

RISK ASSESSMENT FORM

RISK	Assessing risk for the safe return to work for NDS office based staff during COVID-19. <i>(N.B. This is based on the guidelines provided in the HM Government document: Working safely during COVID-19 in Offices and contact centres (published 12th August 2020).</i>		
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DATE OF ASSESSMENT	09-09-2020	REVIEW DATE:	TBD

Introduction / Background:

The objective of this document is to assess those risks specifically concerned with NDS staff returning to work during the COVID-19 pandemic, with the aim being to reduce the risks to their lowest level as far is reasonably practicable by taking preventative measures in order of priority. The document has been written based on the guidance outlined in the HM Government document: Working safely during COVID-19 in offices and contact centres (12th August 2020).

The approach to both risk assessment and management are as per the Health and Safety Executive guidance signposted by the HM Government document. Risks are scored on a 'likelihood and consequence' basis both before control measures have been considered (initial risk score) and a target risk score after the implementation of those measures (adjusted risk score). Details of this are shown in Appendix A.

It should be noted that the failure to complete suitable risk assessments which address COVID-19, or to fail to put control measures in place to address those risks, could constitute a breach of health and safety law. This could result in the closure of venues under the current, *Health Protection (Coronavirus, Restrictions, England, No. 3) regulations 2020*

Scope and process

This initial, generic risk assessment will be carried out by the NDS Departmental Safety Officer (DSO). This will be circulated as a guidance document to members of the NDS who wish to reintroduce their office based staff. This, in conjunction with an '*NDS: COVID_Office_Risk Assessment*' template should then be used by office managers / line managers/ PI's as a basis for completing their own specific risk assessments which should address the hazards and required control measures which are characteristic to their individual office settings (based on factors such as location, access, size, layout etc).

Risk Assessment

Hazard	Affected groups	Control measures	Initial risk score* (see App. A)	Further actions required	Date required	Risk owner(s)	Done?	Adjusted risk score * (see App. A)
Risk category [1]	Who should go to work? Objectives: Protect people at higher risk, to ensure those required to self isolate do so, to protect the mental health and wellbeing of those individuals working from home (WFH).							
Staff at a high risk of infection and/or adverse outcome.	Office based staff who fall into the clinically vulnerable or extremely vulnerable categories. (see the Public Health England (PHE) report): Disparities in the risk and outcomes of COVID-19 <i>N.B. There is also extensive guidance available at request for staff members who have concerns about RTOSW. See the MSD Bronze BCP document: Guidance on supporting staff with concerns about onsite working</i>	<p>If office based duties can be carried out effectively from home (whether it is on a part or full time basis) and the staff member and their line manager are happy with the arrangement, then such arrangements should still be encouraged.</p> <p>If home working is not an option, these individuals should be offered the safest available onsite roles (COVID-secure environments).</p> <p>Meaningful consultation between the line manager / member of staff. This will be facilitated by a return to onsite working induction meeting.</p> <p><i>Self-assessment of vulnerability can be accessed via the Occupation Health (OH) website: https://occupationalhealth.admin.ox.ac.uk Where necessary advice can be sought directly from OH.</i></p> <p>Ensure individuals who are advised to stay at home under existing government guidance, do not physically come to work. This includes individuals who have symptoms of COVID-19, those who live in a household or are in a support bubble with someone who has symptoms and those who are advised to self-isolate as part of the government's test and trace service.</p>	Unlikely, Catastrophic (10)	Put systems in place so that people know how and when to notify you if they fall into one of these categories.				Rare, Catastrophic (5)
Staff required to self-isolate								

Hazard	Affected groups	Control measures	Initial risk score	Further actions required	Date required	Risk owner(s)	Done?	Adjusted risk score
<p>Mental health: Monitoring the wellbeing of people who are working from home (especially those affected through isolation or anxiety).</p> <p>Helping home workers to stay connected to the rest of the workforce, especially if the majority of their colleagues are on-site.</p>	<p>Staff who have been working from home but are keen to return to onsite working.</p> <p>Those who are unable to physically attend work at this period, especially those whose wellbeing and mental health is at additional risk due to health, personal, family/social or economic circumstances</p>	<p>Where this is possible and beneficial, a RTOSW should be encouraged and facilitated if possible for these staff, be it a full time or part time arrangement.</p> <p>Extensive measures have been put in place as part of the departments Athena Swan initiative, including:</p> <ul style="list-style-type: none"> -NDS Health and Wellbeing webpages -Slack, a social and community page -The introduction of a mental health 'First Aid' team and support network -A department wide mental health and wellbeing survey -The Workload Support scheme 	Possible, Major (12)	OH referral if personal stress and anxiety issues are identified				Unlikely, Moderate (6)
Risk category [2]	Travelling to /from work, arriving and leaving work. Objectives: Avoid public transport where possible, maintain government guidelines on social distancing, face coverings and hygiene.							
Over-crowding on public transport may compromise the ability to maintain social distancing leading to increased risk of transmission of Covid-19	Staff, general public	<p>Avoid using public transport if possible.</p> <p>Individuals sharing vehicles should preferably be from the same household or 'support bubble'</p> <p>Workers travelling to work together should be grouped into cohorts or shifts</p> <p>Staff who need to use public transport to comply with government guidelines on face coverings, social distancing and hand hygiene.</p>	Unlikely, Catastrophic (10)	Determine travel arrangements as part of the RTOSW Induction process.				Rare, Catastrophic (5)

