

## COVID-19 Risk Assessment Managers' Guide:

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

Public Health England (PHE) advice regarding the health and wellbeing of staff who fall into one of the above-mentioned groups is that managers should risk assess staff who work both in COVID-19 areas and other aspects of the Trust. 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 falls into the above defined groups to make informed management-based decisions on role requirements, taking into account the guiding principles below.

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

- 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.
- Recognise the need to not make any assumptions about the employee, such as their health conditions or ethnicity and encourage staff to identify and report any relevant issues.
- Reassure staff that MFT is taking their health and wellbeing very seriously and that we will work to support them during these challenging times.
- Reinforce that there is no current evidence they (these groups) have a higher risk of contracting Coronavirus. 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.

If adjustments to help staff to remain in work are not feasible, you must discuss the situation with the Nightingale North West HR Team before making a final decision. Remember to tell staff members that are self-isolating to report their absence via Absence Manager. 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

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** remains most important, rather than a focus on the specific medical condition, gender or ethnicity.

Discuss with the staff member their role requirements and determine if they can continue working at the Nightingale 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.

### Vulnerable Household Members

If a member of staff has a change of circumstances and finds that they are living with a high risk or vulnerable household member, 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.

### Post Risk Assessment

- Record your conversations on the risk assessment form and email to [workforce.nwnightingale@nhs.net](mailto:workforce.nwnightingale@nhs.net)
- **Review the situation regularly** to see if any further considerations of change are possible or required due to changes in guidance. The HR team will email the manager a reminder to review the risk assessment.

For further advice regarding risk assessments contact the Employee Health and Wellbeing Team via [ehw@mft.nhs.uk](mailto: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

|  |  |
|--|--|
| <b>Name of Staff Member</b>            |  |
| <b>Job Title</b>                       |  |
| <b>Department/Ward</b>                 |  |
| <b>Source employer e.g. NHSP</b>       |  |
| <b>Name of Manager completing form</b> |  |
| <b>Date of Assessment</b>              |  |

| <b>INDIVIDUAL HEALTH ASSESSMENT</b>   | <b>Yes / No</b> | <b>Notes</b>  |
|---|-----------------|---|
| Does the individual fall into any of the risk groups listed? (Appendix 1)   |                 | Low, Moderate or Significant? If low risk record any issues identified: |
| <p><b>If the answer is 'yes' to the above question, please continue and complete this risk assessment and document any actions below.</b></p> <p><b>If the answer is 'no' to the above question, an individual risk assessment is not required but staff should follow general infection control guidance:</b></p> <ul style="list-style-type: none"> <li>• Observe good hand hygiene, with frequent use of soap and water or alcohol-containing gel.</li> <li>• Observe social distancing guidelines. Consider home working if applicable.</li> <li>• Use appropriate personal protective equipment (PPE) as required in your clinical area.</li> <li>• Observe isolation requirements for known or suspected COVID-19 cases.</li> <li>• Ensure infection control training is up to date.</li> </ul> <p><b><i>We must all follow infection control precautions which reduce the risk of becoming infected and taking the infection home.</i></b></p> <p><b><i>No further action required, please email this form to <a href="mailto:workforce.nwnightingale@nhs.uk">workforce.nwnightingale@nhs.uk</a></i></b></p> |                 |   |
| <p><b>If answer yes above, please complete with the following, as a record of the discussion.</b></p>   |                 |   |
| Are they able to maintain social distancing in their normal duties? Are they required to be face to face with patients for treatment delivery or assessment? What is their requirement to work with colleagues on a face to face basis?   |                 |   |

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| Are they able to avoid Aerosol Generating Procedures (AGPs) – For clinical staff?  |  |
| Are they able to avoid direct exposure to suspected or confirmed COVID19 cases?  |  |
| Are they able to work in an alternative location or in another role (temporary redeployment)?                                      |  |
| Are they able to work alternative hours to avoid risk factors?   |  |
| Are they able to undertake any work via video conferencing or telephone call e.g. attend meetings, telephone/remote consultations? |  |
| Are they able to work remotely e.g. at home? Discuss which work activities could be undertaken.                                    |  |
| Are they able to work in an office on their own or with a reduced number of people?  |  |
| <b>Actions discussed and agreed:</b>   |  |
|  |  |
| Signature of Assessor/Line Manager:  |  |
| Signature of Staff Member:   |  |



