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|  | | **Health & Safety Risk Assessment Form** | | | | | | | | cid:image003.jpg@01D2FB20.B009E750 | | |
| **Ref: CF:051:01** | | **Re Biological Agents Risk Assessment in all HSE Acute HC facilities (excl. Lab) during COVID 19** | | | | | | | | | | |
| **Issue date:** | | May 2020 | | | **Revised date:** | | August 2021 | | **Version No.** | | 2 | |
| **Author(s):** | | National Health & Safety Function | | | | | | | | | | |
| **Legislation:** | | UnderSection 19 of the ***Safety, Health and Welfare at Work Act, 2005*** and associated Regulations**,** it is the duty of the employer to identify the hazards and assess the associated risks in the workplace. All risk assessments must be in writing and the necessary control measures to eliminate or minimise the risks documented and implemented. | | | | | | | | | | |
| **Note:** | | The WHO IPC recommended strategies and the [HPSC/ HSE *Interim Infection Prevention and Control Precautions for Possible or Confirmed COVID-19 in a Pandemic Setting*](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/) have been integrated into the risk assessment process to assist in identifying both the existing control measures in place (tick YES) and any additional controls required (tick NO).  Where additional control measures are identified these should be documented on the Biological Agents Risk Assessment Form, assigned an ‘action owner’ and ‘due date’ for completion. | | | | | | | | | | |
| **Biological Agents Risk Assessment in all HSE Acute HC Facilities (excl. Lab) during COVID 19** | | | | | | | | | | | | |
| **Division:** | | |  | | | **Source of Risk:** | |  | | | | |
| **HG/CHO/NAS/ Function:** | | |  | | | **Primary Impact Category:** | |  | | | | |
| **Hospital Site/Service:** | | |  | | | **Risk Type:** | |  | | | | |
| **Dept./Service Site:** | | |  | | | **Name of Risk Owner:** | |  | | | | |
| **Date of Assessment:** | | |  | | | **Signature of Risk Owner:** | |  | | | | |
| **Unique ID No:** | | |  | | | **Risk Co-Ordinator:** | |  | | | | |
|  | | |  | | | **\*Risk Assessor(s):** | |  | | | | |
| **Amendments to the Risk Assessment** | | | | | | | | | | | | |
| **Version** | **Date Approved** | | | **Section Amended** | | | | | | | | **Author** |
| 2 | August 2021 | | | **CF:051:01 Biological Agents Risk Assessment in all HSE Acute HC facilities (excl. Lab) during COVID 19**  Front Cover – inserted reference to Legislation | | | | | | | | NHSF |
| 2 | August 2021 | | | **CF:051:01 Biological Agents Risk Assessment in all HSE Acute HC facilities (excl. Lab) during COVID 19**  New question 43 “There are arrangements in place for a Manager to notify the Health and Safety Authority when they become aware of a confirmed case of COVID-19 or death of an employee (e.g. informed by a medical practitioner, public health or other health professional) as a result of the employee carrying out work with the coronavirus (SARS-CoV-2)  <https://www.hsa.ie/eng/topics/covid-19_coronavirus_information_and_resources/covid-19_guidance_and_advice/guidance_and_advice/covid_19_%E2%80%93_faqs_andadvice_for_employers_and_employees/reporting_of_covid-19_cases.html> | | | | | | | | NHSF |

