GENERAL HEALTH AND SAFETY RISK ASSESSMENT FORM

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| Site | **Edgbaston Campus** | **Department** | **External Relations** | | **Version / Ref No.** | **5** |
| **Activity Location** | **Cedar House** | **Activity Description** | **Return to Campus COVID-19: Building Risk Assessment**  **Teams based in Cedar House:** Birmingham Global (25); CSOT team (14); Finance (numbers tbc – max 10 desks)  Maximum workstations from 11 September = 38 | | | |
| **Assessor** | **Hilary Brown** | **Assessment Date** | **17/08/2020** | **Date of Assessment Review** | **16/09/20** | |
| **Academic / Manager Name** | **Alaric Rae** | **Academic / Manager Signature** | **C:\Users\brownhj\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\BW4V5G0T\Alaric Signature.JPG** | | | |

| Hazard Assessment | | | | Control Assessment | | | | | | | | | Actions | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Hazard Category | Hazards Identified | Who might be harmed?  Staff  Students  Contractors  Others | How might people be harmed? | Existing Control Measures | Initial Risk Rating | | | Are these adequate?  Yes/No | Changes to/ Additional Controls | Residual Risk Rating | | | Owner | Due  Date | Action Complete |
| S | L | R | S | L | R |
| Organisational | Psychological well being | Staff | Anxiety and stress caused by concerns around returning to work and studies on Campus | Regular communication is in place (individual and group) via ER all staff communications, ER Remote Forum, ER Line Manager Network, ER Operations Group, team meetings, one to one meetings and return to campus briefings; via CSOT daily scrums, team meetings and email briefings to ensure staff are not ill-informed about returning to work safely.  Advice is shared with staff members and they have been fully briefed and kept up to date with current advice on staying protected through the University’s lines of communications (i.e. line managers, Internal Comms) and shared with staff via ER all staff communications, ER Town Hall sessions, team meetings, one to one meetings; via CSOT daily scrums, team meetings and email briefings and the University’s Coronavirus FAQs [click here](https://intranet.birmingham.ac.uk/staff/coronavirus/faqs-for-staff.aspx).  Risk assessment shared and an electronic copy is available on the External Relations/CSOT Microsoft Teams sites  New workplace/controls put in place to reduce risk of exposure to COVID 19 are documented in procedures and policies and disseminated to employees through Line Managers, ER/CSOT all staff communications and team meetings. These include:   * ***Social distancing: General guidance for staff and students*** * ***Social distancing: Buildings adaptations guidance*** * ***Social distancing***: ***Product solutions booklet*** * ***Social distancing: Building checklist*** * ***On-line induction materials for returning to campus***: combination of the guidance and videos.   <https://intranet.birmingham.ac.uk/staff/coronavirus/essential-resources-and-checklist.aspx>   * ***Return to Campus COVID-19: Building Risk Assessment* (This completed Risk Assessment)**   Line managers are aware of how big changes to working arrangements may cause additional work-related stress and affect their employees’ mental health and wellbeing and individuals have been made aware via ER communications (cascaded via Return to Work Champions, ER Line Manager Network) and team meetings; CSOT team meetings and email briefingsof guidance available in relation to this:  <https://www.hse.gov.uk/stress/>  The External Relations Mental Health First Aider network has also promoted the support available to staff via the ER Blog and ER Lunch and Learn session.  <https://intranet.birmingham.ac.uk/staff/coronavirus/Coronavirus-wellbeing-support.aspx>  <http://www.selfhelpguides.ntw.nhs.uk/birmingham/leaflets/selfhelp/Stress.pdf> | 3 | 3 | 9 | No | We recognise that anxiety levels will be high for a large number of staff, and therefore we have a robust communications schedule in place for External Relations and CSOT.  All line managers are required to discuss the return to campus with their direct reports so that they are aware of and can escalate any concerns/issues. | 3 | 2 | 6 | Tom Stanasiuk/Hilary Brown | 14/09/2020. |  |
| Organisational | Psychological well being | Staff | Anxiety and stress caused by concerns around returning to work on Campus | Managers hold regular informal discussions with their team and look at ways to reduce causes of stress. Line managers have received the Guidance on returning to Work document provided by HR to aid discussions and encouraged to use the Return to Campus Discussion Form if required to record any concerns/adjustments.  Concerns on workload issues or support needs are escalated to line manager - staff are encouraged to raise concerns at their one to one meetings and complete the Return to Campus form as required.  