

Risk Assessment—RA_0100



A Sysmex Group Company

Name of activity/task	Returning to work following the Covid-19 lockdown
Date of assessment	13 May 2020

1. Activity/task information *(Give details of the process or processes to be used; break them down into key stages. Include details of **locations, and quantities** of hazardous substances, chemical reactions or biological materials used in the process)*

Brief description of the activity or task including location and quantities

During the period of the lockdown, the majority of staff have been working from home and those essential staff who have continued coming in have been working in conditions of low building occupancy which makes social distancing easier and reduced exposure risk. As staff gradually return to work and building occupancy increases, social distancing will become harder and will require more thought and planning. Risks and control measures for minimizing the threat from Covid-19 in the workplace are described here.

2 Who (or what) may be harmed and how? Mark ✓ where appropriate.

Users	✓	Other laboratory workers	✓	Office workers	✓
Visitors	✓	Off site (cleaners / couriers / processors)	✓	Environment	
Other (please specify; include details of any HTA (Human Tissue Act) relevant materials potentially at risk)					

3 What are the hazards and the potential severity of a hazardous event?

Identify the hazards by:

- carefully considering the activity or procedure
- walking around the area in which the activity or procedure will take place
- asking employees what they think
- checking manufacturers' instructions if appropriate
- for HTA materials consider packaging failure, loss of samples, malfunction in storage facilities, unauthorised access/use of samples etc.

Assign the following to each identified hazard:

- a number which will be used to refer to the hazard in the subsequent sections of the assessment
- your assessment of the potential severity level if a hazardous event were to occur (there are **five severity levels with weightings ranging from 1-5** which are described in [Section 14](#))

Hazard number	Nature of the hazard	Severity (1-5)
1	Exposure from and to others due to: 1) Living with someone with a confirmed case of COVID-19. 2) Having come into close contact (within 2 metres for 15 minutes or more) with a confirmed case of COVID-19. 3) Being advised by a public health agency that contact with a diagnosed case has occurred.	4

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	4) Working whilst asymptomatic with COVID-19.	
2	Suspected case whilst working on site.	4
3	General travel including foreign travel.	4
4	Access / egress to site.	4
5	Poor hygiene.	4
6	Canteen, outside areas and other public areas - exposure from large numbers of persons.	4
7	Use of public conveniences, changing facilities and showers.	4
8	Behavioural risks	3



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4 Current control measures														
<p>List each of the identified hazards identified in Section 3 by hazard number and state what measures are already in place to reduce the likelihood of harm or to reduce the severity of harm.</p> <p>Place one or more measures per row, i.e. a single hazard may have multiple control measures (add rows to the table as necessary).</p> <p>Assign the likelihood to each control measure using the table in Section 15. Your assessment should consider the likelihood of the hazard causing harm given the control measure you have stated (there are five likelihood levels with weightings ranging from 1 to 5 which are described in Section 15).</p> <p>The best way to control any hazard is to follow the ‘Hierarchy of Control Measures’:</p> <table border="0"> <tr> <td>1. Elimination</td> <td>- Remove it from the process or don’t let it onto site.</td> </tr> <tr> <td>2. Substitution</td> <td>- Using a less hazardous substance or form of it.</td> </tr> <tr> <td>3. Isolation</td> <td>- Enclosing the process e.g. in a fume hood.</td> </tr> <tr> <td>4. Use engineering controls</td> <td>- Removal of dusts, fumes and vapours via ventilation.</td> </tr> <tr> <td>5. Use Administrative controls</td> <td>- Planned work practices, training, reducing exposure.</td> </tr> <tr> <td>6. PPE</td> <td>- Eye protection, protective gloves, lab coats.</td> </tr> </table> <p>Carefully consider whether it is feasible to work in a way that removes the hazard.</p>			1. Elimination	- Remove it from the process or don’t let it onto site.	2. Substitution	- Using a less hazardous substance or form of it.	3. Isolation	- Enclosing the process e.g. in a fume hood.	4. Use engineering controls	- Removal of dusts, fumes and vapours via ventilation.	5. Use Administrative controls	- Planned work practices, training, reducing exposure.	6. PPE	- Eye protection, protective gloves, lab coats.
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6. PPE	- Eye protection, protective gloves, lab coats.													
Hazard number	Control measure	Likelihood (1-5)												
1	<ul style="list-style-type: none"> Anyone with exposure to a known case or suffering from typical Covid-19 like symptoms, such as a new persistent dry cough or high fever, should not enter the building. If you have developed these symptoms self-isolate for at least 7 days and inform your line manager of your situation on a daily basis and phone 111 if you require professional health advice. Maintain contact with line management and Human Resources (HR) and to follow company policy / guidance. Stay at home and only attend hospital in an emergency. Do not attend GP surgery and phone NHS line (111) if further advice is required. Any existing individual risk assessments (disability, young persons or new / expectant mothers) to be reviewed. Company to ensure extremely vulnerable persons (Solid organ transplant recipients; people with specific cancers: people with cancer who are undergoing active chemotherapy or radical radiotherapy for lung cancer; people with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment; people having immunotherapy or other continuing antibody treatments for cancer; people having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors; people who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppressive drugs; People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe COPD; People with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as SCID, homozygous sickle cell); People on immunosuppression therapies sufficient to significantly increase risk of infection; Women who are pregnant with significant heart disease, congenital or acquired.) are shielding themselves and following their specific medical advice issued to them by the government. Provide constant and updated guidance to all employees and visitors to site to ensure that they follow best practice to avoid contracting or transmitting the 	2												