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| **No.** |  | **Yes** | **No** | **N/A** | **Comment** |
| **Section 1- Triage, Early Recognition and Source Control**  To facilitate early identification of cases or suspected cases of COVID-19 the following measures are in place in all Acute Healthcare Settings: | | | | | |
| 1 | Healthcare Workers (HCWs) are aware of the early signs and symptoms of COVID- 19 in patients presenting and know who to alert if they have a concern |  |  |  |  |
| 2 | At entry to the hospital, patients presenting for assessment are segregated into suspected/confirmed positive COVID and non COVID Zones based on criteria set out in the latest version of the COVID-19 Hospital Pathway (Appendix II) |  |  |  |  |
| 3 | Appropriate COVID -19 signage displayed in public areas |  |  |  |  |
| 4 | There are adequate supplies for respiratory hygiene and cough etiquette, including alcohol-based hand rub (ABHR), tissues, and hands free waste bins for disposal, at healthcare facility entrances, waiting rooms, and patient check-ins |  |  |  |  |
| 5 | Arrangements are in place for HCWs involved in care of suspected or confirmed cases to have access to an occupational health team and emergency contact details for out of hours advice in the event they develop symptoms or they have a breach in PPE in line with[*Interim Guidance for Coronavirus - Healthcare Worker Management by Occupational Health*](https://www.hse.ie/eng/staff/workplace-health-and-wellbeing-unit/covid-19-guidance/) |  |  |  |  |
| 6 | Arrangements are in place to promptly notify local Infection Prevention and Control Teams & Public Health Departments in relation to patient presenting with possible or confirmed cases of COVID- 19 |  |  |  |  |
| ***Note: Hand Hygiene and Respiratory Hygiene are essential Preventative Measures*** | | | | | |
| **Section 2- Standard Precautions** | | | | | |
| **Hand Hygiene** | | | | | |
| 7 | HCWs apply ***WHO My 5 Moments for Hand Hygiene*** before touching a patient, before any clean or aseptic procedure is performed, after exposure to body fluid, after touching a patient, and after touching a patient’s surroundings |  |  |  |  |
| 8 | Hand hygiene includes either cleaning hands with an alcohol based hand rub or with soap and water |  |  |  |  |
| 9 | Alcohol based hand rubs are preferred if hands are not visibly soiled/dirty |  |  |  |  |
| 10 | Washing hands with soap and water applies when hands are visibly soiled |  |  |  |  |

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| **No.** |  | **Yes** | **No** | **N/A** | **Comment** |
| **Respiratory Hygiene** | | | | | |
| 11 | All patients are advised to cover their nose and mouth with a tissue or their bent elbow when coughing and sneezing |  |  |  |  |
| 12 | Medical masks are offered to patients with suspected COVID-19 while they are waiting, in waiting/public areas or cohorting rooms or being transported to other departments or externally to other facilities where possible |  |  |  |  |
| **Personal Protective Equipment (PPE) – Also See Section 6 Q’s 57-61** | | | | | |
| 13 | The choice and selection of PPE is based on risk assessment and in line with the [*HPSC/HSE Current recommendations for the use of Personal Protective Equipment (PPE) in the management of suspected or confirmed COVID-19*](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/ppe/) |  |  |  |  |
| **Section 3- Transmission Based Precautions** | | | | | |
| **Contact and Droplet Precautions** | | | | | |
| 14 | Patients known or suspected with COVID-19 are located in proximity to each other to the greatest degree possible for example by identifying COVID-19 isolation rooms / cohort wards /units |  |  |  |  |
| 15 | Isolation signage is placed at the entrance to the patient’s room to restrict entry and indicate the level of transmission-based precautions required, namely contact and droplet precautions. The door remains closed |  |  |  |  |
| 16 | Where practicable, patients are cared for in a single room with en-suite facilities. If there is no en-suite toilet a dedicated commode is used, with arrangements in place for safe removal of a bedpan/urinal to an appropriate disposal point. Where this is not possible, safe access to a toilet close by, that is assigned for the use of that patient only has been identified |  |  |  |  |
| 17 | Patients are placed in adequately ventilated single rooms. |  |  |  |  |
| 18 | When single rooms are not available, patients suspected of having COVID-19 are grouped/cohorted together in a dedicated multi occupancy with the door closed |  |  |  |  |
| 19 | All patients’ beds are placed at least 1 metre apart regardless of whether they are suspected to have COVID-19. Additional space may be required in order to facilitate good manual handling practice |  |  |  |  |
| 20 | Where possible, a team of HCWs is designated to care exclusively for suspected or confirmed cases to reduce the risk of transmission |  |  |  |  |

