

Individual Staff Risk Assessment Checklist for COVID-19 (version 5.3)

If you have previously completed version 4 of this risk assessment it should not be necessary to complete the risk assessment again using this document unless there have been any significant changes in your health, job role or work environment to affect your risk group.

Update

Since the start of the pandemic, a great deal more has been learnt about the risks caused by health conditions and how these are influenced by other factors such as age and ethnicity. There has been focus on trying to identify those individuals who might be at greatest risk of infection or adverse outcomes, including recent concerns about deaths amongst healthcare workers and those from ethnic minority backgrounds. Data is emerging on the efficacy of vaccines, and on immunity due to previous infection, both of which are now quite common among people of working age in the UK.

On 22 February 2021, the Government outlined its four-step roadmap out of lockdown, and easing of restrictions that will apply to everyone <https://www.gov.uk/coronavirus>. In line with Government and Public Health England (PHE) advice:

- Lockdown measures are being eased over the coming weeks and months
- Formal advice for clinically extremely vulnerable individuals to shield was paused on 01 April 2021
- The COVID vaccine programme is now available for all adults
- COVID levels in the community continue to fluctuate; however overall rates remain low but may increase as lockdown is eased or if new variants emerge
- From 19 July 2021, the working from home advice has been lifted and employers can start a plan for the return to the workplace.

COVID-19 vaccination

Anyone who gets COVID-19 can become seriously ill and/or may have long-term effects (long-COVID). The COVID-19 vaccines are the best way to protect yourself and others. Research has shown that the first dose of vaccine should give some protection from 3-4 weeks after receiving it but two doses are required for stronger and longer lasting immunity. The University is encouraging all staff/students to get vaccinated.

Research has shown the vaccines help:

- Reduce your risk of getting seriously ill or dying from COVID-19
- Reduce your risk of catching or spreading COVID-19
- Protect against COVID-19 variants.

<https://www.gov.uk/government/publications/phe-monitoring-of-the-effectiveness-of-covid-19-vaccination>

The level of protection afforded by the vaccine may be reduced in some individuals with certain underlying conditions (such as immunosuppression) but it is important to note that even a reduced level of protection is very important. There is still a chance you might still get or spread COVID-19, even if you have a vaccine, so it is important to have both vaccines and follow all social distancing guidance.

Previously the vaccination status of staff and students has not been part of the risk assessment process and could not be used to mitigate against the use of other control measures. However, for individuals who are immunocompetent and have received two COVID vaccines the advice is that they will drop down into the lower risk group, two weeks after receiving the second vaccination.

Assessing Risk

The University is required to undertake ongoing risk assessment of the workplace, in line with PHE and Government guidelines, to reduce the risk COVID-19 transmission.

Within the University, all departments are required to undertake a Safe Space assessment: <https://www.ourcambridge.admin.cam.ac.uk/resources/safe-space-circles-returning-work> to ensure the risk of exposure within the workplace is reduced to as low as is reasonably practicable.

Managers must check if their staff are in a vulnerable group and complete the Individual Risk Assessment Form for COVID-19.

Vulnerable staff include:

- People defined as higher risk (i.e. clinically extremely vulnerable) by the Government because of health issues +/- other identified risk factor as determined by the [QCOVID risk assessment tool](#). These individuals should have received a shielding letter when shielding was recommended.
- Pregnant staff
- 'At risk' staff who were prioritised for Covid vaccination due to underlying health conditions

Pregnancy

For staff who are pregnant, the pregnancy risk assessment should also take into account the risks associated with Coronavirus (COVID-19).

Please see guidance below for recommendations that apply for women who are:

- Less than 28 weeks pregnant with no underlying health conditions that place them at a greater risk of severe illness from coronavirus
- 28 weeks pregnant and beyond or with underlying health conditions that place them at a greater risk of severe illness from coronavirus

<https://www.gov.uk/government/publications/coronavirus-covid-19-advice-for-pregnant-employees/coronavirus-covid-19-advice-for-pregnant-employees>

For staff who are **not** in a vulnerable group, there is no need for Occupational Health to be involved. A record of the conversation with the manager should be recorded and filed. Following discussion with management and HR, if there are any ongoing health-related concerns regarding a return to the workplace, and further medical advice is required, please complete a referral to occupational health using the COVID-19 referral form.