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	<p>disease.</p> <ul style="list-style-type: none"> • Provide signage to educate all personnel and visitors on site to use hand sterilisation and hand washing techniques where appropriate. • Maintain social distancing of at least 2 metres between all individuals where possible and implement restrictions on use of areas where maintaining social distancing would be difficult. • Rearrange workspaces, if necessary, to ensure appropriate social distancing. • Ensure that all managers are aware of the symptoms of COVID-19 and that they are instructed to take appropriate steps if they suspect any member of staff to be suffering from COVID-19. 	
2	<p>If a worker develops a high temperature or a persistent cough while at work, they should:</p> <ol style="list-style-type: none"> 1) Return home immediately 2) Avoid touching anything 3) Cough or sneeze into a tissue and put it in a bin, or if they do not have tissues, cough and sneeze into the crook of their elbow. 4) Subsequently, areas frequented by the sick member of staff should be deep cleaned with virucidal sprays or wipes by other staff members wearing appropriate PPE. <p>They must then follow the guidance on above self-isolation and not return to work until their period of self-isolation has been completed.</p>	3
3	<ul style="list-style-type: none"> • Do not travel unless you cannot work from home – implement teleconferencing for meetings • Please continue to follow any further national government advice provided. • Where an occupational health (OH) service provider has been appointed, please seek additional advice through this service if you have concerns. • All persons to limit their use of public transport. Where travel is essential, please use private single occupancy where possible. • Only essential foreign travel should be undertaken. Upon return, home-isolation for a period of time may be appropriate—to be determined on a case-by-case basis. 	2
4	<p>Where possible, implement the following practices:</p> <ul style="list-style-type: none"> • Stop all non-essential visitors. If visitor is essential, limit any unnecessary movements around the building. Point out the available hand washing areas and hand sanitization points to the visitor and provide guidance on restricted access, social distancing and Coronavirus hygiene whilst on site. • Introduce staggered start and finish times for staff to reduce congestion and contact at all times. • Consider working alternate days or parts of the week in the workplace so that different staff come in on different days. Align with work commitments and priorities. • Monitor site access points to enable social distancing – if necessary change the number of access points, either increase to reduce congestion or decrease to enable monitoring. • Require all workers to hand sanitize upon entry to the 418 CSP and after visits to all areas outside of the OGT remit. • Regularly clean with viricidal wipes common contact surfaces in reception, office, access control and delivery areas e.g. particularly door handles, handrails and communal equipment such as kettles, drinks dispensers and 	1

