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|  | **cid:image003.jpg@01D2FB20.B009E750**  **Guideline Document** | | |
| **GD:018:00** | **Re: Occupational Safety and Health requirements for COVID-19 Vaccination Centres** | | |
| **Issue date:** | March 2021 | **Revised Date:** |  |
| **Authors(s):** | National Health & Safety Function, Policy Team | | |
| **Responsibility for Implementation:** | All HSE Managers with responsibility for developing and implementing the HSE’s Safety Management System within the Vaccination Centres. | | |
| **Legislation:** | Safety, Health and Welfare at Work Act, 2005 and associated Regulations | | |
| **Note:** | This Guideline has been developed to support Managers in the development and maintenance of their Safety Management System to include the requisite supporting documentation.  Further advice and support is available through the National Health and Safety Helpdesk by logging your request at: <https://healthservice.hse.ie/staff/benefits-services/health-and-safety/health-and-safety-helpdesk.html> or alternatively phone 1850 420 420 between 9am to 5pm Monday to Friday. | | |

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**1.0 Introduction**

The fundamental aim of the Safety, Health and Welfare at Work Act, 2005 and the Safety, Health and Welfare at Work (General Application) Regulations, 2007 is the prevention of workplace accidents and ill health. The legislation applies to all employers, employees and the self-employed and sets out the general ‘duties of care’ for each of these parties. Accordingly the Health Service Executive (HSE) is required to demonstrate compliance with the Act and the associated regulations.

**2.0 Purpose**

This Guideline has been developed to support Managers in the development and maintenance of their Safety Management System (SMS) to include the requisite supporting documentation. This Guideline contains:

* An overview of the requirements of a Safety Management System
* Templates and prompt sheets to support local implementation
* A directory of occupational safety and health resources that can be accessed to further support implementation.

**3.0 Scope**

This Guideline applies to Managers with responsibility for the development and maintenance of the Safety Management System within Vaccination Centres.

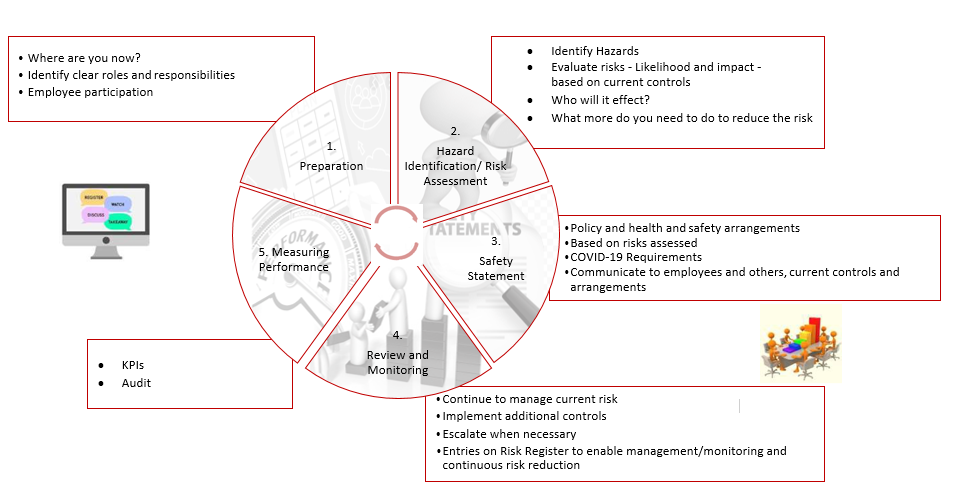
**4.0 Safety Management System (SMS)**

Figure 1

**Figure 1 summaries the key components of a SMS and are described below:**

**4.1 Preparation**

A vital part of preparation is to know where you are now and where you need to be. An effective management structure and arrangements as set out in the [HSE Corporate Safety Statement (CSS)](https://healthservice.hse.ie/filelibrary/staff/corporate-safety-statement-2020.pdf) must be put in place with clear occupational safety and health objectives and KPIs.

Effective implementation is underpinned by staff involvement and participation through appropriate consultation methods e.g. Safety Committee, Safety Representatives (refer to the [HSE CSS](https://healthservice.hse.ie/filelibrary/staff/corporate-safety-statement-2020.pdf), section 5.1 Safety Committees and 5.2 Safety Representatives and [GD 003 Guidance for the Establishment of Local Health and Safety Committees](https://healthservice.hse.ie/filelibrary/staff/guidance-for-establishing-a-local-health-and-safety-committees.pdf)).