Hazard	Affected groups	Control measures	Initial risk score	Further actions required	Date required	Risk owner(s)	Done?	Adjusted risk score
Increase in the number of office based staff RTOSW will lead to overcrowding at entry / egress points to buildings, leading to potential increased transmission	All staff	<p>The University is promoting the use Of personal transport through such schemes as the: Bike to Work scheme, Additional (temporary) Covid-19 parking permits</p> <p>Stagger arrival and departure times</p> <p>Reduce congestion by having more than one entry point to the office</p> <p>Use markings and one-way flow at entry and exit points where possible</p> <p>Providing handwashing / sanitisation facilities at entry / egress areas</p> <p>Regular decontamination of touch points such as keypads, door handles</p>	Unlikely, Catastrophic (10)					Rare, Catastrophic (5)
Risk category [3]	Safe (social) distancing at work. Objectives: Ensuring workers maintain social distancing guidelines (2m, or 1m with risk mitigation)							
Increased risk of transmission by staff not adhering to social distancing guidelines in the office	All staff, visitors, patients, contractors	<p>Maintain social distance of 2m wherever possible (or 1m with mitigation measures [see below])</p> <p>Where the social distancing guidelines cannot be followed in full in relation to a particular activity, consider whether that activity can be redesigned to maintain a 2m distance or 1m with risk mitigations where 2m is not viable.</p>	Possible, Catastrophic (15)	<p>Provide information, instruction and training so staff are aware of processes and their responsibilities</p> <p>Provide signage and ways to communicate with non-employees (visitors, contractors)</p>				Rare, Catastrophic (5)

Hazard	Affected groups	Control measures	Initial risk score	Further actions required	Date required	Risk owner(s)	Done?	Adjusted risk score
Increased risk of transmission due to social distancing not being maintained as staff move between areas	All staff	<p><i>Mitigating actions include:</i></p> <ul style="list-style-type: none"> ▪ University policy is now to wear a face covering (non-clinical settings) at all times, the exemptions being: <ul style="list-style-type: none"> - Single occupancy offices - In shared offices where 2m distancing can be maintained - When eating/drinking - Where protective screens are in place - Those who need to lip read ▪ Further increasing the frequency of hand washing and surface cleaning. ▪ Keeping the activity time involved as short as possible. ▪ Using screens or barriers to separate people from each other. ▪ Using back-to-back or side-to-side working (rather than face-to-face) whenever possible. ▪ Staggered work periods for staff (facilitated by a calendar/rota). Using fixed teams or adjusting booking processes to reduce the number of people in the office at the same time to avoid overcrowding <p>Reduce movement (i.e. non-essential trips) around the building where possible</p> <p>Use directional signs / marker tape or arrows to direct people</p>	Possible, Catastrophic (15)					Rare, Catastrophic (5)

Hazard	Affected groups	Control measures	Initial risk score	Further actions required	Date required	Risk owner(s)	Done?	Adjusted risk score
		<p>Implement one-way flow where possible</p> <p>Reduce maximum occupancy in lifts</p>						
Increased risk of transmission during face to face work meetings	All staff	<p>Discourage face to face meetings, use remote working tools</p> <p>Avoid sharing objects such as pens, documents, pointers, etc</p> <p>Where face to face meetings are essential maintain 2m rule (or 1m with risk mitigation)</p>	Unlikely, Catastrophic (10)	<p>Ensure staff have the required remote working tools</p> <p>Provision of hand sanitisers in meeting rooms.</p> <p>For areas where regular meetings take place, using floor signage to help people maintain social-distancing.</p>				Rare, Catastrophic (5)
Increased chance of transmission due to staff sharing common interaction areas	All staff	<p>Staggering break times to reduce pressure on break rooms or places to eat.</p> <p>Using safe outside areas for breaks.</p> <p>Encouraging workers to bring their own food to avoid the use of canteens and food retail outlets.</p> <p>Reconfiguring seating and tables to maintain spacing and reduce face-to-face interactions.</p> <p>Encouraging staff to remain on-site and, when not possible, maintaining social distancing while off-site.</p> <p>Regulating use of locker areas, changing rooms to reduce concurrent use</p>	Possible, Catastrophic (15)					Rare, Catastrophic (5)