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| **No.** |  | **Yes** | **No** | **N/A** | **Comment** |
| 21 | Equipment is either single-use and disposable or dedicated equipment (e.g. stethoscopes, blood pressure cuffs and thermometers). If equipment needs to be shared among patients, it is cleaned and disinfected between use for each individual patient (e.g. by using ethyl alcohol 70%) |  |  |  |  |
| 22 | HCWs refrain from touching eyes, nose, or mouth with potentially contaminated gloved or bare hands |  |  |  |  |
| 23 | Patients are not moved/transported out of their room or area unless medically necessary. Designated portable X-ray equipment or other designated diagnostic equipment is used. If transport is required, predetermined transport routes are identified and used to minimise exposure for staff, other patients and visitors, and the patient wears a medical mask |  |  |  |  |
| 24 | Ensure that HCWs who are transporting patients  perform hand hygiene and wear appropriate PPE as per [*HPSC/HSE Current recommendations for the use of* Personal *Protective Equipment (PPE) in the management of suspected or confirmed COVID-19*](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/ppe/) |  |  |  |  |
| 25 | Prior to the patients arrival, the receiving area is notified of any necessary precautions as early as possible |  |  |  |  |
| 26 | Surfaces are routinely cleaned and disinfected in line with local procedures. Increased frequency of cleaning and in particular close contact surfaces occurs at least twice daily in wards/department s where COVID-19 patients are accommodated |  |  |  |  |
| 27 | The number of HCWs, family members and visitors are restricted when patients are suspected/confirmed COVID -19 in line with HPSC guidance |  |  |  |  |
| 28 | The choice and selection of PPE is based on risk assessment and in line with the [*HPSC/HSE Current recommendations for the use of Personal Protective Equipment (PPE) in the management of suspected or confirmed COVID-19*](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/ppe/) |  |  |  |  |
| **Airborne Precautions for Aerosol Generated Procedures (AGPs)**  *Note: Some aerosol generating procedures may include :e.g. Front of neck airway procedures – Insertion of tracheostomy, cricothyroidotomy, tracheal intubation, tracheotomy, tracheal extubation, cardiopulmonary resuscitation (CPR), positive pressure ventilation with inadequate seal , manual ventilation and bronchoscopy (non-exhaustive list) Ref*[*: HSPSC/HSE Use of PPE to support Infection Prevention and Control Practice when performing aerosol generating procedures on CONFIRMED or CLINICALLY SUSPECTED COVID-19 CASES in a PANDEMIC SITUATION*](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/aerosolgeneratingprocedures/) | | | | | |
| 29 | Where an AGP is necessary, where practicable, it is undertaken in a negative-pressure room, using recommended airborne precautions |  |  |  |  |

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| **No.** |  | | **Yes** | | **No** | | **N/A** | | **Comment** | |
| 30 | If a negative pressure room is not available, the AGP is undertaken using a process and environment that minimises the exposure risk for HCWs, ensuring that patients, visitors, and others in the healthcare setting are not exposed for example, in a single room, with the door kept closed and restricted entry during the AGP | |  | |  | |  | |  | |
| 31 | | The number of HCWs providing care and support to the patient is limited to the absolute minimum during AGPs | |  | |  | |  | |  | |
| 32 | | The choice and selection of PPE is based on risk assessment and in line with the [*HPSC/HSE Current recommendations for the use of Personal Protective Equipment (PPE) in the management of suspected or confirmed COVID-19*](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/ppe/)*. To include an FFP2/FFP3 respirator mask or equivalent and should be fit tested. Staff know how to self-fit check each time the mask is applied* | |  | |  | |  | |  | |
| **Section 4 - Administrative Controls** | | | | | | | | | | | |
| 33 | | HCWs are provided with adequate training in standard precautions and transmission based precautions | |  | |  | |  | |  | |
| 34 | | There is an adequate patient to staff ratio | |  | |  | |  | |  | |
| 35 | | HCWs have access to local Occupational Health support and are aware of [*Interim Guidance for Coronavirus - Healthcare Worker Management by Occupational Health*](https://www.hse.ie/eng/staff/workplace-health-and-wellbeing-unit/covid-19-guidance/) | |  | |  | |  | |  | |
| 36 | | HCWs and members of the public are informed on the importance of promptly seeking medical care | |  | |  | |  | |  | |
| 37 | | Group meetings and social interaction among staff are restricted and alternative methods of communication arranged (e.g. E-mail, teleconference, videoconference). Note: Where meetings are essential, select a meeting space that can facilitate the anticipated number of attendees, so that physical distancing can be observed | |  | |  | |  | |  | |
| 38 | | There is a local visitor restriction policy in place in line with the requirements of [HPSC/HSE *Interim Infection Prevention and Control Precautions for Possible or Confirmed COVID-19 in a Pandemic Setting*](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/) | |  | |  | |  | |  | |
| 39 | | Where available and feasible, healthcare laundry services are used to launder staff uniforms. If there is no laundry facility available, HCWs are informed to take uniforms home in a disposable plastic bag. This bag should be disposed of into the household waste stream. Note: Alginate /water-soluble bags should not be used to take uniforms home, as they are designed for use in commercial washing machines rather than domestic washing machines and may damage the domestic machine | |  | |  | |  | |  | |

