

Individual Covid-19 Risk Assessment Form

This form will be used to assess the residual risk of Covid-19 infection to the member of staff due to workplace factors. Please ensure all sections of this form are completed. Please consult the “Guidelines for Staff Risk Assessment for Covid-19”, the “Covid Risk Assessment Form Guidance” and the “Occupational Health Guidance on health conditions and remaining at work during the covid-19 pandemic”, all available on the Trust Covid website, before completing this form.

Employee Name (Full Name)			
Job Title/ Role			
Date of Birth		Ethnicity	Gender
Contact Telephone Number (Home)			
Contact Telephone Number (Mobile)			
Contact Address Details	Post Code:		
Email Address			
Work pattern			
Manager's Name			
Job Title/ Role			
Service Location			
Contact Telephone Number (Mobile)			

Please provide details of the employee's job
<p>Work Pattern:</p> <p>Length of time in post:</p> <p>Duties:</p> <p>Planning and implementing activities for children</p> <p>Maintaining Records</p> <p>Adhering to Health & Safety</p> <p>Adhering to SSSC practice and maintaining registration with them</p> <p>Attending appropriate training</p>

Personal Risk Factors		
<p>Please attach a completed Covid-19 Risk Matrix. If the member of staff does not wish to disclose that form to the line manager, it should be sent separately to Occupational Health.</p>		
Attached	Yes ü	
<p>Previous Shielding? Yes ü No ü</p> <p>Shielding letter from Government/ GP? Yes ü No ü</p> <p>Previous advice from Occupational Health? Yes ü No ü</p> <p>If yes, please provide details and include any relevant documents:</p>		

Workplace Exposure Risk Factors
1. Staff
2. Parents and School Staff and Visitors
3. Children
Actions that have been taken to minimise risk
1. Adhere to environment COVID-19 Risk Assessment
2. Wearing of appropriate PPE
3. Reduce distance to anything that can present a higher risk to the individual including soiled children, sick children or substances hazardous to health
What are the perceived residual risks and risk significance?
What further actions are planned?

Additional Information			
<p>We have put in place:</p> <ol style="list-style-type: none"> 1. Increase staff in unit 2. Strict adherence to Government Legislation and Health & Safety requirements 3. Strict adherence to following our risk assessments and service policies and procedures around sick children and staff and pick-up of children and interactions with parents 4. Additional staff training 			
Declaration by Manager			
Please SIGN this box to confirm that the employee has been made aware of this referral.			
I confirm that I have discussed this referral with the employee and they agree to the information being forwarded to Occupational Health and the Risk Assessment Panel.			
Authorised by: (Print Manager's name)		Date	

Once completed, please return the form **along with a copy of the Covid-19 Risk Matrix Form**

Additional Comments

Risk Assessment Panel Report

Name:		Age (only use if 18 years or older)	
Job role:			
Work location:			

If you are being asked to return to the workplace after a period of shielding, self-isolation or other reason, please consider each of the factors in the tables below and write the number which applies to you in the box at the right hand side.

If you need confidential assistance to complete this form, please feel free to contact our Helpline on 01698 454010

COVID-age factors*			
Sex:	Male	No change	
	Female	- 5	
Ethnicity:	Asian or Asian British	+ 4	
	Black	+ 5	
	Mixed	+ 3	
	Other non-white	+ 3	
	White	No change	
BMI: (Calculator: https://www.nhs.uk/live-well/healthy-weight/bmi-calculator/)	Under 30	No change	
	30 – 34.9	+ 3	
	35 – 39.9	+ 5	
	40 +	+ 9	
Respiratory disease	Mild asthma • no requirement for oral corticosteroids in past year	+ 1	
	Severe asthma • requiring oral corticosteroids in past year	+ 3	
	Chronic respiratory disease (excluding asthma)	+ 6	
Type 1 Diabetes	Well controlled	+ 7	
	Poorly controlled	+ 12	
Type 2 Diabetes (and other forms)	Well controlled	+ 4	
	Poorly controlled	+ 8	
Heart disease	Heart failure	+ 8	
	Other chronic heart disease	+ 3	
High blood pressure (according to actual age)	Age 20 – 40	+ 11	
	Age 41 – 60	+ 8	
	Age 61 – 74	+3	