Hazard	Affected groups	Control measures	Initial risk score	Further actions required	Date required	Risk owner(s)	Done?	Adjusted risk score
Risk category [4]								
Office space, workplaces and workstations. Objectives: Maintain social distancing between individuals when they are at their desks/workstations. Avoid sharing of workstations where possible								
Increased risk of transmission due to poor configuration of offices leading to inability to maintain 2m (1m with risk mitigation) distance	All office based staff	<p>Review layouts and processes to allow people to work further apart from each other.</p> <p>Using floor tape to mark areas to help people comply with social distancing guidelines (2m, or 1m with risk mitigation)</p> <p>Only where it is not possible to move workstations further apart, arranging people to work side by side or facing away from each other rather than face-to-face.</p> <p>Only where it is not possible to move workstations further apart, using screens to separate people from each other.</p> <p>Managing occupancy levels to enable social distancing.</p> <p>Avoiding use of hot desks. If desks must be shared then this should be in cohorts of staff and they should be cleaned/disinfected between different users (see Cleaning regimes below)</p>	Unlikely, Catastrophic (10)					Rare, Catastrophic (5)
Risk category [5]								
Accidents, security and other incidents. Objectives: Prioritise safety during incidents								
Increased risk of transmission due to accidents, security and other incidents. N.B. In an emergency, for example, a chemical	All staff, visitors, contractors	<p>Review incident and emergency procedures to ensure they reflect the social distancing principles as far as possible</p> <p>Consider security implications</p>	Unlikely, Catastrophic (10)	CPR not to be advised unless specialist safety equipment is available. Call 2222				Rare, Catastrophic (5)

Hazard	Affected groups	Control measures	Initial risk score	Further actions required	Date required	Risk owner(s)	Done?	Adjusted risk score
spill or fire people do not have to stay 2m apart if it would be unsafe.		(such as leaving doors open to avoid touch points, contamination of door handles, keypads etc) Consider the impact that reduced staffing levels (imposed by shift patterns/rotas) will have on the provision of First Aid or other safety staff such as fire wardens, RPS etc	Unlikely, Catastrophic (10)	Accidents, incidents and near misses should continue to be reported using the IRIS system.				Rare, Catastrophic (5)
Risk category [6]	Cleaning the workplace. N.B. A Buildings Risk Assessment for all sites, or parts of sites, that have been closed, before restarting work should be completed before this risk assessment is submitted/reviewed Objectives: To keep the workplace clean and prevent transmission by touching contaminated surfaces. To help staff to maintain good hygiene							
Reintroduction of staff will lead to increased transmission by touching contaminated surfaces and spreading to other surfaces	Office staff Visitors Cleaning staff Service engineers and contractors	Frequent cleaning of work areas and equipment between uses, using normal cleaning products. Frequent cleaning of objects and surfaces that are touched regularly including door handles and keyboards. Clearing workspaces and removing waste and belongings from the work area at the end of a shift. Limiting or restricting use of high-touch items and equipment, for example, printers or whiteboards. If cleaning after a known or suspected case of COVID-19 then you should refer to the specific guidance . Providing extra non recycling bins for workers and visitors to dispose of single use face coverings and PPE.	Unlikely, Catastrophic (10)	Where offices are in OUH Trust space: Contact OUH Trust to determine if cleaning staff have been instructed to be more vigilant with the cleaning of potentially contaminant surfaces with effective products Contact OUH Trust to determine what additional procedures are in place for cleaning and decontamination after known/or suspected cases of COVID-19				Rare, Catastrophic (5)