Risk assessment process

The following risk assessment checklist is designed as a tool to facilitate joint understanding and decision making in relation to assessing the individual risk of occupational exposure to Covid-19 and measures needed to reduce this risk to as low as is reasonably practicable. The risk assessment should be completed in conjunction with the Guidance on easing of COVID-19 restrictions

<https://www.safety.admin.cam.ac.uk/policy-guidance/miscellaneous/hsd213m-guidance-easing-covid-19-restrictions>

For individuals who might be at increased risk, based on the information provided, a more detailed discussion involving the Human Resources (HR) Schools Teams will take place. Following this review, a referral to Occupational Health (OH) for advice will be considered and made if necessary.

Should you require further advice or guidance on completing the document, please initially seek assistance from your line manager and / or HR Schools Team.

This version of the checklist has been written to reflect current evidence and guidance on risk factors. Please ensure you keep up to date with all University communications and revisions of this document, which will be updated to reflect changes in Government and PHE advice.

Assessment documentation

<p>Part 1 Individual Self-Assessment</p>	<p>If not already done so, individual to complete the self-assessment & discuss with line manager. If already completed, to review and confirm individual's risk group with their line manager.</p> <p>This does not need to be repeated if version 4 of the risk assessment has already been completed unless the individual has any significant changes in their health which may affect their risk group</p>
<p>Part 2 Risk Assessment Outcome</p>	<p>Individual and their line manager to review and complete the risk assessment outcome.</p> <p>Refer to local / department Covid risk assessment to ensure the risk of exposure is reduced to as low as reasonable practicable.</p>
<p>Part 3 Return to Workplace Supplementary Risk Assessment (for individuals identified as clinically extremely vulnerable)</p>	<p>Return to Workplace supplementary staff risk assessment to be completed by individuals identified as being clinically extremely vulnerable (high/red risk group). To review this document with line manager & Schools HR to facilitate a discussion to help enable a safe return to the workplace</p> <p>If, following this facilitated discussion, further specific medical advice is required, please complete a referral to OH using the Covid-19 referral form.</p>

Covid-19 Individual Self-assessment checklist

Please review and complete the following document and update your line manager as to the outcome of your risk assessment and individual risk group.

Information for all staff

All staff are reminded to adhere to the following guidance and additional information, which is available at <https://www.cam.ac.uk/coronavirus/stay-safe-cambridge-uni>

- Follow University guidance on easing of COVID-19 restrictions and information on use of face coverings / social distancing / individual testing and COVID-19 vaccination can be found at: <https://www.safety.admin.cam.ac.uk/policy-guidance/miscellaneous/hsd213m-guidance-easing-covid-19-restrictions>
- Wash your hands more often than usual, using soap and hot water for at least 20 seconds, or use a hand sanitiser - when you get home, into work, and during the day, before and after you eat, or handle food, and after using the toilet. Hand sanitiser, soap, and hot water will be provided. Touching of the face should be avoided <https://www.cam.ac.uk/coronavirus/stay-safe-cambridge-uni/regularly-clean-your-hands>
- Ensure that you are aware of the actions to take if you develop any COVID-19 symptoms and correct procedures are followed during resultant absence from work: <https://www.cam.ac.uk/coronavirus/stay-safe-cambridge-uni/report-symptoms-and-get-a-test>
- Ensure you are aware of how to access the testing service for symptomatic staff: <https://www.cam.ac.uk/coronavirus/stay-safe-cambridge-uni/report-symptoms-and-get-a-test>
- COVID-19 related absence (e.g. self- isolation for symptoms, isolation as a household member, isolation having received a notification to self-isolate from NHS Test and Trace, and isolation in relation to shielding [where this is recommended by the government]) is supported by the University.
- Psychological support is available for any individual concerned about their mental health since the COVID-19 pandemic and/or their vulnerability to COVID-19. Staff support can be accessed through the University Staff Counselling Centre <https://staff.counselling.cam.ac.uk/> and student support can be accessed through the University Student Counselling Service <https://www.counselling.cam.ac.uk/>
- Consider whether public transport / rush hour can be avoided through adjustments to work hours or accessing alternative travel arrangements.