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	microwaves.	
5	<ul style="list-style-type: none"> Wash your hands thoroughly and regularly. Use soap and water for at least 20 seconds. Use alcohol-based hand sanitiser if soap and water is not available and hand washing technique to be adopted as directed by NHS. Avoid touching your face/eyes/nose/mouth with unwashed hands and cover your cough or sneeze with a tissue then throw it in the bin. Regularly clean the hand washing facilities and check soap and sanitiser levels. Provide suitable and sufficient rubbish bins for hand towels with regular removal and disposal. When disposing of full rubbish bags secure the neck of the bag with a tape or cable tie without compressing the sack contents which would cause potential expulsion of virus laden air into the room. Sites will need extra supplies of soap, hand sanitiser, virucidal sprays and wipes and paper towels and these should be stored securely. Cleaning service provider will clean all door handles, door push plates and exit/lift buttons in the common areas at the end of every day. Increase levels of cleaning of critical areas by cleaning staff. Ensure that cleaning service provider has a business continuity plan in place to cover their own unplanned sickness absences. 	1
6	<ul style="list-style-type: none"> The site catering facilities are closed. When they do reopen, it is likely that they will be operated on a 'take away' basis. Please observe social distancing rules when going to purchase food from external facilities. Payments should be made by contactless card where possible. Social distancing must be maintained during refreshment breaks and only one person can occupy each table in the canteen area at any one time. Staff should be encouraged to spend as little time as possible at the tables so that they are available for other staff when required. Staff should also be encouraged to eat food at their desks where possible. Food should not be shared. Staff must spray and wipe the immediate area of the table and chair where they have eaten with 70% alcohol after finishing. All rubbish should be disposed of before leaving the area. Any items taken from the weekly fruit delivery should be thoroughly washed before consumption and staff must take care to avoid handling fruit items which they do not intend to eat themselves. Bringing in of food items for general consumption (such as sweets, biscuits or chocolate) following holidays or celebrations etc. is not allowed until further notice. Staff are encouraged to bring pre-prepared food where possible. All utensils used for eating and drinking must be placed in the dishwasher for cleaning after use. Do not hand wash. Persons emptying dishwashers must ensure that they sterilise their hands before removing the cleaned utensils. Use of the outside tables and seating represent a risk of infection as these areas could be used by anyone outside of normal working hours. The use of the outside tables and benches is therefore banned until further notice. 	2
7	<ul style="list-style-type: none"> Try to restrict the number of people using toilet facilities at any one time. Wash hands before and after using the facilities. Showers should not be used unless it is for decontamination purposes. 	2
8	<ul style="list-style-type: none"> Hand washing will be encouraged continuously. Staff to work remotely and avoid the use of public transport when possible. Business travel to be minimised in favour of video conferencing when possible. 	2

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	<ul style="list-style-type: none">• Hand shaking and any other forms of physical contact is not permitted.• Staff to be encouraged to make frequent use of hand sanitizers throughout the building.• Provide constant and updated guidance to all employees and visitors to sites to ensure that they follow best practice to avoid contracting or transmitting the disease.• Provide signage to educate all personnel and visitors on site to use hand sterilisation and hand washing techniques where appropriate.• Whilst using corridors follow any one-way signage that is put in place to ensure social distancing. Maintain social distancing with other users of the corridors. When entering a corridor or restricted work space do not enter until safe social distancing can be ensured if other persons are using the space at that time.	
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5 What are the current risks after application of the control measures?

For each of the hazards identified in [Section 3](#), considering the applied control measures from [Section 4](#), assign the risk level using the [Risk Score Matrix in Section 16\(a\)](#) in the table below. There are five risk levels which are determined by multiplying the severity and likelihood scores.

After the completion of the all the risks the highest risk score will determine the risk level and review period.

