## Return to work and induction checklist

***This checklist gives the areas which should be covered in a return to work discussion with staff before they return to work at lab or office spaces***

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| Name of staff member: | Job title: |
| Building/site: | Date returned on site: |

This section should form the basis of a discussion about return to work before staff go back in:

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| Return to work meeting summary                              (confidential)  |
| **Date of meeting**  | **Staff member**    | **PI/Supervisor/Line Manager**  |
|   | ***Yes/No/not applicable***  | ***Comments (optional)***  |
| 1. Timing of return to work was discussed  |   |   |
| 2. My concerns relating to my health and wellbeing were discussed  |   |   |
| 3. Matters relating to my caring responsibilities were discussed  |   |   |
| 4. My travel to work planning was discussed  |   |   |
| 5. I am content with the shift allocation (this may not be applicable and will agreed once risk assessments for individual labs have been signed off by Head of Dept.) |   |   |
| 6. Should my circumstances change, I will discuss with my PI/Supervisor/Line Manager  |   |   |
| **Signature**  | **Staff member or PhD student**   | **PI/Supervisor/Line Manager**    |
| *Please send completed form to the HR Team: recruitment@nds.ox.ac.uk*   |

**Please note that although it is now possible to get permission to access office space, access to office space/office working is not equivalent to remote working from a public health perspective.  It is higher risk and so some justification still needs to be provided.**

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| **Please explain what work you intend to do if you go back into the department?** |
|   |
| **Why would it be beneficial for you to work in the department?** |
|   |
| **Where will you be working?**  |
|   |
| **How long are you expecting to be in the department? (e.g. 1 day a week)** |
|   |

Once it has been agreed that the staff member can return to work and the necessary documents have been signed off (eg. Risk assessment), please discuss the following areas:

|  |  |  |
| --- | --- | --- |
| **Issues to cover** | **Notes** | **Covered? Y/N** |
| **Health and Safety** |
| Risk assessment for the staff member’s work area |  |  |
| Procedure for signing in (if applicable) |  |  |
| Social distancing: office and laboratory arrangements |  |  |
| Moving around the building: entry, exist, one-way systems, lifts (single person occupancy), stairs |  |  |
| Cleaning: any instructions for cleaning surfaces and equipment, provision of cleaning materials |  |  |
| Hygiene: regular hand washing/ sanitising, location of hand sanitiser, coughs and sneezes to be caught in tissue or elbow |  |  |
| Use of shared spaces: kitchen, toilets, meeting rooms, breakout areas |  |  |
| Use of communal equipment: printers, photocopiers etc. |  |  |
| Lone working safety requirements if applicable |  |  |
| Fire evacuation procedures |  |  |
| First aid: how to contact a first aider, where first aid kits and defibrillators are kept |  |  |
| Safe travel, especially if using public transport  |  |  |
| **Work patterns and tasks** |
| Reminder of agreed work patterns (if any changes to normal pattern) |  |  |
| Reminder of agreed work tasks |  |  |
| Any changes/updates about ways of working in the department/work area |  |  |
| **What to do if the staff member or a member of their household has COVID-19 symptoms**  |
| Reminder **not** to be on site (go home/stay home, inform manager) |  |  |
| Apply for a test and remain at home until the results arrive |  |  |
| If test negative, only return on site if symptom-free |  |  |
| If test positive, only return on site after 7 day isolation period if fully recovered. |  |  |
| If household member has symptoms, stay at home for full 14-day self-isolation period. |  |  |
| **Support on site** |
| What support is available on site |  |  |
| Reminder of the need to use the booking system.  |  |  |
| **Contact numbers**Manager:Departmental HR - Lisa Bjork 01865 612268 & Gemma Horbatowski 01865 612269Departmental Administrator - Jo Snoeck 01865 617122Departmental Safety Officer - Adam Lambert 01865 612282Laboratory and Facilities Manager – Jessica Doondeea 01865 612267University Security non-emergency - 01865 272944University Security emergency - 01865 289999 Occupational Health - 01865 282676 |  |
| **Raising concerns** |
| Opportunity to raise concerns now |  |  |
| How to raise concerns later on:Manager, departmental HR, HAF, Departmental Safety Officer, Director of Graduate Studies etc. as appropriate |  |  |
| **Face coverings**  |
| In line with government guidance issued, all University staff, students and contractors working on OUH NHS FT sites are required to wear a face mask\* at all times in hospital space (e.g. common areas, corridors, shops, wards etc.) and in University space. As our University departments open in line with the University’s Return to Onsite Working (RTOSW) programme, departments will provide face masks for staff and students in agreed locations within University spaces. In the meantime, University staff and students should obtain masks from the mask containers at the hospital’s main entrances and reception areas. Staff and students should not enter the hospital without a mask. In University settings, staff and students will be required to wear a face covering\*. *\*A face mask is different to a face covering – a face mask is a surgical mask, whereas a face covering is usually made out of fabric and is not designed for use in healthcare settings.* |
| Does the staff member need a face cover while using public transport to come into work?Will the staff member work in University-owned premises and therefore need a face covering? | **Notes** | **Covered Y/N?** |