To ensure consistency, line managers will need clarity around continuation of ‘best endeavours’ approach from HR re: flexibility around reduced hours (e.g. due to caring commitments)    Staff who are in clinically vulnerable groups themselves and identified to be considered in ‘at risk’ groups are encouraged by line managers to discuss their support needs to ensure additional measures are put in place to protect them including working from home.  Staff who are in the clinically extremely vulnerable group may be at high risk of serious illness if they catch coronavirus (COVID-19) must discuss their support needs with their line manager to ensure a specific individual risk assessment is carried out and additional measures are put in place to protect them including continuing to work from home.  <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#who-is-clinically-extremely-vulnerable>  Employees invited to return back to work on Campus who have concerns have discussed these with their line manager or supervisor using the University’s Covid-19 Return to Campus Discussion Form and where necessary an occupational health referral has been made using the Occupational Health Referral for Covid-19 Assessment Form. Staff also given opportunity to feed back concerns and queries via staff meetings and all-staff town hall  <https://intranet.birmingham.ac.uk/hr/wellbeing/index.aspx>  <https://intranet.birmingham.ac.uk/hr/documents/public/Wellbeing/Covid-19-Return-to-Campus-Discussion-Form.docx>  Employees are made aware of support mechanisms available to them (e.g. counselling, occupational health, HR, etc.) through line managers, internal communications and University webpages:  <https://intranet.birmingham.ac.uk/staff/coronavirus/faqs-for-staff.aspx>  <https://intranet.birmingham.ac.uk/hr/wellbeing/index.aspx>  <https://intranet.birmingham.ac.uk/hr/wellbeing/workhealth/index.aspx> | 2 | 3 | 6 | Yes | Existing risk assessments including those including those for new or expectant mothers reviewed and revised to reflect new working arrangements as required. Reasonable adjustments made, including those needed for PEEPs especially in relation to who will assist with their evacuation in an emergency, to avoid staff that require them including disabled workers being put at a disadvantage. |  |  |  |  |  |  |
| Biological | Virus transmission in the workplace | Staff | Exposure to respiratory droplets carrying COVID-19 from an infectious individual transmitted via sneezing, coughing or speaking. | ***Social distancing: Cedar House Building checklist***has been completed to identify the control measures to consider reducing the risk of workplace infections.  Staff to work using the mixed model of site and home based as agreed with line manager, in line with Government and University guidance.  Managers/supervisors ensure staff with any form of illness do not attend work until the illness has been verified as not being Covid-19.  Managers/supervisors keep track of when staff can return to work after the symptom free period.  The University’s [***On-line induction materials for returning to campus***](https://intranet.birmingham.ac.uk/staff/coronavirus/essential-resources-and-checklist.aspx) combination of the guidance and videos have been provided and completed for all staff returning to work in University buildings*.*  To help with consistency and adherence to building specific measures such as access routes, occupancy limits etc. staff from other departments accessing the building (such as cleaning and Estates) have received a building specific induction including information and on site induction. Return to campus briefings relevant for each office area will be carried out by teams during September.  Schedules for essential services and contractor visits revised to reduce interaction and overlap between people e.g., Maintenance Officer to inform Buildings Manager on [csot@contacts.bham.ac.uk](mailto:csot@contacts.bham.ac.uk) (cc in Tom Stanasiuk) of any planned contractor visits to Cedar House.  Un-essential trips within buildings and sites discouraged and reduced, e.g meetings protocol to be circulated to staff via ER/CSOT all staff communications and return to campus team briefings. | 3 | 3 | 9 | No | Return to campus briefings relevant for each office area will be carried out by teams during September ahead of the return to office | 3 | 2 | 6 | Directors to brief teams | CSOT by 11/9/20l B Global by 23/9/20 |  |