Information for staff working in Clinical Areas (in addition to the above)

University staff who work in third party premises should follow the local COVID protocols, e.g. Cambridge University Hospitals have confirmed from the 19 July 2021 mask wearing and social distancing will remain in place.

- Refer to local COVID-19 risk assessment for your host Trust.
- Limit duration of close interaction with patients as much as possible (e.g. prepare everything in advance away from patient). When possible maintain >2m distance from the patient.
- Ensure infection control training is in date, if relevant to your role and work area.
- Ensure you are familiar with COVID-19 infection and control guidance and the appropriate use of personal protective equipment (PPE) if relevant to your work area and role.
- Appropriate use of PPE, which includes correct donning and doffing procedures. Ensure respiratory protective equipment (RPE) i.e., face mask has a good seal when worn.
- No work should be undertaken in any areas where there is a high risk of COVID-19 exposure unless adequate PPE is available.
- Follow local guidelines to escalate any concerns about PPE availability.



Part 1 - Self Assessment: to be completed by individual

Name:		
Job Title:		
Department:		
INDIVIDUAL HEALTH ASSESSMENT	Tick answer	
	Yes	No
Have you been identified as clinically extremely vulnerable and advised that you are on the Shielded Patient List and received a shielding letter?		
<p>If you have not previously received a shielding letter do you have any of the 'very high risk' medical conditions listed below? i.e. Clinically extremely vulnerable (high / red risk category)</p> <p>Reference: https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19#cev</p> <p>Clinically Extremely Vulnerable / Shielded Patient list</p> <ul style="list-style-type: none"> • solid organ transplant recipients • people with specific cancers: <ul style="list-style-type: none"> ○ people with cancer who are undergoing active chemotherapy ○ people with lung cancer who are undergoing radical radiotherapy ○ people with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment ○ people having immunotherapy or other continuing antibody treatments for cancer ○ people having other targeted cancer treatments that can affect the immune system, such as protein kinase inhibitors or PARP inhibitors ○ people who have had bone marrow or stem cell transplants in the last 6 months or who are still taking immunosuppression drugs • people with severe respiratory conditions including all cystic fibrosis, severe asthma and severe chronic obstructive pulmonary disease (COPD) • people with rare diseases that significantly increase the risk of infections (such as severe combined immunodeficiency (SCID), homozygous sickle cell disease) • people on immunosuppression therapies sufficient to significantly increase risk of infection • problems with your spleen, for example splenectomy (having your spleen removed) • adults with Down's syndrome • adults on dialysis or with chronic kidney disease (stage 5) • women who are pregnant with significant heart disease, congenital or acquired • other people who have also been classed as clinically extremely vulnerable, based on clinical judgement and an assessment of their needs. GPs and hospital clinicians have been provided with guidance to support these decisions 		