Hazard	Affected groups	Control measures in place	Initial risk score	Further actions required	Date required	Risk owner(s)	Done?	Adjusted risk score
<p>Lack of the provision of hand washing, sanitiser will lead to poor hygiene standards increasing the risk of transmission by touching contaminated surfaces</p> <p>Lack of staff awareness leading to poor hygiene and increased risk of transmission</p> <p>Increased risk of contamination in changing rooms, showers</p>	<p>Office staff</p> <p>Visitors</p> <p>Cleaning staff</p> <p>Service engineers and contractors</p> <p>All staff</p>	<p>Providing hand sanitiser in multiple locations in addition to washrooms.</p> <p>Setting clear use and cleaning guidance for toilets to ensure they are kept clean and social distancing is achieved as much as possible.</p> <p>Enhancing cleaning for busy areas. Providing more waste facilities and more frequent rubbish collection.</p> <p>Providing hand drying facilities – either paper towels or electrical dryers.</p> <p>Using signs and posters to build awareness of good handwashing technique, the need to increase handwashing frequency, avoid touching your face and to cough or sneeze into a tissue which is binned safely, or into your arm if a tissue is not available.</p> <p>Providing regular reminders and signage to maintain personal hygiene standards.</p> <p>Discourage use of such facilities where possible. Where changing rooms and showers are required, maintain social distancing and set clear use and cleaning guidance.</p> <p>Introduce enhanced cleaning of such facilities</p>	<p>Unlikely, Catastrophic (10)</p>					<p>Rare, Catastrophic (5)</p>

Hazard	Affected groups	Control measures in place	Initial risk score	Further actions required	Date required	Risk owner(s)	Done?	Adjusted risk score
Risk category [7]								
Handling deliveries. Objective: To reduce the risk of transmission through contact with items that come into the workplace								
Increased risk of transmission through contact with objects that come into the workplace such as deliveries of equipment, consumables and mail	All staff receiving or handling external goods, deliveries or equipment	<p>Introduction of cleaning procedures for material and equipment entering the site</p> <p>Provision of disposable latex/nitrile gloves for staff receiving goods or mail</p> <p>Encouraging increased handwashing and introducing more handwashing facilities for workers handling deliveries or providing hand sanitiser where this is not practical.</p> <p>Restricting non-business deliveries, for example, personal deliveries to staff</p>	Unlikely, Catastrophic (10)					Rare, Catastrophic (5)
Risk of surface transmission when goods enter and leave the site.	All staff handling goods in, goods out		Unlikely, Catastrophic (10)	<p>Revising pick-up and drop-off collection points, procedures, signage and markings.</p> <p>Considering methods to reduce frequency of deliveries, for example by ordering larger quantities less often.</p>				Rare, Catastrophic (5)
Risk category [8]								
Lone working. Objective: Protect the health, wellbeing and security of staff required to work in isolation or out of hours								
Shift rotas or reduced staffing levels may lead to an increase in the requirement for staff to work out of hours (lone working) or in isolation leading to an increased risk of accidents/injury.	Office staff required to carry out work individually or out of hours	Refer to the Nuffield Department of Surgical Sciences (NDS) Lone working policy / standard and guidelines for risk assessment	Possible, Major (12)					Rare, Moderate (3)

APPENDIX A

Risk scoring:

Once Likelihood and Consequence has been determined these should be plotted on the matrix below to grade the risk						
Likelihood		1 Rare	2 Unlikely	3 Possible	4 Likely	5 Almost certain
Consequence	5 Catastrophic	5	10	15	20	25
	4 Major	4	8	12	16	20
	3 Moderate	3	6	9	12	15
	2 Minor	2	4	6	8	10
	1 Negligible	1	2	3	4	5

In grading risk, the scores obtained from the risk matrix are assigned grades as follows:	
1 – 3	Low risk
4 – 6	Moderate risk
8 – 12	High risk
15 – 25	Extreme risk

Likelihood score – potential likelihood that a similar incident could occur in the future					
	1	2	3	4	5
Descriptor	Rare	Unlikely	Possible	Likely	Almost certain
Frequency (general) How often might it/does it happen	This will probably never happen/recur	Do not expect it to happen/recur but it is possible it may do so	Might happen or recur occasionally	Will probably happen/recur but it is not a persisting issue	Will undoubtedly happen/recur, possibly frequently
Frequency (timeframe)	Not expected to occur for years	Expected to occur at least annually	Expected to occur at least monthly	Expected	Expected to occur at least daily
Probability Will it happen or not	<0.1 per cent	0.1-1 per cent	1-10 per cent	10-50 per cent	>50 per cent