| Environmental | Virus transmission in the workplace due to lack of social distancing | Staff | Exposure to respiratory droplets carrying COVID-19 from an infectious individual transmitted via sneezing, coughing or speaking. | Workplace routines changed to ensure room/building capacity calculated to maintain social distancing is not exceeded including:   * Change to peak staff entry and exit times. Locally managed team rotas to include start/finish times for all staff * Changes to core working hours*.* Reviewed on a case by case basis and in line with HR guidance/policy * Arrival and departure times at work have been staggered to reduce crowding into and out of the workplace, taking account of the impact on those with protected characteristics. As highlighted above, staggered arrival and departure times will be factored into team office rotas. * Staff have been separated into teams to reduce contact between employees * ER - Fixed team approach to be adopted across all ER teams where possible to ensure reduced contact and balance of roles * CSOT - all 14 members of CSOT will be on site on the same 2 days per week   To help contain clusters and outbreaks and assist the University with any requests for data by the NHS Test and Trace service a temporary record of shift patterns and teams is kept for 21 days.  Procedure in place for dealing with instance of unexpected individual arrival (e.g. Colleagues who are not rostered to be in the office will be refused entry as the designated work stations and office capacity levels will be planned in advance. This policy will be communicated via ER/CSOT all staff communications and via return to campus briefings)  Work has been arranged so that staff are able to maintain the government guidelines for social distancing based on our industry which are included in the ***Social distancing: Cedar House Building checklist***  (The latest Guidance on these measures can be found by clicking the following link [Social Distancing Guidelines](https://www.gov.uk/guidance/social-distancing-in-the-workplace-during-coronavirus-covid-19-sector-guidance#shops-running-a-pick-up-or-delivery-service)).  One-way flow systems implemented and visual aids, such as floor strips, signage are used for maintaining social distancing throughout the building/workplace.  Staff activities are segregated to promote the social distancing rules including:   * Designated workstations identified within each office area (measured and confirmed with Estates) and a clear desk policy will be followed. Display Screen Equipment (DSE) assessments reviewed and revised. * Areas of work marked out with floor tape to ensure adequate social distancing is in place. Visual management aids in place to remind people of the need for social distancing. * Headcount capacity to ensure social distances standards have been achieved have been set and displayed in shared rooms. Maximum capacity established for all meeting rooms, small offices, kitchen and breakout areas. * Capacity limits have been set for common facility areas (e.g. toilets, welfare areas etc.) * Staff encouraged to remain on-site including bringing their own lunch and, when not possible, maintaining social distancing while off-site. * Where available safe outside areas used for break. * Welfare areas for serving hot food or drinks have been assessed in accordance with government guidance and tables/seating from welfare areas moved to create 2m social distancing separation and avoid large groups congregating. Smaller kitchens use a one out one in policy. All users are encouraged to wash their hands prior to using equipment (kettle) and to wash their hands after use. Additional signage for the correct method for handwashing displayed. * Social distancing is marked on the corridor floor prior to entry to the WCs (toilets). Smaller facilities has a one out one in policy. Additional signage has been placed on facilities doors to announce people’s presence and to ensure hands are washed via correct method for handwashing prior to and after use. Building users are reminded to leave the facilities in a respectable condition.   Clear method of socially distancing of staff and visitors in reception areas defined and implemented Signage and floor markings at all entrances and exits clearly showing maximum occupancies for lobby areas and direction of travel arrows to define walkways  Visits from people outside of the building are managed via remote connection/working where this is an option. Where this is not an option visitor arrangements have been revised to ensure social distancing and hygiene at all times. These measures are monitored by the local ER Return to Campus Champions/CSOT Operations Manager (Tom Stanasiuk) and where necessary concerns fed back to the third party manager  All corridors are :   * Marked in areas to ensure social distancing is adhered to (lines on floor). * Corridors that are over 2 m wide have a two way system of use, people using the corridor must stay to their left.   Additional signage in corridors reminding staff about social distancing.  Information provided and signs displayed informing people to use the stairwells rather than lifts unless they have difficulty using the stairs. The maximum occupancy of the lift has been reduced to one personand social distance marked on the floor. Once users have left the lift posters are displayed to encourage them to wash their hands and avoid touching their face.  Lifts are still to be used to move heavier / larger / goods as a planned operation ensuring that staff placed on each floor to prevent access to lift until equipment moved.  Buildings single stairwell is not over 2m so will be single use with clear markings and signage to indicate this. Building users using this stairwell have been informed via return to campus team briefings to announce themselves prior to use and to keep to the left.  