### Ongoing Management - Individual Risk Assessment for COVID19

| <b>Date</b> | <b>Have there been any changes in health status or guidance? (Y/N)</b> | <b>If yes – how does this impact upon the assessment</b> | <b>Actions discussed and agreed</b> | <b>Signature of Line Manager/ Assessor</b> | <b>Signature of Staff Member</b> | <b>Planned next review date:</b> |
|-------------|--|--|-------------------------------------|--|----------------------------------|----------------------------------|
|             |  |  |                                     |  |                                  |                                  |
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**APPENDIX 1 - Consideration Groups for Risk Assessment**

|                            | LOW RISK | MODERATE RISK  | SIGNIFICANT RISK  |
|----------------------------|----------|--|---|
| <b>Age</b>                 |          | <p>Men over the age of 60 with underlying health conditions which, if taken in isolation, may be considered low risk</p> <p>All BAME staff over the age 55</p> | <p>Over 70 years of age</p> <p>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</p>   |
| <b>Autoimmune/Immunity</b> |          | <p>Problems with the spleen such as sickle cell disease, splenectomy or asplenic</p> <p>Weakened immune system as a result of HIV/AIDS, SLE/Lupus</p>          | <p>Organ transplant and remaining on ongoing immunosuppression medication</p> <p>Workers having immunotherapy or other continuing antibody treatments for cancer</p> <p>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</p> |

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|                           |  |   | manager referral to seek EHW support in addressing this   |
| <b>BAME</b>               | 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.<br><br>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.  |
| <b>Cancer</b>             |  | Chemotherapy or radiotherapy in the last six months.  | Undergoing active chemotherapy or radiotherapy.<br><br>Cancers of the blood or bone marrow such as Leukaemia who are at any stage of treatment.<br><br>People who have had bone marrow or stem cell transplants in the last 6 months or who are still taking immunosuppression drugs. |
| <b>Cardiac Conditions</b> | Previous heart attack with no ongoing problems; controlled high          | Chronic heart disease such as heart failure, ongoing angina.  |   |

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|                             | blood pressure, etc.  |  |  |
| <b>Diabetes</b>             | Controlled by diet or tablets with no diabetic complications. | Well controlled on insulin and with no diabetic complications.                         | Diabetic complications or poor glucose control.  |
| <b>Disability</b>           |   | Workers with disability or current adjustments to role.                                | Workers with disability or adjustments to role and further 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. |
| <b>Medication/Treatment</b> |   | Workers taking medications such as steroid tablets, chemotherapy or immune modulators. | Workers having treatment which can affect the immune system such as protein kinase inhibitors or PARP inhibitors<br><br>Workers taking any of the following medication:<br>Azathioprine<br>Mycophenolate (both types)<br>Cyclosporin<br>Sirolimus<br>Tacrolimus                |

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| <p><b>Metabolism and Other</b></p> | <p>Minor derangement of liver function.</p>   | <p>Chronic liver disease such as active hepatitis.<br/><br/>Chronic kidney disease.</p>   | <p>Workers with rare diseases and inborn errors such as SCID or homozygous sickle cell disease.<br/><br/>Severe diseases of body systems such as severe kidney disease (dialysis).</p> |
| <p><b>Neurological</b></p>         | <p>Mild multiple sclerosis only with sensory or visual changes<br/><br/>Stable mild cerebral palsy.</p> | <p>Chronic conditions such as Parkinson's Disease, Motor Neurone Disease, Multiple Sclerosis or Cerebral Palsy.<br/><br/>Learning disabilities (from the point of view of being able to follow PPE and other guidance).</p> |  |
| <p><b>Pregnancy</b></p>            |   | <p>Workers less than 28 weeks with no underlying medical conditions can choose to work in a patient facing role if they wish.</p>   | <p>Workers over 28 weeks, or any pregnant worker regardless of length of pregnancy with chronic underlying medical problems such as cardiac problems or respiratory problems.</p>      |
| <p><b>Respiratory Disease</b></p>  | <p>Mild asthma – never hospitalised, not needing oral steroids.</p>                                     | <p>Chronic (long-term) disease such as problematic asthma, COPD, emphysema or bronchitis.</p>   | <p>Severe chest conditions such as cystic fibrosis or severe asthma (requiring hospital admissions or courses of steroid tablets).</p>   |
| <p><b>Weight</b></p>               |   | <p>Having a BMI of 40 or above (seriously obese).</p>   |  |

