GENERAL HEALTH AND SAFETY RISK ASSESSMENT FORM

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Site | **XXXXXX Teaching Room** | **Department** | **Academic Services** | | **Version / Ref No.** | **7** |
| **Activity Location** | **Centrally managed seminar rooms and lecture theatres** | **Activity Description** | **Up to XX staff in room, up to XXXX students (\*depending on room size and reconfiguration)** | | | |
| **Assessor** | **Gareth Rainford** | **Assessment Date** | **13/01/2021** | **Date of Assessment Review** | **13/03/2021** | |
| **Academic / Manager Name** | **Gareth Rainford** | **Academic / Manager Signature** |  | | | |

| 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 wellbeing | Staff Students and Visitors | Anxiety and stress caused by concerns around returning to work and studies on Campus | Teaching rooms do not have staff allocated to them. Staff who do use them (lecturers or LRAT and TAMU supporting staff) are covered by RA’s for their ‘home’ building. | 2 | 2 | 4 | Yes |  |  |  |  |  |  |  |
| Biological | Virus transmissiion in the workplace | Staff Students and Visitors | Exposure to respiratory droplets carrying COVID-19 from an infectious individual transmitted via sneezing, coughing or speaking | Social distancing: A teaching room checklist has been completed (in staff and student versions) to identify the control measures to consider reducing the risk of workplace infections.  Managers/supervisors ensure staff and students 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.  Regular access to the Lateral Flow Device screening tests provided to staff and students who are coming onto campus.  The University’s On-line induction materials for returning to campus combination of the guidance and videos have been provided and completed for all staff returning to working 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.  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.  Un-essential trips within buildings and sites prevented and discouraged . | 3 | 1 | 3 | Yes |  |  |  |  |  |  |  |
| Environmental | Virus transmission in the workplace due to lack of social distancing | Staff Students and Visitors | Exposure to respiratory droplets carrying COVID-19 from an infectious individual transmitted via sneezing, coughing or speaking. | Teaching rooms cleaned daily by cleaning services  Guidance given on hand-washing and distancing at the start of all lecture and posters displayed in teaching/lecturing spaces  Posters also advocate frequent hand sanitisation and following the “Catch it Bin It Kill It” displayed in all lecture theatres and seminar rooms  Lecturers will clean all touchpoints on equipment that they intend to use: including mice, keyboards, whiteboards, AV control system and visualizers before and after use with disposable wipes provided. A tub of wipes will be provided in each room.  Tests have shown that chalkboards cannot be sanitised without damaging the surface. Chalkboard use will therefore be prohibited, and lecturers asked to use visualisers instead.  Soap and water and hand sanitiser are provided in the building and are placed at the entrance and in teaching areas where they will be seen.  All teaching staff issued with Room Guidelines for Teaching Staff with instructions for equipment use and cleaning.  Objects and surfaces that are touched regularly including study surfaces are cleaned using the antibacterial/alcohol wipes provided to the students before the start of the teaching session.  Multi-user items such as whiteboard pens and erasers will be removed from all rooms. LRAT will supply lecturers with replacements on an appointment basis at LRAT’s Great Hall basement offices.  Students will be asked to clean the writing surface and chair or seat that they will be sitting at.  Users of touchscreens are requested to use their own personal stylus rather than their fingers. Personal styluses are available to teaching staff that do not have one from LRAT Stores in the basement of the Great Hall.  Loose furniture must not be moved or added into any other Teaching Spaces. | 3 | 1 | 3 |  |  |  |  |  |  |  |  |
| Biological | Suspected Case of CIOVID-19 | Staff Students and Visitors | Exposure to respiratory droplets carrying COVID-19 from an infectious individual transmitted via sneezing, coughing or speaking. | 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. If any students appear unwell or make comment or complain to staff members that they are feeling unwell they will be asked to leave the building with immediate effect and to follow the University and Government advice. 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  • Provision and monitoring of adequate supplies of cleaning materials are in place.  • Team briefed add information about how this is done and when 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.  • 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:  o have coronavirus symptoms and are awaiting a test result  o have tested positive for coronavirus  o are a member of the same household as someone who has symptoms or has tested positive for coronavirus  o 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 | 2 | 6 | Yes |  |  |  |  |  |  |  |
| Environmental | Ventilation | Staff Students and Visitors | Exposure to airborne droplets carrying the virus | Recirculation of unfiltered air within the workplace has been avoided or reduced as far as possible.  Ventilation systems are being maintained in line with planned and preventative maintenance schedules including filter changes as required.  General considerations reflected on during reopening of the buildings in relation to the Ventilation and fresh air to occupied spaces. Core strategy based on ‘CIBSE Covid-19 Ventilation Guidance’, REHVA guidance, other industry and HSE guidance. https://www.hse.gov.uk/coronavirus/equipment-and-machinery/air-conditioning-and-ventilation.htm  The guidance is periodically reviewed by the University’s Estates team as SARS-CoV2 transmission routes become more clearly defined, and any updated recommendations assessed and implemented where relevant to University systems. CIBSE Covid-19 Ventilation Guidance  https://www.cibse.org/knowledge/knowledge-items/detail?id=a0q3Y00000HsaFtQAJ  Ventilation systems are monitored in most cases by building management systems that will raise a fault alarm to Estates automatically.  Building users are encouraged where possible to ensure windows are open.  Where specific concerns have been raised, these have been investigated and addressed where necessary.  Teaching spaces which rely on natural ventilation have been reviewed for thermal comfort and temporary heating provided as appropriate. | 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)**

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| --- | --- | --- | --- | --- | --- |
|  | **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.