GENERAL HEALTH AND SAFETY RISK ASSESSMENT FORM

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| Site | **Edgbaston Campus** | **Department** | **External Relations** | | **Version / Ref No.** | **6** |
| **Activity Location** | **Cedar House** | **Activity Description** | **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  During the current lockdown period (January/February 2021) there are no staff working in Cedar House and the building is in standby mode. | | | |
| **Assessor** | **Hilary Brown** | **Assessment Date** | **13/01/2021** | **Date of Assessment Review** | **26/02/21** | |
| **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 Working Forum, ER Line Manager Network, ER Operations Group, team meetings, one to one meetings; 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 ER Remote Working Forum, 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 continues to promote the support available to staff via the ER Blog and via team meetings.  <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.  During the current lockdown (Jan/Feb 2021) there are no staff working in this building. All line managers will be 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 | 26/02/21; ongoing comms schedule in place |  |
| 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 receive the latest versions of guidance documents produced by HR in relation to working on campus and working from home to aid discussions about working patterns and are clear about the process for referring team members to Occupational Health..  Concerns on workload issues or support needs are escalated to line manager - staff are encouraged to raise concerns at their one to one meetings. Staff also given opportunity to feedback concerns and queries via staff meetings and the all-staff Town Hall  Staff/students who *should not* under any circumstance work on campus have been identified and managers/supervisors have discussed alternative arrangements with them to ensure that they do not return to work on campus. Staff who *should not* under any circumstance work on campus include:   * Any member of staff who has been through a return to work on campus assessment and has been advised by Occupational Health or a medical professional (including a midwife in respect of pregnancy) not to travel to work on campus. * Staff in the clinically extremely vulnerable category (those shielding) for whom current guidance is that they should not to travel to work, even where their work cannot be undertaken remotely.   <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>  Existing risk assessments including those for new or expectant mothers reviewed and revised to reflect new working arrangements. 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.  Employees who have concerns about either continuing to work on Campus or working from home/remotely have discussed these with their line manager or supervisor and where necessary an occupational health referral has been made using the Occupational Health Referral for Covid-19 Assessment Form.  <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 team risk assessments will be reviewed during the Jan/Feb 21 lockdown period. |  |  |  | For ER Hilary Brown; for CSOT Tom Stansiuk | End of Feb 21 |  |
| 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/campus until the illness has been verified as not being Covid-19.  Managers/supervisors keep track of when staff can return to work/campus 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.  Schedules for essential services and contractor visits revised to reduce interaction and overlap between people and building managers and occupants informed of when the visits will take place and which services are being maintained.  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 prevented and discouraged. | 3 | 3 | 9 | No | Return to campus briefings relevant for each office area will be carried out by teams following the current lockdown period. | 3 | 2 | 6 | Directors to brief teams | Dates tbc |  |
| 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. | Only essential work authorised and approved by the Government and University is permitted in University buildings.  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 are 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 and attendance in the building 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 are refused entry as the designated work stations and office capacity levels will be planned in advance. This policy has been 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 followed at all times. 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 Operations Group/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.  The building’s 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.  There is additional signage in stairwells reminding staff about social distancing.  Wash hand / use hand sanitiser on exit from stairwell.  Social gatherings amongst employees are not permitted whilst at work including meetings where alternative arrangements have been provided e.g. virtual meetings.  Large gatherings including University events organised in public outdoor spaces 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 Government and University Covid-19 guidance.)  Managers perform frequent evaluation against social distances controls. Following the current lockdown when staff return to campus, 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.  Only essential work authorised and approved by the Government and University is permitted in University buildings.  There are no examples in normal use of the facility where the 2m social distancing guidelines cannot be followed (with the exception of the stairwell – outlined above)  Individuals (including staff, students, visitors and contractors), unless exempt, are required to wear face coverings, inside all University buildings at all times except for in single occupancy rooms. 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 UoB and ER all staff communications of how to use face coverings safely including the following:  When wearing a face covering you should:   * wash your hands thoroughly with soap and water for 20 seconds or use hand sanitiser before putting a face covering on * avoid wearing on your neck or forehead * avoid touching the part of the face covering in contact with your mouth and nose, as it could be contaminated with the virus * change the face covering if it becomes damp or if you’ve touched it * avoid taking it off and putting it back on a lot in quick succession (for example, when leaving and entering buildings)   When removing a face covering:   * wash your hands thoroughly with soap and water for 20 seconds or use hand sanitiser before removing * only handle the straps, ties or clips * do not give it to someone else to use * if single-use, dispose of it carefully in a residual waste bin and do not recycle * if reusable, wash it in line with manufacturer’s instructions at the highest temperature appropriate for the fabric   wash your hands thoroughly with soap and water for 20 seconds or use hand sanitiser once removed.  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). | 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 briefed on ventilation requirements (windows opened during working day)  All staff will be asked to bring their own food, cutlery and flasks/bottles; kitchen areas will only be available for making hot drinks and heating up food in the microwave. 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 |  | 0 |  |
| 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 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 [Test, Trace and Protect Process](https://intranet.birmingham.ac.uk/staff/coronavirus/test-and-trace.aspx) * 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 where possible 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)  Track and trace process shared with all line managers; ER and CSOT Local Management Groups established. |  |  |  |  |  |  |
| 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 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 has been undertaken, 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 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 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 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 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 have adopted a designated workstation approach and staff are expected to clean their designated workstation at the start and end of the day.  There is a 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  Currently the use of coat-stands has been avoided; coats are 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. Following the current lockdown period 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 representatives.  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 and heating up food. No shared supplies of tea, coffee, milk.  All staff required to complete the social distancing mandatory training course and completion rates currently being checked using the new Mandatory Training Completion data Tableau dashboard. | 3 | 2 | 6 | All staff to complete social distancing mandatory training by end of Jan 2021 | 12/2/21 |  |
| 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 the impact of any Local or National Government requirements and 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 the Security emergency contact number provided to staff in return to campus briefings.  Security implications of changes made to operations and practices in response to COVID-19 Local or National Government requirements, 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 especially during any Local or National Government lockdowns 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 and for any Local or National Lockdown periods.  Controlled access and egress is monitored to ensure it is followed. ER - this monitoring will be carried out by the ER Operations Group members; 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. | Non-essential travel is not permitted during the National Lockdown period and is minimised at all other times– remote options considered first.  There is 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.  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)via all-staff town hall meeting, local team meetings, 1-1 meetings, and email communications including ER FAQs. 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 must ensure that windows are kept open during the working day to increase ventilation. | 3 | 1 | 3 | Yes |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**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.