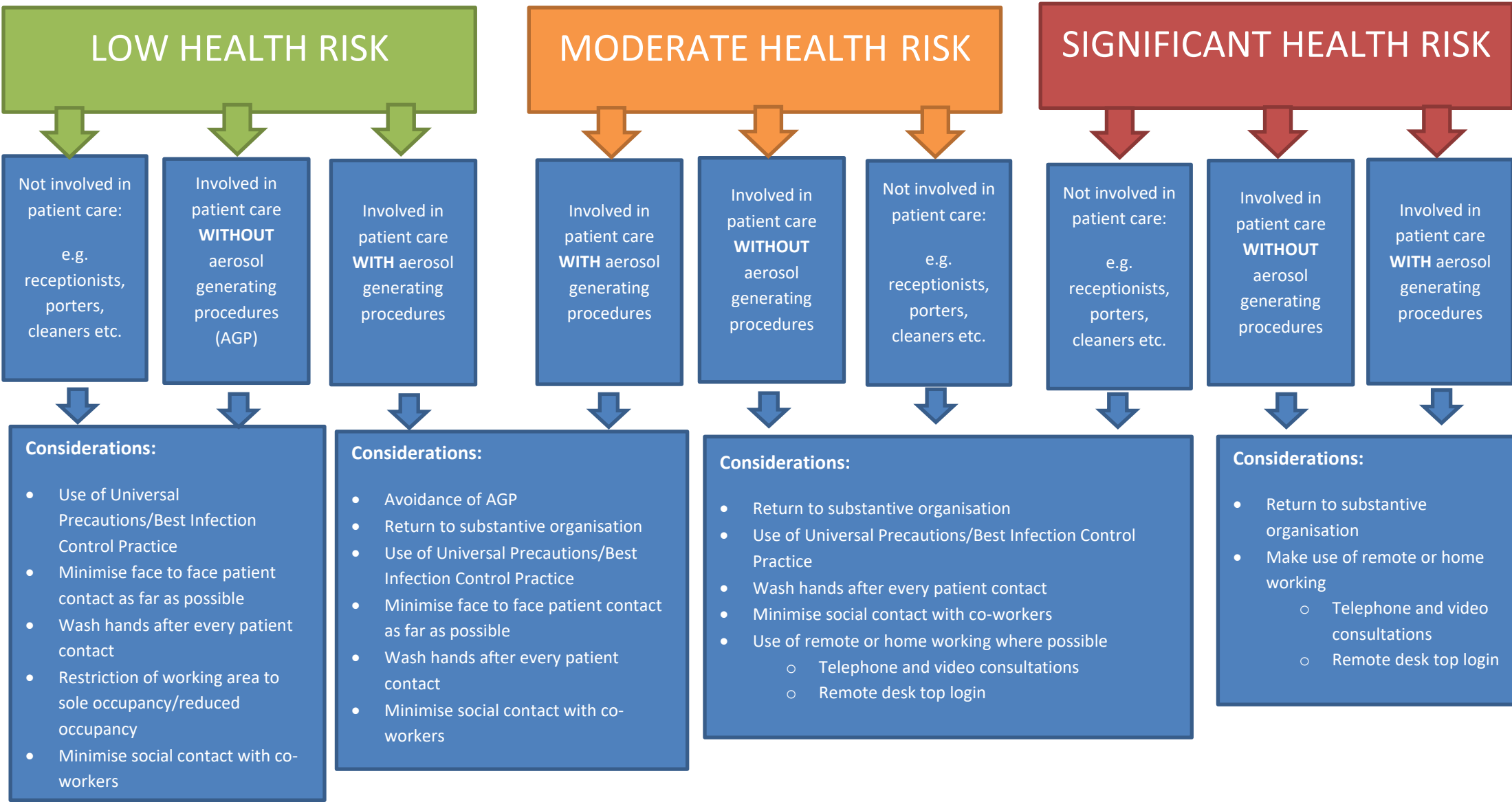
## **Additional Considerations**

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

Should a worker have two or more moderate risk health considerations it is advised management 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 with Underlying Health Concerns