Additional signage in stairwells reminding staff about social distancing.  Wash hand / use hand sanitiser on exit from stairwell.  Social gathering amongst employees have been discouraged whilst at work including meetings where alternative arrangements have been provided e.g. virtual meetings.  Large gatherings have been cancelled or postponed or alternative IT solutions provided – for example ER Town Halls and other ER training events are now delivered online; all CSOT related training is delivered online. (Critical Training courses may still be performed but only following the Covid-19 guidance.)  Large gatherings including events in public outdoor spaces that are organised by the University that are unable to be provided by alternative IT solutions are only permitted with reasonable steps to mitigate the risk of transmission and in line with COVID-19 Secure guidance including the completion of a specific risk assessment.  <https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19>  Managers perform frequent evaluation against social distances controls. They will be required to undertake a monthly review of the social distancing controls in their area (use of space and team feedback) and feed this back to their team Director and ER H & S Committee representative/CSOT manager. Staff are reminded via signage and digital screens on a daily basis of the importance of social distancing both in the workplace and outside of it.  Near-miss reporting is encouraged to identify where controls cannot be followed or people are not doing what they should.  There are no examples in normal use of the facility where the 2m social distancing guidelines cannot be followed.  Individuals (including staff, students, visitors and contractors), unless exempt, are required to wear face coverings, inside University buildings where 2m social distancing isn’t possible and cannot be maintained. Information provided in the University and local communications and local inductions and signs displayed informing people of the mandatory requirement to wear a face covering within the building.  Individuals have been reminded through via UoB and ER/CSOT all staff communications of how to use face coverings safely including the following:   * wash your hands thoroughly with soap and water for 20 seconds or use hand sanitiser before putting a face covering on, and before and after removing it * when wearing a face covering, avoid touching your face or face covering, as you could contaminate them with germs from your hands * change your face covering if it becomes damp or if you’ve touched it * continue to wash your hands regularly * change and wash your face covering daily * if the material is washable, wash in line with manufacturer’s instructions. If it’s not washable, dispose of it carefully in your usual waste * practise social distancing wherever possible   PPE is provided for first aiders. The taking of PPE home is not permitted.  Adequate training has been made on what PPE is required – eg all ER first aiders have been briefed on the correct donning/doffing of PPE and face fit testing. Government advice is followed:  PHE quick guides for correct donning and doffing of PPE for [non-AGPs.](https://www.gov.uk/government/publications/covid-19-personal-protective-equipment-use-for-non-aerosol-generating-procedures) as well as for[AGPs](https://www.gov.uk/government/publications/covid-19-personal-protective-equipment-use-for-aerosol-generating-procedures). has been utilised for examples in best practice for putting on and taking off (donning and doffing).  Face coverings are not PPE and are not required to be worn in the workplace where 2m social distancing can be maintained. However where people choose to wear them managers support them. | 3 | 3 | 9 | No | Birmingham Global: A fixed team, blended working approach has been adopted to reduce contact with other staff and to limit time spent in the office.  CSOT: the team is not adopting a fixed team approach however there is confidence that business continuity can be maintained if all staff are required to work remotely (e.g. due to self- isolation)  Staggered start/finish times built in to team rotas.  Designated socially distanced workstations throughout each office area (2m); cleaning responsibilities for staff communicated; deliveries process communicated to all staff ahead of return to office  Social distancing and hand sanitisation guidance to be followed at all times (reinforced by visual signs, designated workstation approach and regular staff communications)  All staff will be asked to bring their own food, cutlery and flasks/bottles; kitchen areas will only be available for making hot drinks (ie no food preparation). No shared supplies of tea, coffee, milk.  Internal doors that **are not** signed as fire doors (unless held open with a mechanical device) kept open whilst working (last person out shuts the doors) to prevent multiple people using door handles. | 3 | 2 | 6 | Birmingham Global Director/CSOT – Tom Stansiuk | 11/9/20 |  |
