have two or more moderate risk health considerations it is advised managers consider raising the health risk to significant.

You may wish to seek further advice from the EHW service before progressing with these considerations.

## **APPENDIX 2 - Role Assessment Considerations for Workers in the Vulnerable Risk Group**

(N.B Staff who fall into any of the below categories should have a full manager risk assessment completed)

#### LOW HEALTH RISK SIGNIFICANT HEALTH RISK MODERATE HEALTH RISK Involved in Not involved in Not involved in Not involved in Involved in Involved in patient care Involved in Involved in Involved in patient care: patient care: patient care: patient care patient care patient care **WITHOUT** patient care patient care WITHOUT **WITHOUT** e.g. e.g. WITH aerosol WITH aerosol WITH aerosol aerosol aerosol aerosol receptionists, receptionists. receptionists, generating generating generating generating generating generating porters, porters, procedures procedures porters, procedures procedures procedures procedures cleaners etc. cleaners etc. cleaners etc. (AGP)

## **Considerations:**

- Use of Universal Precautions/Best Infection Control Practice
- Minimise face to face patient contact as far as possible
- Wash hands after every patient contact
- Restriction of working area to sole occupancy/reduced occupancy
- Minimise social contact with coworkers

#### **Considerations:**

- Avoidance of AGP
- Redeployment to a lower risk activity, where practicable
- Work only in non-COVID19 cohort areas
- Use of Universal Precautions/Best
   Infection Control Practice
- Minimise face to face patient contact as far as possible
- Wash hands after every patient contact
- Minimise social contact with coworkers

### **Considerations:**

- Redeployment to a lower risk area, where practicable
- Use of Universal Precautions/Best Infection Control Practice
- Minimise face to face patient contact as far as possible
- Wash hands after every patient contact
- Restriction of working area to sole occupancy/reduced occupancy
- Minimise social contact with co-workers
- Use of remote or home working where possible
  - Telephone and video consultations
  - o Remote desk top login

### **Considerations:**

- Redeployment to a lower risk area or activity, where practicable
- Exclude from direct patient care of known or suspected COVID19 cases
- Make use of remote or home working
  - Telephone and video consultations
  - Remote desk top login

## Frequently Asked Questions and Management Information

Antibody Testing	Antibody testing of staff members has now commenced throughout the Trust. <a href="https://intranet.mft.nhs.uk/content/corporate-services/human-resources/covid19">https://intranet.mft.nhs.uk/content/corporate-services/human-resources/covid19</a> It is a test to see whether you have been exposed to COVID19 and developed antibodies. No further action is required by the employee on receipt of their result. Irrespective of the test results, staff should continue to practice social distancing, safe systems of work and continue to wear PPE if this has been identified as appropriate in their work environment. If the staff member develops new coronavirus (COVID-19) symptoms then they must follow the same guidance on <a href="self-isolation">self-isolation</a> irrespective of the outcome from their antibody test.
Employee Assistance Programme	At these difficult times, you or a member of your team may find they are experiencing increased anxiety, stress or depression.  It is useful to remember that the Trust has an independent Employee Assistance Programme (EAP) which employees can access in confidence 24 hours a day, every day. The EAP is provided by an external provider called Health Assured and can be contacted by phoning 0800 0 282 047 or via the website <a href="www.healthassuredeap.co.uk">www.healthassuredeap.co.uk</a> . The EAP can provide emotional support (including counselling) as well as practical advice on a range of topics.  Username – mft Password – mft  More information with regards to the counselling service and other psychological health and wellbeing services available at this time can be found on the <a href="Employee Health and Wellbeing">Employee Health and Wellbeing</a> intranet site.

## Manch

Employee Health and Wellbeing	https://intranet.mft.nhs.uk/content/corporate-services/employee-health-and-wellbeing
Infection Prevention and Control	https://intranet.mft.nhs.uk/content/hospitals-mcs/clinical-scientific-services/infection-control
Isolation Notes (Fit Notes)	If you or a member of your team are off work for over seven days because of self-isolating, either with COVID-19 symptoms or because of living with someone who has symptoms, you or they can now get an 'Isolation Note' via the NHS website. This means that you do not need to contact your GP to get a fit note (sometimes known as a medical certificate). For COVID-19 absences an isolation note will be accepted as an alternative.  The link to get an isolation note can be found <a href="here.">here.</a> . The isolation note will be provided via e-mail. If you do not have a personal e-mail address, please use <a href="webmail">webmail</a> to access your MFT e-mail account or use your line manager's e-mail address. You should email your isolation note to <a href="mailto:AskAbsenceManager@mft.nhs.uk">AskAbsenceManager@mft.nhs.uk</a> .
MFT COVID-19 Resource Area	https://intranet.mft.nhs.uk/content/important-information-about-covid-19-coronavirus
PPE – All guidance (scroll to bottom of page)	https://intranet.mft.nhs.uk/content/important-information-about-covid-19-coronavirus
Pregnancy	https://www.rcog.org.uk/en/news/updated-advice-for-pregnant-women-who-are-working-in-the-nhs-and-other-work-settings-during-the-coronavirus-outbreak/  MFT Pregnancy Risk Assessment - https://intranet.mft.nhs.uk/content/corporate-services/employee-health-and-wellbeing/untitled-page_8
Recurring absence due to COVID-19 Symptoms	If a staff member develops new coronavirus (COVID-19) symptoms at any point after ending their first period of staying at home (self-isolation or household isolation) then they

	must follow the same guidance on <u>self-isolation</u> again.
	This means they must stay at home for at least 7 days from when their symptoms started if they live alone and arrange to have a test. If they live in a household, they must stay at home for at least 7 days from when their symptoms started, arrange a test and all other household members must stay at home for 14 days.
	This will help to ensure that they are continuing to protect others within your household and in your community by minimising the amount of infection that is passed on.
	Reporting your absence from work due to symptoms:
	If you are absent from work and this has not been reported then please contact <b>Absence Manager</b> on 0330 808 0260. Manchester Local Care Organisation Staff should undertake local absence reporting arrangements. Your anticipated return to work date will be day eight following onset of symptoms.
	Reporting your absence from work due to a household member's symptoms:
Reporting Absence	If you are absent from work and this has not been reported then please contact <b>Absence Manager</b> on 0330 808 0260. Manchester Local Care Organisation Staff should undertake local absence reporting arrangements.
	If you remain symptom free during the 14 day isolation, your anticipated return to work date will be on day 15.
	If you develop symptoms during the 14 day isolation period, your anticipated return to work date will be on day eight following onset of symptoms.
Staff Testing	https://intranet.mft.nhs.uk/content/corporate-services/human-resources/covid19