	Age 75 +	No change	
Neurological disease	Cerebrovascular disease (e.g. stroke / TIA / dementia)	+ 8	
	Other chronic neurological disease*	+ 9	
Chronic kidney disease	Mild or moderate chronic kidney disease	+ 4	
	Severe / end-stage chronic kidney disease	+ 13	
Haematological cancer	Diagnosed less than a year ago	+ 10	
	Diagnosed 1 – 5 years ago	+ 9	
	Diagnosed > 5 years ago	+ 5	
Cancer	Diagnosed less than a year ago	+ 5	
	Diagnosed 1 – 5 years ago	+ 2	
	Diagnosed more than 5 years ago	No change	
Other conditions	Liver disease	+ 6	
	Organ transplant	Seek advice from your transplant team	
	Spleen dysfunction / splenectomy	+ 3	
	Rheumatoid / lupus / psoriasis	+ 2	
	Other immunosuppressive condition*	+ 6	
Total COVID age factor 'years' to be added/subtracted			

Add the COVID age factor 'years' to your own age	'COVID-age'	
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What does your Covid-age mean?

Your COVID-age	Your risk	Things to think about and discuss with your manager when getting ready to return to work
Very high COVID-age Above 85	You're at very high risk from COVID-19. You must take great care when leaving your home, making careful choices about what you do.	<ul style="list-style-type: none"> • Ideally you should work from home and not go into a workplace. • If you do go into work, your employer should try to make the risk of being at work no greater than the risk within your own home. • Maintain strict physical distancing. Ensure you can maintain good personal hygiene with low likelihood of coming into contact with objects and surfaces that may transmit COVID-19. • Occupational Health Assessment may be required.

High COVID-age around 70 to 85	You're at high risk from COVID-19.	<ul style="list-style-type: none"> You are OK to attend work. You should maintain strict physical distancing. If you cannot physically distance, you should keep the risk in your workplace as low as you can by making changes to the type of work you do, where possible, or by wearing personal protective equipment (PPE). Care work and working closely with others (such as teaching, sharing a vehicle, using public transport) may be possible, but you should protect yourself by wearing a face covering, using screens or wearing PPE. 			
Moderate COVID-age around 50 to 70	You're much less likely to develop severe disease if COVID-19 infection occurs.	<ul style="list-style-type: none"> You can attend work Care work and working closely with others (such as teaching, sharing a vehicle, using public transport) may be possible, but you may want to protect yourself by wearing a face covering, using screens or wearing PPE. A slightly higher risk of infection may be accepted in the workplace, if it's hard to reduce any risks to you because of the type of work you do. This is because there is much less likelihood of you becoming very ill after getting COVID-19. 			
Low COVID-age below around 50	You're at very low risk from COVID-19	<ul style="list-style-type: none"> Increased risk of infection may be accepted - the likelihood of you becoming very ill from COVID-19 is low. 			
Pregnancy	There's no current evidence that you or your baby are at any increased risk from COVID-19, unless you have an underlying health condition.	<ul style="list-style-type: none"> You should keep any risk as low as you can by physically distancing from others and regularly washing your hands. You should also have some choice about whether to attend work, or whether you can change the type of work you do at work to keep risks low. You can find out more from the Royal College of Obstetricians and Gynaecologists. You're advised to try and avoid roles where a degree of risk cannot be avoided, such as care work and working closely with others. 			
Vulnerability group selected:		Very high	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		High	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Moderate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Low	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Thank you for completing this form.

We will arrange to have a supportive discussion with you about your covid risk and what measures are already in place or what additional measures can be adopted to ensure your safety.