| Biological | Suspected case of COVID-19 | Staff | Exposure to respiratory droplets carrying and contact with an object that has been contaminated with COVID-19. | Response plan in place in the event of a confirmed or suspected case of COVID-19 and communicated and includes:   * If a person becomes unwell in the workplace with suspected COVID-19, they will be sent home in accordance to the University guidance. Managers will follow the NHS Test and Trace workplace guidance: <https://www.gov.uk/guidance/nhs-test-and-trace-workplace-guidance> * The area will be cleaned in accordance with the specific Government [guidance](https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings) * Provision and monitoring of adequate supplies of cleaning materials are in place. * Team briefed as part of the return to campus briefings ahead of their return to the office on actions to be taken in the event of someone being suspected of having COVID-19. * Staff must tell their line manager if they develop symptoms. Absence will be managed in accordance to the University guidance provided. * Employees to follow the Government advice: <https://www.gov.uk/coronavirus> * Line managers will maintain regular contact with staff members during this time, in accordance with the University sickness absence guidance and monitor for signs of symptoms in the remaining workforce and keep Senior Managers informed of the situation whilst following the Government’s guidance for contact tracing: contact with co-workers: <https://www.gov.uk/guidance/nhs-test-and-trace-workplace-guidance> * If an individual tests positive for COVID-19 this will be managed in accordance with the University’s Outbreak Management Process. * If multiple cases of coronavirus appear in a workplace, an outbreak control team from either the local authority or Public Health England will, if necessary, be assigned to help the University manage the outbreak. The University will seek advice from the local authority in the first instance. * Individuals will be told to isolate because they:   + have coronavirus symptoms and are awaiting a test result   + have tested positive for coronavirus   + are a member of the same household as someone who has symptoms or has tested positive for coronavirus   + have been in close recent contact with someone who has tested positive and received a notification to self-isolate from NHS test and trace.   <https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection> | 3 | 3 | 9 | Yes | ER: A fixed team, blended working approach has been adopted to reduce contact with other staff and to limit time spent in the office.  CSOT: the team is not adopting a fixed team approach however there is confidence that business continuity can be maintained if all staff are required to work remotely (eg due to self- isolation)  All managers and staff briefed on response plans in the event of a suspected case of COVID-19. |  |  |  |  |  |  |
| Biological | Someone entering the workplace with COVID-19 | Estate contractors  Staff | Exposure to respiratory droplets carrying and contact with an object that has been contaminated with COVID-19. | Companies who regularly attend or work in the building requested to provide their health and safety policy/arrangements / or RAMS (risk assessment and method statement) regarding COVID-19.  The Estates Maintenance Officer to advise the Cedar Building Manager on [csot@contacts.bham.ac.uk](mailto:csot@contacts.bham.ac.uk) (cc in Tom Stanasiuk) when contractors are due in the building and all contractors are asked to report to the Building Manager on arrival in the building.  Anybody visiting site will be informed that they are not to enter if they’re experiencing COVID-19 symptoms or should be self-isolating under the government Guidelines.  If a person becomes unwell in a University workplace with suspected COVID-19, they will be sent home in accordance to their company’s and University’s guidance. University managers will follow the NHS Test and Trace workplace guidance for any University staff that may have come into contact with them: <https://www.gov.uk/guidance/nhs-test-and-trace-workplace-guidance> | 3 | 2 | 6 | Yes, provided Estates properly brief contractors |  |  |  |  |  |  |  |