**Frequently Asked Questions Information – 22/5/20**

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| <p><b>Antibody Testing</b></p>                 | <p>We are aware that there are commercial antibody tests available, and some staff members have undertaken tests of their own accord. At present no antibody test available in the UK or elsewhere has been fully validated for clinical use. This means that the results of such tests may be misleading in terms of diagnosing acute or past infection. The correlation between past infection and immunity is also not fully known and as such, the results of an antibody test should not be used to infer protection against future infection.</p>   |
| <p><b>Employee Assistance Programme</b></p>    | <p>At these difficult times, you or a member of your team may find they are experiencing increased anxiety, stress or depression.</p> <p>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="http://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.</p> <p>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</a> intranet site.</p> |
| <p><b>Employee Health and Wellbeing</b></p>    | <p><a href="https://intranet.mft.nhs.uk/content/corporate-services/employee-health-and-wellbeing">https://intranet.mft.nhs.uk/content/corporate-services/employee-health-and-wellbeing</a></p>  |
| <p><b>Infection Prevention and Control</b></p> | <p><a href="https://intranet.mft.nhs.uk/content/hospitals-mcs/clinical-scientific-services/infection-control">https://intranet.mft.nhs.uk/content/hospitals-mcs/clinical-scientific-services/infection-control</a></p>  |
| <p><b>Isolation Notes (Fit Notes)</b></p>      |   |

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|   | <p>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.</p> <p>The link to get an isolation note can be found <a href="#">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</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>.</p> |
| <p><b>MFT COVID-19 Resource Area</b></p>                    | <p><a href="https://intranet.mft.nhs.uk/content/important-information-about-covid-19-coronavirus">https://intranet.mft.nhs.uk/content/important-information-about-covid-19-coronavirus</a></p>   |
| <p><b>PPE – All guidance (scroll to bottom of page)</b></p> | <p><a href="https://intranet.mft.nhs.uk/content/important-information-about-covid-19-coronavirus">https://intranet.mft.nhs.uk/content/important-information-about-covid-19-coronavirus</a></p>   |
| <p><b>Pregnancy</b></p>                                     | <p><a href="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/">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/</a></p> <p>MFT Pregnancy Risk Assessment - <a href="https://intranet.mft.nhs.uk/content/corporate-services/employee-health-and-wellbeing#">https://intranet.mft.nhs.uk/content/corporate-services/employee-health-and-wellbeing#</a></p>  |
| <p><b>Recurring absence due to COVID-19 Symptoms</b></p>    | <p>If you or a member of your team are absent due to COVID-19 symptoms but subsequently test negative there remains a possibility of future infection and therefore the general <b>Reporting your absence from work</b> guidance should be followed.</p> <p>Government advice (updated 21/04/2020) states that if you have had a coronavirus (COVID-19) test and the result was positive, you will probably have developed immunity to coronavirus (COVID-19). Your new symptoms are very unlikely to be due to coronavirus (COVID-19) and therefore you and your household do not need to isolate.</p>  |



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|                          | <p>However, if another person in your household develops symptoms and they have not previously tested positive for coronavirus (COVID-19), then they need to isolate along with all other members of the household except for you (as you have already tested positive).</p> <p><a href="https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection">https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection</a></p>   |
| <b>Reporting Absence</b> | <p><b><u>Reporting your absence from work due to symptoms:</u></b></p> <p>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.</p> <p><b><u>Reporting your absence from work due to a household member's symptoms:</u></b></p> <p>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.</p> <p>If you remain symptom free during the 14 day isolation, your anticipated return to work date will be on day 15.</p> <p>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.</p> |
| <b>Staff Testing</b>     | <p><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></p>  |