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| **No.** |  | **Yes** | **No** | **N/A** | **Comment** |
| 40 | Where laundry facilities are not available, HCWs have access to [HPSC/HSE *Interim Infection Prevention and Control Precautions for Possible or Confirmed COVID-19 in a Pandemic Setting*](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/) and are aware how to safely launder uniforms at home |  |  |  |  |
| 41 | There is a system in place for monitoring compliance with control measures to prevent or limit transmission of COVID-19 |  |  |  |  |
| 42 | There is a system in place for managing and reporting incidents of COVID-19 in line with [*Interim Guidance for Coronavirus - Healthcare Worker Management by Occupational Health*](https://www.hse.ie/eng/staff/workplace-health-and-wellbeing-unit/covid-19-guidance/)and the HSE Incident Management Framework |  |  |  |  |
| 43 | There are arrangements in place for a Manager to notify the [Health and Safety Authority](https://www.hsa.ie/eng/topics/covid-19_coronavirus_information_and_resources/covid-19_guidance_and_advice/guidance_and_advice/covid_19_%E2%80%93_faq_s_and_advice_for_employers_and_employees/reporting_of_covid-19_cases.html) when they become aware of a confirmed case of COVID-19 or death of an employee (e.g. informed by a medical practitioner, public health or other health professional) as a result of the employee carrying out work with the coronavirus (SARS-CoV-2)  <https://www.hsa.ie/eng/topics/covid-19_coronavirus_information_and_resources/covid-19_guidance_and_advice/guidance_and_advice/covid_19_%E2%80%93_faq_s_and_advice_for_employers_and_employees/reporting_of_covid-19_cases.html> |  |  |  |  |
| **Section 5 - Environmental and Engineering Controls** | | | | | |
| 44 | Arrangements are in place to isolate the patient with contact and droplet precautions to minimizes transmission |  |  |  |  |
| 45 | The healthcare facility maintains a separation distance of 1 metre between patients |  |  |  |  |
| 46 | Physical barriers (e.g. glass or plastic windows) are erected at reception areas, registration desks, pharmacy windows to limit close contact between staff and potentially infectious patients where close patient contact is not required |  |  |  |  |
| 47 | Where possible a designated eating area is provided to staff working in cohort areas, to minimise their need to travel to communal eating facilities |  |  |  |  |
| 48 | Dedicated staff changing areas are available with shower facilities |  |  |  |  |
| 49 | The healthcare facility has adequate ventilation |  |  |  |  |