| Environmental | Virus transmission in the workplace | Staff | Contact with an object that has been contaminated with COVID-19 and which subsequently transmits this to another person e.g. surfaces, any inanimate objects & touch points including work surfaces, work equipment, door handles, banisters, chair arms and floors. | Individuals have been instructed and are regularly reminded via local signage and all staff communications to clean their hands frequently with soap and water for 20 seconds and the importance of proper drying in accordance with the NHS Guidance:  <https://www.nhs.uk/live-well/healthy-body/best-way-to-wash-your-hands/>  Soap and water and hand sanitiser are provided in the workplace and adequate supplies are maintained and are placed at the entrance to the building and in other areas such as offices, meeting rooms, kitchens and break out areas where they will be seen.  Individuals have been informed to check their skin for dryness and cracking and to inform their line manager or supervisor if there is a problem. Manager advice would be to seek a medical opinion  Individuals are reminded to catch coughs and sneezes in tissues – Follow: “Catch it, Bin it, Kill it” and to avoid touching face, eyes, nose or mouth with unclean hands. Posters are displayed around the workplace.  To help reduce the spread of coronavirus (COVID-19) individuals are reminded via UoB and ER/CSOT all staff communications and local signage of the public health advice:  <https://www.gov.uk/government/publications/coronavirus-outbreak-faqs-what-you-can-and-cant-do/coronavirus-outbreak-faqs-what-you-can-and-cant-do>  A review of the cleaning regime for the building/area to ensure controls are in place to keep surfaces clean and free of contamination, cleaning products and disposable cloths have been made available to all occupants and everyone has been briefed via ER all staff communications, team meetings and return to campus briefings; via CSOT team meetings and email briefings on the importance of keeping surfaces and work equipment clean.  All ER staff to be issued with hygiene hooks that can be used to operate touch base devices.  There is limited or restricted use of high-touch items and equipment, for example, printers or whiteboards. Staff are encouraged to minimise the use of printers and to use the hand sanitiser before and after use. Whiteboard use should be limited and hand sanitiser used afterwards.  Sharing of equipment is restricted where possible and cleaned / disinfected before and after use. Users will be asked to wipe down equipment using cleaning wipes provided after use  Objects and surfaces that are touched regularly are cleaned frequently using antibacterial wipes such as door handles and keyboards, and making sure there are adequate disposal arrangements. Users will be asked to wipe down equipment using cleaning wipes provided after use  Internal doors that **are not** signed as fire doors (unless held open with a mechanical device) kept open whilst working (last person out shuts the doors) to prevent multiple people using door handles. All ER staff to be issued with hygiene hooks that can be used to operate touch base devices  Use of hot desks and spaces avoided and, where not possible e.g. training facilities workstations are cleaned between different occupants including shared equipment. ER/CSOT are adopting a designated workstation approach and staff will be expected to clean their designated workstation at the start and end of the day.  There is clear desk policy in place to reduce the amount of personal items on desks and work benches to be practiced when the space is in use or not in use.  There are cleaning procedures for goods and merchandise entering the site. Greater handwashing and handwashing facilities have been introduced for workers handling goods and merchandise and hand sanitiser provided where this is not practical. Non-business deliveries stopped, for example, personal deliveries to workers.  Areas where people directly pass things to each other, for example office supplies, have been identified and ways to remove direct contact, such as using drop-off points or transfer zones have been introduced.  Everyone is encouraged to keep personal items clean including washing spectacles with soap and water, clean phones, keyboards and shared machinery handles etc. before after and during work. This has been completed via local communications and reinforcement from managers  During the initial return to work phase, the use of coat-stands should be avoided; coats should be left on the back of the designated workstation chair; bags can be locked in the designated workstation pedestal. Longer term options for lockers will be explored for ER staff.  Monitoring and supervision arrangementshave been put in place to ensure people are following controls e.g. implementing the new cleaning regime, following hygiene procedures etc. ER/CSOT Managers will be required to undertake a monthly review of the controls in their area (observation and team feedback) and feed this back to their team Director and H & S Committee representative.  COVID-19 cleaning products used have a current valid chemical risk assessment in place and are used in accordance with all prescribed risk controls and monitoring requirements. They are stored so that they are readily available to all users and are labelled according to the Globally Harmonised System of Classification and Labelling (GHS). (See location specific chemical risk assessments for cleaning products used within the area).  All university staff are encouraged to avoid direct personal contact with others i.e. shaking hands etc. | 3 | 3 | 9 | No | Designated socially distanced workstations (2m); cleaning responsibilities for staff communicated; deliveries process communicated to all staff ahead of return to office  All staff will be asked to bring their own food, cutlery and flasks/bottles; kitchen areas will only be available for making hot drinks (i.e. no food preparation). No shared supplies of tea, coffee, milk. | 3 | 2 | 6 | Tom Stanasiuk (deliveries process) | 11/9/20 |  |