Hazard number	Severity	Likelihood	Risk	Comment
1	4	2	8	Exposure
2	4	3	12	Suspect case on site
3	4	2	8	Travel
4	4	1	4	Access/egress
5	4	1	4	Poor hygiene
6	4	2	8	Food consumption
7	4	2	8	Bathrooms/showers
8	3	2	6	Human behaviour

6 Additional control measures to further reduce risk of harm

Are there additional control measures that could reduce the risk further?

List any additional control measures and indicate who is responsible for implementing them and by when. A single hazard may have multiple entries depending on how many additional control measures are applied (add rows to the table if necessary).

Hazard number	Additional control measure	By whom	By when
2	Investigate whether the contract cleaning provider has a 'deep clean' service.	Colin Wheeler	15/05/2020
5	Review stocks of gloves, ethanol, virucidal wipes, tissues etc.	Kieron Girling	15/05/2020
2	Review air handling settings in the building to minimize the risk of airborne spread of Covid-19 in the event that there should be an active case in the building.	Colin Wheeler	15/05/2020

7 What are the risks after application of any additional control measures?

In a similar manner to Section 5, reassess the risk after the application of additional control measures. If no additional measures were applied, the risk will remain as initially assessed. The risk for the activity or task will be the highest level identified.

Hazard number	Severity	Likelihood	Risk	Comment
2	4	3	12	Risk unchanged
5	4	1	4	Risk unchanged



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8 How will the effectiveness of the controls be monitored?

This may include checking of equipment, review of documentation and training, internal audits.

- Monitoring of the wellbeing of staff. Staff encouraged to immediately report any sickness.
- Constant vigilance by all staff to ensure that colleagues are following the correct social distancing, hygiene and protective measures prescribed in company and Government advice.

9 Procedure in the event of an emergency

Consider what would happen in case of an emergency. Emergencies include: spills, fire, an accident or someone becoming unwell. Note: Although not emergencies, loss or damage to HTA relevant samples are also reportable using the [HTA adverse event form](#).

If someone onsite were to develop symptoms consistent with possible Covid-19 infection they would be sent home immediately to home isolate until recovered. All surfaces in the work areas that they had been in contact with will be sealed off until they can be deep cleaned by staff wearing appropriate PPE. This will be carried out in a two stage, clean and disinfect, approach using appropriate cleaning solutions such as 70% ethanol, and certified disinfectants such as Microsol. This should follow the normal Laboratory Cleaning Procedure (within P022 Work Environment and Infrastructure) which can be applied to office areas as well.

10 Associated documents

List documents relevant to this assessment and their location, e.g., [safety data sheet](#), associated [risk assessments](#), [COSHH assessment](#), etc.

Type	Name	Location
P022	Work Environment and Infrastructure	iPassport
QMS_P118	Oxford Operations during the Covid-19 Pandemic	H&S SOPs
	Cytocell coronavirus guidelines v1.3	As circulated to all staff
Guidance	Coronavirus updates	Coronavirus Business Continuity

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11 Sign off

The risks associated with the task or activity must be reassessed at an interval indicated by the risk level identified. Maximum intervals before reassessment for each risk level are given below;

Risk	Trivial (1-2)	Tolerable (3-6)	Moderate (7-9)	Substantial (10-14)	Intolerable (>15)
Interval	5 years	4 years	3 years	1 year	DO NOT START WORK

Assessment compiled by: Nick Workman

Assessment approved by: Colin Wheeler

A copy of the current risk assessment must be read and understood by every individual carrying out the activity detailed within. An electronic copy of this risk assessment must be stored on the OGT Health and Safety Management System Intranet which is accessible to all users. Printed copies are not controlled and may not be the latest version.

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12 Risk assessment review process	
Have the control measures been effective in controlling the risk?	
Have there been any changes in the procedure or in information available which affect the estimated level of risk from the listed substances?	
If required, what changes to the control measures are required?	