INDIVIDUAL HEALTH ASSESSMENT	Tick answer	
	Yes	No
<p>Do you have any of medical conditions / other risks listed below? i.e. 'at risk' (moderate / orange risk group)</p> <p>Reference: Joint Committee on Vaccination & Immunisation (JCVI) Table 3 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/998309/Greenbook_chapter_14a_1July2021.pdf</p> <p>Were you prioritised as being in an 'at risk group' for receiving your COVID vaccination?</p>		
<p>Chronic respiratory disease - Individuals with a severe lung condition, including those with asthma that requires continuous or repeated use of systemic steroids or with previous exacerbations requiring hospital admission, and chronic obstructive pulmonary disease (COPD) including chronic bronchitis and emphysema; bronchiectasis, cystic fibrosis, interstitial lung fibrosis, pneumoconiosis and bronchopulmonary dysplasia (BPD).</p> <p>Chronic heart disease and vascular disease - Congenital heart disease, hypertension with cardiac complications, chronic heart failure, individuals requiring regular medication and/or follow-up for ischaemic heart disease. This includes individuals with atrial fibrillation, peripheral vascular disease or a history of venous thromboembolism.</p> <p>Chronic kidney disease - Chronic kidney disease at stage 3, 4 or 5, chronic kidney failure, nephrotic syndrome, kidney transplantation.</p> <p>Chronic liver disease - Cirrhosis, biliary atresia, chronic hepatitis.</p> <p>Chronic neurological disease - Stroke, transient ischaemic attack (TIA). Conditions in which respiratory function may be compromised due to neurological disease (e.g. polio syndrome sufferers). This includes individuals with cerebral palsy, severe or profound learning disabilities, Down's syndrome, multiple sclerosis, epilepsy, dementia, Parkinson's disease, motor neurone disease and related or similar conditions; or hereditary and degenerative disease of the nervous system or muscles; or severe neurological disability.</p> <p>Diabetes mellitus and other endocrine disorders - Any diabetes, including diet-controlled diabetes, current gestational diabetes, and Addison's disease.</p> <p>Immunosuppression - Immunosuppression due to disease or treatment, including patients undergoing chemotherapy leading to immunosuppression, patients undergoing radical radiotherapy, solid organ transplant recipients, bone marrow or stem cell transplant recipients, HIV infection at all stages, multiple myeloma or genetic disorders affecting the immune system (e.g. IRAK-4, NEMO, complement disorder, SCID). Individuals who are receiving immunosuppressive or immunomodulating biological therapy including, but not limited to, anti-TNF, alemtuzumab, ofatumumab, rituximab, patients receiving protein kinase inhibitors or PARP inhibitors, and individuals treated with steroid sparing agents such as cyclophosphamide and mycophenolate mofetil. Individuals treated with or likely to be treated with systemic steroids for more than a month at a dose equivalent to prednisolone at 20mg or more per day for adults. Anyone with a history of haematological malignancy, including leukaemia, lymphoma, and myeloma and those with systemic lupus erythematosus and rheumatoid arthritis, and psoriasis who may require long term immunosuppressive treatments. Most of the more severely immunosuppressed individuals in this group should already be flagged as CEV.</p> <p>Asplenia or dysfunction of the spleen - This also includes conditions that may lead to splenic dysfunction, such as homozygous sickle cell disease, thalassemia major and coeliac syndrome.</p> <p>Morbid obesity - Adults with a Body Mass Index (BMI) ≥ 40 kg/m².</p>		

INDIVIDUAL HEALTH ASSESSMENT			Tick answer	
			Yes	No
Do you fall into the 'green risk group' (neither the 'Clinically Extremely Vulnerable' (high / red) or 'At Risk' (moderate / orange) category above)? i.e. Lower risk group (low / green) category				
ADDITIONAL INFORMATION				
	Yes	No	Prefer not to say	
1. Have you received two COVID-19 vaccinations*? If not, please see link for national booking service https://www.nhs.uk/conditions/coronavirus-covid-19/coronavirus-vaccination/book-coronavirus-vaccination/				
* Vaccination reduces your risk of getting seriously ill or dying from COVID-19 / catching or spreading COVID-19 and protects against COVID-19 variants https://www.nhs.uk/conditions/coronavirus-covid-19/coronavirus-vaccination/coronavirus-vaccine/ Please familiarise yourself with the practical safety measures to protect yourself and others, which can be found at: https://www.cam.ac.uk/coronavirus/stay-safe-cambridge-uni/practical-safety-measures				
	Yes	No		
2. Are you immunosuppressed due to a health condition or treatment that suppresses your immune system which may affect your immune response to vaccination?				
3. Do you have any other physical or mental health conditions, which affects your vulnerability to infection for which you may need additional support?				

Part 2 – to be completed by line manager

Risk assessment outcome and work placement	<p>Clinically Extremely Vulnerable (high / red category)</p> <p>At Risk (moderate / orange category)</p> <p>Lower risk (low / green)</p>
For those in the Clinically Extremely Vulnerable (high/red) risk group please complete Part 3 Return to workplace supplementary risk assessment.	Yes/No
For those in the At Risk (moderate /orange) / Lower (low/green) risk groups please refer to local / department COVID / Safe Space risk assessments for adjustments	Yes/No Following discussion with management and HR, if there are any ongoing health-related concerns regarding a return to the workplace and / or you have answered yes to question 2 and 3 above, if further medical advice is required, please complete a referral to occupational health using the COVID-19 referral form. If there are adjustments that could be agreed locally (so no formal occupational health referral required) please detail in box below:
Agreed adjustments at work:	
Name of Line Manager	
Date of Assessment	
Signature of Line Manager	
Signature of Individual	

A copy of this completed risk assessment form should be retained by the individual and their line manager and / or stored in the individual's departmental HR file – to be agreed at local level.