| Organisational | Exposure to Existing Hazards | Staff | Increased risk of harm due to controls included in existing risk assessments & safety arrangements affected by COVID-19 measures | All relevant pre-existing (non COVID) risk assessments including lone working assessments and procedures have been reviewed to take into account the impacts of social distancing and other COVID counter measures.  Emergency Procedures reviewed and revised including:   * **Communication**: people have been made aware as part of their return to campus briefing that in an emergency, for example, an accident or chemical spill or fire, people do not have to stay 2m apart if it would be unsafe. * **Fire procedures:** number and details of nominated fire warden(s) in place, fire muster point confirmed and PEEP requirements defined including who will assist with their evacuation in an emergency. Required modifications to fire alarm practices and evacuation drills to cater for COVID-19 measures have been addressed; ensuring that the activity is still compliant with relevant building and fire codes. * **First Aid:** First aid needs assessment reviewed to take into account any new Guidelines issued by the [University](https://intranet.birmingham.ac.uk/staff/coronavirus/faqs-for-staff.aspx) or [HSE](https://www.hse.gov.uk/), and first aid information including the location of first aid kits and first aider contact information up to date. * **Hygiene:** Washing facilities with soap/gel available. People involved in the provision of assistance to others have been informed to pay particular attention to sanitation measures immediately afterwards including washing hands.   Safety critical roles will remain in place to aid safe operation. In the event of safety critical roles not being available then a dynamic risk assessment shall be performed by the Cedar Building Manager (Tom Stanasiuk)to ensure measures are introduced to mitigate risk (for example, another area within the building or campus could have a critical role such as first aider that could cover as a temporary solution). Security will be available as additional support for First Aid assistance – and Security contact number provided to staff in return to campus briefing  Security implications of changes made to operations and practices in response to COVID-19, have been considered and mitigations have been introduced for any new or altered security risks. Given the reduced office capacity, all staff to familiarise themselves with the lone working (office) policy as part of the return to campus briefings.  Business continuity and disaster recovery plans updated based on COVID-19 implications including Contingency plan in place for possible switch back to national or local lockdown.  Life-saving rules, will continue to be governed, enforced and communicated during COVID-19 in particular “speaking up” if they witness any unsafe behaviours, conditions or symptoms related to COVID-19. | 3 | 2 | 6 | Yes |  |  |  |  |  |  |  |
| Environmental | Inbound & Outbound Goods including Post | Staff | Exposure to contact with an object that has been contaminated with COVID-19. | Logistics for the deliveries to the unit so that social distancing can be maintained at all times has been considered and include:   * Pick-up and drop-off collection points, procedures, signage and markings revised. * Methods to reduce frequency of deliveries in place - ordering larger quantities less often. * Electronic paperwork is used where possible, and procedures reviewed to enable safe exchange of paper copies where needed, for example, required transport documents. * Delivery and receipt confirmation made contactless and physical contact when handing goods over to the customer has been avoided. * Where possible all deliveries are stripped of all packaging (which is disposed of). * Strict hand washing procedure in place after handling all deliveries. * Where possible deliveries to remain isolated and untouched for a minimum of 48 hours. | 3 | 2 | 6 | Yes |  |  |  |  |  |  |  |
| Environmental | Virus transmission outside of the workplace | Staff | Exposure to respiratory droplets carrying and contact with an object that has been contaminated with COVID-19. | On the outside / approach to the building there is signage to warn all prior to entering this building social distancing is in place.  There is signage advising staff to wash their hands regularly and not to touch their face.  Building access control is used during busy spells in the building i.e. one out one in.  Controlled access and egress is monitored to ensure it is followed. ER - this monitoring will be carried out by designated Return to Campus Champions; CSOT: this will be carried out by Clarice Morgan-Gadd and Tom Stanasiuk in absence, as required. | 3 | 2 | 6 | Yes |  |  |  |  |  |  |  |