**4.2 Hazard Identification and Risk Assessment**

Section 19, of the Safety, Health and Welfare at Work Act, 2005 provides that every employer must identify the hazards at the place of work, assess the risks from those hazards and have in place a written assessment of those risks as they apply to employees and others affected by the employer’s activities.

In order to conduct an effective risk assessment, it is important to identify all aspects of the work activities, tasks, work environment and use of work equipment that could cause harm (injury or ill-health) to staff, service user’s, visitors, contractors or anyone who comes in contact with the service.

A team approach to risk assessment should be adopted, with the involvement of employees who have practical experience of the particular process or activity being considered in the risk assessment. These employees will have the best knowledge and understanding of the hazards.

The table below outlines a list of **non-exhaustive** hazard categories which should be considered.

|  |  |  |  |
| --- | --- | --- | --- |
| **Physical Hazards** | **Chemical Hazards** | **Biological Hazards** | **Psychosocial Hazards** |
| * Traffic Management * Security * Access / Egress * Electricity/ Electrical Safety * Noise * Welfare * Lone working * Display Screen Equipment * Working at Height * PPE * Manual handling * Sharps injuries * Waste Management/ Healthcare Risk Waste * Slip or trip hazards * Housekeeping * Driving for Work * Equipment * Vibration * Lighting * Ventilation * Machinery * Fire * Radiation safety | * Cleaning Chemicals * Hand Sanitizers * Medical gases * Bottled gases | * Exposure to biological agents e.g. HIV, COVID-19, Influenza, legionella etc. * Exposure to Sharps | * Work Related Stress * Aggression and violence |

**Supports Available:**

* [GD:004 Guideline Document Re: Completion of Occupational Safety and Health Risk Assessments](https://healthservice.hse.ie/filelibrary/staff/guideline-on-completing-occupational-safety-and-health-risk-assessment.pdf)
* National Health and Safety Function (NHSF) Occupational Safety and Health (OSH) Risk Assessment Webinar
* Risk Assessment Prompt Sheets (Appendix 1) – These contain a non-exhaustive list of prompts relevant to hazard areas which should be considered when assessing and controlling the risk
* HSE’s General Risk Assessment Form and guidance on completion (Appendix 2). Note: additional specific risk assessment forms are available on the website (<https://healthservice.hse.ie/staff/benefits-services/health-and-safety/?pageNumber=1>)
* Other Risk Assessments include:
* [Display Screen Equipment](https://healthservice.hse.ie/staff/benefits-services/health-and-safety/office-safety-and-display-screen-equipment.html)
* [Pregnant Employee](https://healthservice.hse.ie/staff/benefits-services/health-and-safety/pregnant-employees-staying-safe-and-healthy-at-work.html)
* [Lone Working](https://healthservice.hse.ie/staff/benefits-services/health-and-safety/lone-working.html)
* [Chemical Agents](https://healthservice.hse.ie/staff/benefits-services/health-and-safety/chemicals.html)
* [Biological Agents](https://healthservice.hse.ie/staff/benefits-services/health-and-safety/biological-agents.html)
* [Work Related Stress](https://healthservice.hse.ie/staff/benefits-services/health-and-safety/managing-work-related-stress.html)
* [Manual Handling](https://healthservice.hse.ie/staff/benefits-services/health-and-safety/manual-handling-healthcare.html)
* National Health and Safety Function Helpdesk (<https://healthservice.hse.ie/staff/benefits-services/health-and-safety/health-and-safety-helpdesk.html>)

**4.3 Safety Statement**

As required by Section 20, of the Safety, Health and Welfare at Work Act, 2005, the HSE Corporate Safety Statement (CSS) describes the arrangements in place for safeguarding and maintaining a safe and healthy environment for employees, service users, visitors and all who come in contact with our Services or activities.

Section 2 of the CSS places the management of occupational safety and health (OSH) as a prime responsibility from managers at all levels. The roles and responsibilities of the HSE Board, CEO, Executive Management Team, Chief Operations Officer, