Brief Guide to Risk Assessing COVID / Other Infectious Illnesses

This guidance has been developed in addition to the existing University risk assessment code of practice, with the specific purpose to support staff groups to identify reasonable controls to protect people from infectious illnesses, including coronavirus (COVID-19).

As with all risk assessments, the key points to consider are:

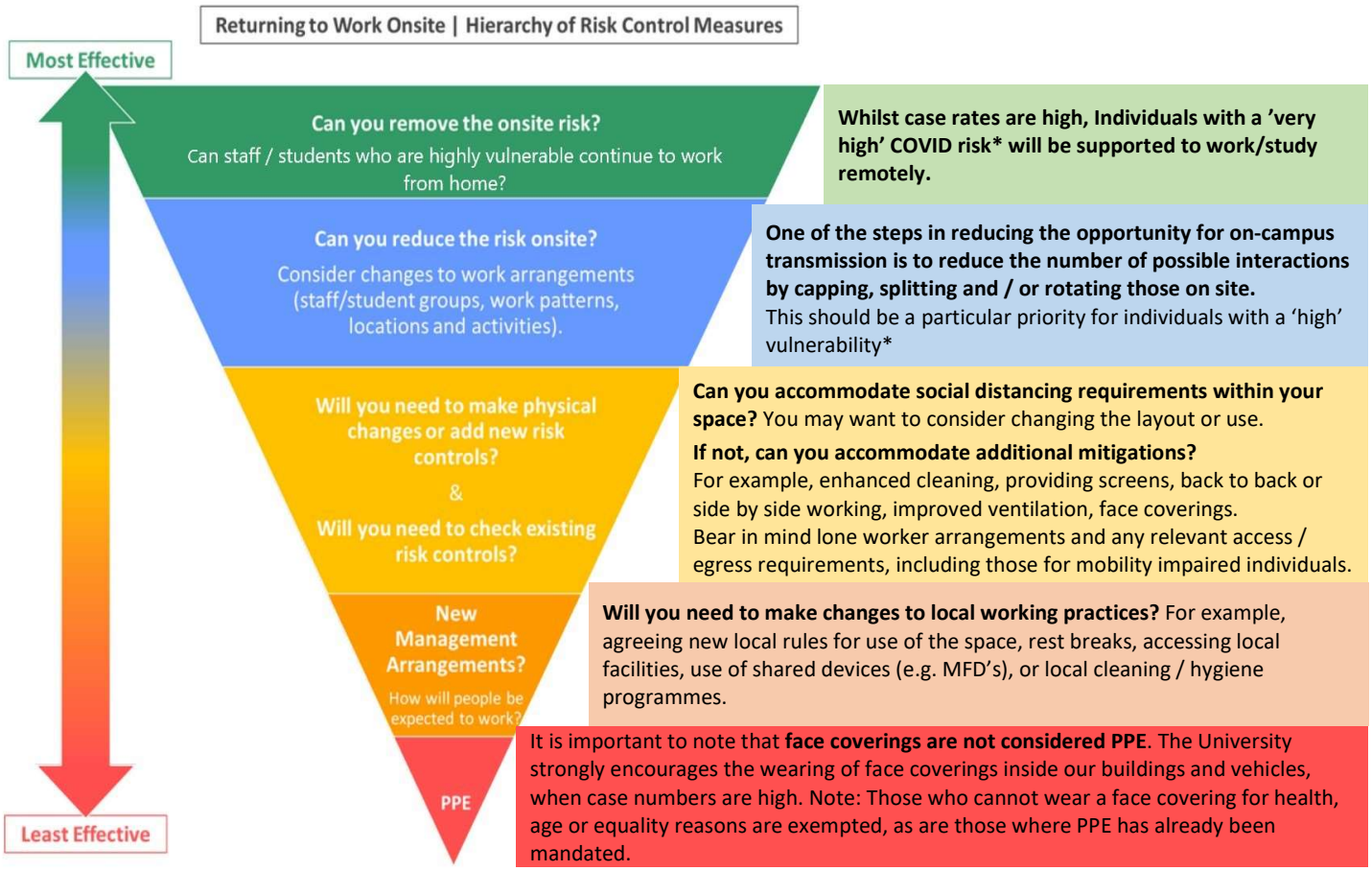
1. Identify what activities or situations might result in harm (i.e. infection with the virus.)

2. Think about who could be placed at risk of harm.

3. Decide how likely it is that the harm is realised (i.e. someone could be exposed).

4. Take measures to mitigate (i.e. remove the opportunity for exposure, or if this isn't possible, control the risk.)

The diagram and checklist below outline the hierarchy of risk control:



*'COVID-age' is a tool to help assess an individual's vulnerability to Covid-19. It summarises a combination of risk factors including age, sex and ethnicity and various health problems, alongside mitigating factors such as immunity, vaccination and prevalence, to give a single overall measure of vulnerability. Details on how to complete the COVID-age questionnaire can be found in our COVID Arrangements pages. Details on how to interpret someone's vulnerability / overall risk category can be found in our Managers guide to Interpreting Vulnerability

Check 1 – Can you reduce the onsite risk:

As an employer and educational establishment, we will continue to apply sensible and proportionate infection prevention measures to reduce the risk to the lowest reasonably practicable level and in order to help stop the spread of COVID-19 and other respiratory illnesses, including influenza. The University' general approach is outlined in the University's Infection Control Guidance. The below checklist should be used when conducting task specific risk assessments and should be considered alongside our usual risk assessment guidance.

Things to consider	**Possible mitigations**
Can a flexible working approach be considered?	The University position is that teaching and support services are predominantly provided face to face. However, the most effective way to remove the on-site infection risk is to limit on site working (e.g. by capping, splitting and / or rotating those working on site with mixed on site working and home working). When implementing infection controls, the first consideration should be whether some tasks can be completed from home. (See also our Working Principles). Having fewer people on site may also make it easier to achieve some of the other adjustments below (e.g. rearranging workstations to accommodate social distancing)
Do any individuals fall into the clinically extremely vulnerable, clinically vulnerable or other vulnerable categories (i.e. may have a 'very high' COVID vulnerability*)	Vulnerability will vary from person to person, depending on their particular circumstance and as case rates rise / fall. Individuals who are concerned or unsure about their vulnerability are strongly advised to complete the COVID-age questionnaire (this should be reviewed when circumstances and / or case numbers change) When case rates are higher, individuals who were previously identified as clinically / extremely clinically vulnerable are more likely to return a high / very high COVID vulnerability / risk rating. Where this is the case, a higher level of infection control measures will be necessary to mitigate against the fact that the individual is more likely to become severely unwell, should they catch an infectious illness.
Have you considered people's travel arrangements	The time and method of transport should be considered: Travelling during busy periods, within enclosed spaces, with limited opportunity to socially distance and without a face covering provides a higher likelihood of transmission compared to travelling at quieter times, on better ventilated services and whilst wearing a face covering. NOTE: Although the intercampus buses are considered a form of public transport for the purpose of risk assessment, the risk is considered lower than for other forms of public transport. This is because we have greater influence over passenger numbers and behaviour on the inter-campus buses.

Check 2 – Reducing opportunity for transmission:

If the task is being performed on-campus and not from home, social distancing measures should be encouraged. The greater the distance between individuals, the lower the likelihood of the virus being spread through aerosol droplets.

When completing individual risk assessments for people identified as 'high' or 'medium' vulnerability, it is particularly important to apply as many of the following mitigations as possible.

Things to consider	**Possible mitigations**
Could fewer people do the task, or could people work alone safely?	Consider changing or redesigning the task to reduce the number of people required to have close contact with each other. If individuals are working on their own, you will need to make sure lone worker arrangements are in place e.g. use of SafeZone or other buddy / check in process.
Do the tasks usually involve 'sharing' a work/learning space?	Consider when and where people work; can you use fixed teams or partnering, so each person works with only a few others and these do not change. Alternatively, consider limiting the number of people occupying a space at any given time.
Have you identified areas where people may come into close contact with others? Are there areas where people congregate e.g. kitchen facilities, tea points, waiting areas, meeting spaces or breakout areas? Does the work involve any tasks that would normally require close contact with staff/students or others?	Consider the space you are using and how you can spread people out or reorganise workflows to remove opportunities for the virus to be spread. This may involve: • using 'Teams' / meeting virtually rather than face to face • rearranging and/or removing furniture/ equipment • placing local signage / floor markings, reminding individuals of the arrangements • staggering breaks or start/end times to minimise numbers in shared areas. • improving ventilation within the space e.g. by opening doors / windows (provided this does not compromise security and fire safety arrangements) If distancing is not practical, the additional points below should be considered: • limit the number of people doing the task at the same time • limit the duration and frequency of the tasks (the shorter the better) where possible • encourage individuals to work back to back or side-by-side instead of face-to-face • use screens to separate individuals where a high number of different face to face interactions will occur (e.g. at service desks) • provide local cleaning measures such as hand sanitiser, washing facilities and local cleaning regimes. • When case rates are high, strongly encourage the use of face coverings inside our buildings and vehicles, where they are likely to encounter other people (People who cannot wear a face covering for health, age or equality reasons should discuss this with their line manager / programme leader, to ensure that other appropriate controls are in place to protect them.)

Things to consider	**Possible mitigations**
Would the task usually involve people sharing equipment, vehicles or workstations? E.g. photocopiers, hot desks, telephones, communal doors etc.	Consider removing the need for sharing by: • allocating one piece of equipment per person; • maintaining individual workstations; • leaving doors open (taking fire safety and security into consideration) or introducing hands-free access control (if technologically possible) so that people do not need to touch the handles. If you cannot avoid sharing, consider: • restricting access to agreed timeslots, on a rota'd or one by one basis • introducing infection control measures in between each use (e.g. hand sanitisers, wipes and local/user led cleaning regimes, including the use of appropriate PPE, if identified in the COSHH assessment for the cleaning product) • Using a stylus or ID card instead of fingers on touch screens / when retrieving printing from MFDs

Check 3 – Hygiene Measures:

Enhanced cleaning and hygiene arrangements can help to reduce the spread of the virus on contaminated surfaces within the workplace.

Individuals should check the general cleaning arrangements being provided via Estates and Facilities, to determine whether this is sufficient for your envisaged use of the spaces.

Things to consider	**Possible mitigations**
Can you reduce the need for additional cleaning, or make cleaning easier, by reducing contact with surfaces and equipment?	Encourage everyone to keep surfaces clear of objects, to make them easier to clean and reduce the number of items that could potentially become contaminated. You will need to decide if general cleaning arrangements are enough to minimise contamination throughout the time you are working. Different levels of cleaning may be required for different areas/activities. In some cases, general cleaning may need to be supplemented by local cleaning, especially if you are not able to avoid sharing of equipment or workspaces. Where local cleaning is identified, consider: • providing local supplies of hand sanitiser and / or cleaning wipes / sprays • regular wiping of high contact surfaces throughout the day • Encourage use of personal cutlery and crockery etc in local kitchens/tea points and / or ensure shared items are thoroughly clean between use • provide local users with enough information and instruction to safely and effectively clean. • if PPE is required, make sure this is available and that people are trained in how to use and dispose of it properly.
Do you have areas or equipment that may need more regular cleaning? E.g. communal areas or items, that will be touched by more people and/or more regularly.	
Will people have access to sufficient welfare facilities nearby? E.g. washing facilities and/or hand sanitiser	

Check 4 - Awareness and Communication

- Individuals will need to know how they are expected to work and behave safely. In line with existing H&S guidance, risk assessments should be developed and discussed with the staff who will be affected by the risk assessment. It is recommended that managers:
    - Involve their staff when developing plans for working on campus;
    - Develop a draft risk assessment, in discussion with their local health and safety manager. Advice can also be sought from the Health and Safety Unit;
    - Seek feedback on the draft risk assessment from the staff who will be covered by the risk assessment and local health and safety representatives;
    - Finalise the risk assessment in light of feedback.
    - Share the final approved risk assessments with their staff.
- Individuals should also be reminded how to raise concerns, report incidents and/or get additional support (e.g. using the Accident/Incident Reporting Procedure, SafeZone, via local reporting channels, Safety Unit and / or HR).