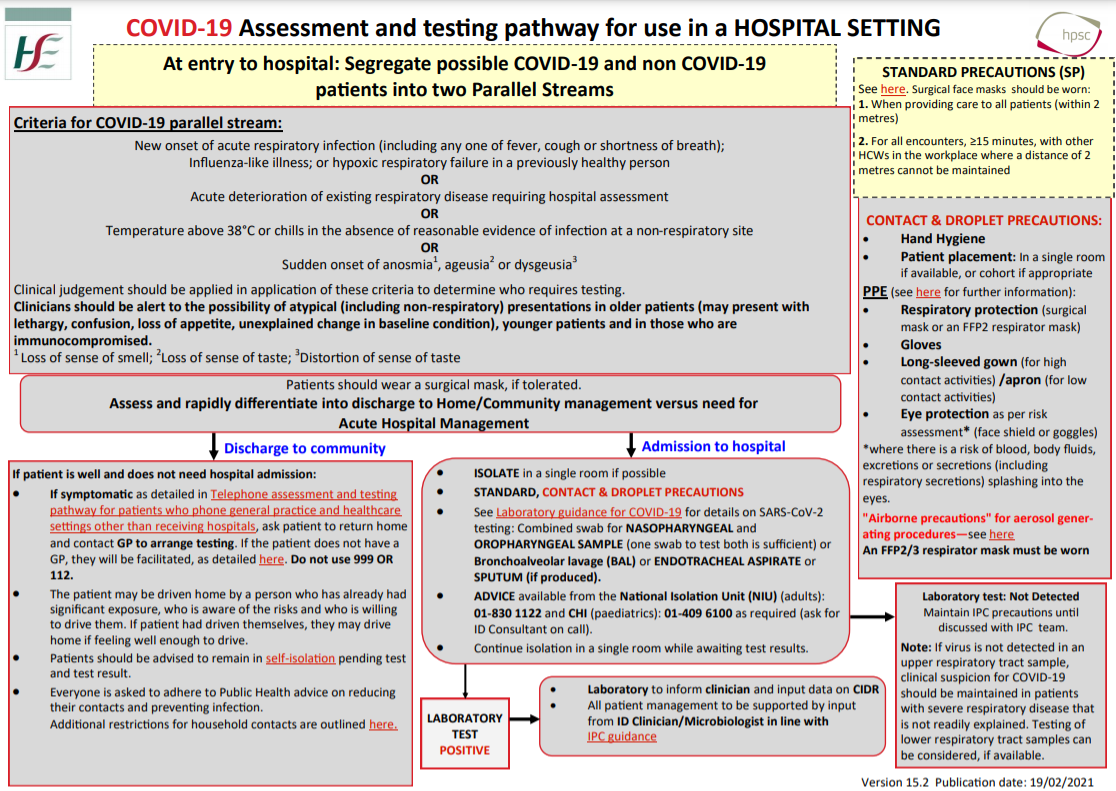
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| **No.** |  | **Yes** | **No** | **N/A** | **Comment** |
| 50 | All available mechanical ventilated rooms have been commissioned, are serviced regularly and that there are mechanisms in place to validate that the ventilation system is functioning correctly |  |  |  |  |
| **Cleaning and decontamination** | | | | | |
| 51 | The use of mobile healthcare equipment is restricted to essential functions, as far as possible to minimise the range of equipment taken into and later removed from rooms |  |  |  |  |
| 52 | Only the minimum amount of equipment and supplies essential to patient care each day is stored within an isolation room, ante-room or cohort area |  |  |  |  |
| 53 | Local procedures are in place to manage laundry, catering, and decontamination of equipment during CODID -19 in line with the recommendation outlined in [HPSC/HSE *Interim Infection Prevention and Control Precautions for Possible or Confirmed COVID-19 in a Pandemic Setting*](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/) |  |  |  |  |
| 54 | Local cleaning and disinfection procedures are implemented, monitored and reviewed regularly in line with the requirements set out in [HPSC/ HSE *Interim Infection Prevention and Control Precautions for Possible or Confirmed COVID-19 in a Pandemic Setting*](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/) |  |  |  |  |
| **Healthcare Risk Waste** | | | | | |
| 55 | All COVID-19 related waste is disposed of as healthcare risk waste |  |  |  |  |
| 56 | There is an adequate number of foot pedal operated healthcare risk waste bins provided and in full working order |  |  |  |  |
| **Section 6- PPE (General)**  *Note: The rational, correct and consistent use of PPE can help reduce the spread of COVID-19. PPE effectiveness depends strongly on adequate and regular supplies, adequate staff training, appropriate hand hygiene and appropriate human behaviour.* | | | | | |
| 57 | There is access to adequate supplies of onsite PPE at the point of care |  |  |  |  |
| 58 | All HCWs have reviewed HSE video resources / completed the HSELanD Modules on donning and doffing PPE |  |  |  |  |
| 59 | The choice and selection of PPE is based on risk assessment and in line with the [*HPSC /HSE Current recommendations for the use of Personal Protective Equipment (PPE) in the management of suspected or confirmed COVID-19*](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/ppe/) |  |  |  |  |
| 60 | Fit testing is in place for all respiratory protective equipment e.g. FPP2 and FPP3 respirators |  |  |  |  |
| 61 | There is a buddy system in place for donning and doffing PPE to minimise the risk of accidental contamination |  |  |  |  |

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| Use the columns below to document any local existing control measures not referenced above | |
| **No.** |  |
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| **\*\*HAZARD & RISK DESCRIPTION** | | **EXISTING CONTROL MEASURES** | | **ADDITIONAL CONTROLS REQUIRED** | | **ACTION**  **OWNER (i.e. the Person responsible for the action)** | **DUE DATE** |
| Describe the activity being undertaken and the frequency of exposure include:   * Contact and Droplet activities undertaken in the department e.g., close contact for physical examination, handling laundry, handling waste * AGP undertaken in the department e.g. tracheotomy   Identify number & category of employees who might be affected.  Describe the associated risk | | Attach checklist - Where the checklist answers yield a ‘yes’ these are the control measures in place | | Where the checklist answers yield a ‘No’ consider and document additional control measures required. | | Mary Bloggs (Line Manager) | 30.08.21 |
| **INITIAL RISK** | | | | **Risk Status** | | | |
| **Likelihood** | **Impact** | | **Initial Risk Rating** | **Open** | **Monitor** | | **Closed** |
|  |  | |  |  |  | |  |

**\*Risk Assessor to be recorded for OSH risks only**

**\*\*Where the risk being assessed relates to an OSH risk please ensure that the HAZARD and associated risk are recorded on the form. All other risk assessments require a risk description only**

**Appendix II** [**COVID-19 Assessment and testing pathway for use in a Hospital Setting**](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/algorithms/) ****