13 Review sign off					
The risks associated with the task or activity have been reassessed, the next maximum interval before reassessment required is given below:					
Risk	Trivial (1-2)	Tolerable (3-6)	Moderate (7-9)	Substantial (10-14)	Intolerable (>15)
Interval	5 years	4 years	3 year	1 year	DO NOT START WORK
Date of review:					
Assessment reviewed by:					
Reviewers must submit the reviewed document to the Quality Manager for filing on the OGT Health and Safety Management System Intranet					



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14 Risk Severity [\(Return to Section 3\)](#)

	SEVERITY LEVEL	POSSIBLE EXAMPLES
1	Insignificant injury	Normally insignificant conditions but which could lead to more significant injury if allowed to occur repetitively e.g. headache, dehydration from working in dry atmospheres or hot conditions, neck/back/knee ache from poor posture or awkward working conditions.
2	Minor injury	Superficial injuries: cuts, bruises, mild skin irritation. Anything that could be adequately dealt with by a first aider.
3	Significant injury	Significant injury or ill-health requiring time off work or a hospital visit eg. Burns, sprains, strains and short-term muscular-skeletal disorders, cuts requiring stitches, back or neck injuries, broken fingers or toes.
4	Serious injury	Broken limbs, amputations, long-term health problems resulting from work or acute illnesses requiring medical treatment, loss of consciousness, serious electric shock, loss of sight, loss of hearing.
5	Critical injury	Life threatening injury or ill health requiring admission to a critical care unit or rapid medical intervention. Also including longer term adverse events for occupational diseases such as death or critical illness from asbestos related cancer.

15 Likelihood [\(Return to Section 4\)](#)

	RISK LEVEL	DESCRIPTION
1	Highly unlikely	Robust control measures are in place already and they do not rely on operator compliance. Control measures are very unlikely to fail. People are rarely in this area or rarely engage in this activity.
2	Unlikely	Good control measures are in place but they may rely on operator compliance (some room for human error). Controls are unlikely to fail. People are not often in this area or do not often engage in this activity. This situation is unlikely.
3	Possible	Adequate controls are in place but they rely on personal compliance and could breakdown if not maintained. People are sometimes in this area or sometimes engage in this activity. This situation may sometimes arise.
4	Likely	Inadequate controls are in place and they rely on personal compliance with significant possibility for human error. People are often in this area or often engage in this activity. This situation would be expected to arise sooner or later.
5	Very likely	Poor or no controls are in place and there is heavy reliance on personal compliance with lots of room for human error. People are routinely in this area or routinely engage in this activity. This situation would arise frequently.

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16(a) Guidance/ Risk Score Matrix [\(Return to Section 5\)](#)

		LIKELIHOOD				
		Highly improbable (1)	Unlikely (2)	Possible (3)	Likely (4)	Very likely (5)
SEVERITY OF INJURY	Insignificant (1)	1	2	3	4	5
	Minor (2)	2	4	6	8	10
	Significant (3)	3	6	9	12	15
	Serious (4)	4	8	12	16	20
	Critical (5)	5	10	15	20	25

16(b) Actions indicated by risk level [\(Return to Section 5\)](#)

RISK LEVEL	ACTION AND TIME SCALE
TRIVIAL (1-2)	<ol style="list-style-type: none"> No action No further assessment required Continue to monitor the risk
TOLERABLE (3-6)	<ol style="list-style-type: none"> Improvement not mandatory No further assessment required Continue to monitor the risk
MODERATE (7-9)	<ol style="list-style-type: none"> Aim to reduce risk by considering additional control measures Reassessment may be required Continue to monitor the risk
SUBSTANTIAL (10-14)	<ol style="list-style-type: none"> Immediate action needed to reduce the risk Additional control measures need to be implemented before work starts Reassessment required; continue to monitor risks once approved
INTOLERABLE (>15)	<ol style="list-style-type: none"> DO NOT start until risk has been reduced Further planning required



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Oxford Gene Technology Health and Safety Management System

Returning to work following the Covid-19 lockdown - Document Control

Current Version

Version 1.0

Document Owner: EVP Group Operations

Template Approval

Approved by	Title	Template Version	Date
Colin Wheeler	EVP Group Operations and Cambridge Site Director	3.0	21/10/2019