| Organisational | Travelling to work | Staff | Exposure to respiratory droplets carrying COVID-19. | There will be flexibility around start/finish times (in line with core working hours) recognising that staff who use public transport will need to assess peak travel times on their office based days.  **Estates to advise on parking restrictions in the car parks surrounding Ash, Beech, Cedar and Elm Houses.**  Workers encouraged to avoid public transport where applicable and use alternatives e.g. cycling, walking to work etc. Where staff are unable to avoid public transport they do so in accordance with Government and University Guidance:  <https://www.gov.uk/guidance/coronavirus-covid-19-safer-travel-guidance-for-passengers>  <https://intranet.birmingham.ac.uk/staff/coronavirus/faqs-for-staff.aspx> | 3 | 3 | 9 | Yes |  |  |  |  |  |  |  |
| Mechanical | Machinery & Equipment | Staff | Exposure to respiratory droplets carrying and contact with an object that has been contaminated with COVID-19. | Equipment and surfaces that are touched regularly will be frequently cleaned and disinfected by the user. Cleaning wipes and staff briefing emails have been provided informing staff of this  Sterilising chemicals and cloths are provided in the area to clean machines and equipment prior to the commencement of work and upon completion. If machines and equipment are shared, sterilising will be carried out between operations.  All staff briefed about cleaning responsibilities for designated workstations (i.e. all surfaces and equipment wiped down at the start and end of each day). ER Briefing has been via all-staff town hall meeting, local team meetings, 1-1 meetings, and email communications including an ER FAQ for campus reopening  Main equipment items in Cedar House include photocopiers, keyboards/mice, phones, kitchen appliances (e.g. kettles, fridges) | 3 | 2 | 6 | Yes |  |  |  |  |  |  |  |
| Environmental | Ventilation | Staff | Exposure to respiratory droplets carrying COVID-19. | Recirculation of unfiltered air within the workplace has been avoided or reduced as far as possible.  All ventilation has been serviced as required. All filters have been changed as required.  Building users are encouraged where possible to ensure windows are open. | 3 | 1 | 3 | Yes |  |  |  |  |  |  |  |
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**Risk Assessment Guidance**

Risk Scoring System

The scoring system is provided as a tool to help structure thinking about assessments and to provide a framework for identifying which are the most serious risks and why.

|  | **Consequence / Severity score (severity levels) and examples of descriptors** | | | | |
| --- | --- | --- | --- | --- | --- |
|  | **1** | **2** | **3** | **4** | **5** |
| **Domains** | **Negligible** | **Minor** | **Moderate** | **Major** | **Catastrophic** |
| **Impact on the safety of staff, students or public (physical / psychological harm)** | Minimal injury not requiring first aid or requiring no/minimal intervention or treatment.  No time off work | Minor injury or illness, first aid treatment needed or requiring minor intervention.  Requiring time off work for <3 days | Moderate injury requiring professional intervention  Requiring time off work for 4-14 days  RIDDOR / MHRA / agency reportable incident | Major injury leading to long-term incapacity/ disability (loss of limb)  Requiring time off work for >14 days | Incident leading to death  Multiple permanent injuries or irreversible health effects |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Likelihood score** | **1** | **2** | **3** | **4** | **5** |
| **Frequency** | **Rare** | **Unlikely** | **Possible** | **Likely** | **Almost certain** |
| **Broad descriptor** | This will probably never happen/occur | Do not expect it to happen/occur but it is possible it may do so | Might happen or occur occasionally | Will probably happen/occur but it is not a persisting issue | Will undoubtedly happen/occur, possibly frequently |
| **Time-framed descriptor** | Not expected to occur  for years | Expected to occur  at least annually | Expected to occur at  least monthly | Expected to occur at least weekly | Expected to occur at least daily |
| **Probability**  Will it happen or not? | <0.1 per cent | 0.1–1 per cent | 1.1–10 per cent | 11–50 per cent | >50 per cent |

The overall ***level of risk*** is then calculated by multiplying the two scores together.

**Risk Level = Consequence / Severity x Likelihood (C x L)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Likelihood** | | | | |
| **Likelihood score** | **1** | **2** | **3** | **4** | **5** |
|  | **Rare** | **Unlikely** | **Possible** | **Likely** | **Almost certain** |
| **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 |

The Initial Risk Rating is the level of risk before control measures have been applied or with current control measures in place.

The Residual Risk is the level of risk after further control measures are put in place.