Consequence score (severity levels) and examples of descriptors (not an exhaustive list)					
	1	2	3	4	5
Domains	Negligible	Minor	Moderate	Major	Catastrophic
Impact on the safety of participants/patients, staff or public (physical/psychological)	Minimal injury requiring no/minimal intervention or treatment	Minor injury or illness, requiring minor intervention	Moderate injury requiring professional intervention	Major injury leading to long-term incapacity/disability	Incident leading to death
	No time off work	Requiring time off work for >3 days	Requiring time off work for 4-14 days	Requiring time off work for >14 days	Multiple permanent injuries or irreversible health effects
			An event which impacts on a small number of participants/patients with minimal impact to their care pathway. RIDDOR/agency reportable incident	Loss of material which impacts on a patient's care pathway with long-term effects	An event which impacts on a large number of patients' care
Impact on research	Loss of single, replaceable sample	Loss of small number of replaceable samples	Loss of irreplaceable / precious samples impacting current research	Loss of large number of samples impacting the University's current and future research programme	Loss of large number of irreplaceable samples, major impact on resources available to worldwide research programmes
	Minor delay to research study (3 days or less)	Significant delay to research study (4-14 days)	Substantial delay to research study (weeks)	Severe delay to research study (months), samples in quarantine	Study cancelled – complete stop to research project
	No breach of protocol	Breach of protocol investigated by CTRG	Breach of terms of ethical approval / protocol reported to REC	Severe breach of terms of ethical approval / protocol or severe adverse event reported to REC	Suspension of study sponsorship
Impact on premises / facilities / equipment	Minor equipment malfunction, loss of consumables	Equipment malfunction requiring maintenance	Equipment malfunction requiring replacement	Severe equipment malfunction, equipment cannot be replaced	Multiple severe equipment malfunctions causing complete interruption to activity
	Minor damage to facilities / premises	Damage to facilities / premises, insurance claim, intervention of facilities team	Damage to facilities / premises, single room temporarily unusable / inaccessible	Severe damage to facilities / premises, several rooms temporarily unusable / inaccessible	Permanent damage / destruction to facilities / premises, complete / permanent loss of access
Quality / complaints / audit	Peripheral element of treatment or service suboptimal	Overall service suboptimal	Treatment or service has significantly reduced effectiveness	Non-compliance with national standards with significant risk to the HTA Licence 12217 if unresolved	Totally unacceptable level or quality of treatment/service
	Informal complaint/inquiry	Formal complaint (stage 1)	Formal complaint (stage 2)	Multiple complaints/independent review	Inquest/ombudsman inquiry
		Local resolution	Local resolution (with potential to go to independent review)		
		Single failure to meet internal standards/processes	Repeated failure to meet internal standards/processes	Critical report	Gross failure to meet national HTA Licence 12217 standards
Reduced performance rating if unresolved		Low performance rating			
Statutory duty / inspections	No or minimal impact or breach of guidance/statutory duty	Reduced performance rating if unresolved	Single breach in statutory duty	Multiple breaches in statutory duty	Multiple breaches in statutory duty
		Non-compliance with HTA standard	Challenging external recommendations/improvement notice	Low performance rating	Zero performance rating
				Enforcement action	Prosecution
			Improvement notices	Complete systems change required	
			Non-compliance with multiple HTA standards, minor shortfalls identified in HTA inspection report	Major shortfalls identified in HTA inspection report	Critical shortfalls identified in HTA inspection report, loss or suspension of HTA Licence, Prosecution of DI
Adverse publicity / reputation	Rumours	Local media coverage with <3 days reduction in public confidence	Local media coverage with >3 days reduction in public confidence	National media coverage with <3 days reduction in public expectation	National media coverage with >3 days reduction in public expectation.
	Potential for public concern	Elements of public expectation not being met			Total loss of public confidence MP concerned (questions in the House)
Business objectives / projects	Insignificant cost increase/schedule slippage	<5 percent over project budget	5-10 per cent over project budget	Non-compliance with national 10-25 per cent over project budget	Incident leading >25 per cent over project budget
		Schedule slippage	Schedule slippage	Schedule slippage Key objectives not met	Schedule slippage Key objectives not met
Finance including claims/loss of funding	Small loss, risk of claim /loss of funding remote	Loss of 0.1-0.25 per cent of budget/funding	Loss of 0.25-0.5 per cent of budget/funding	Uncertain delivery of key objective/Loss of 0.5-1.0 per cent of budget/funding	Non-delivery of key objective/Loss of >1 per cent of budget/funding
		Claim less than £10,000	Claim(s) between £10,000 and £100,000	Claim(s) between £100,000 and £1 million	Claim(s) >£1 million
Service / business interruption	Loss/interruption of >1 hour but < a day	Loss/interruption of > 8 hours but < a day	Loss/interruption of > 1 day but < a week	Loss/interruption of > 1 week	Permanent loss of service or facility
Environmental impact	Minimal or no impact on the environment	Minor impact on environment	Moderate impact on environment	Major impact on environment	Catastrophic impact on environment

Review and update log.

Date of review or update	Details
10/09/2020	First Draft for approval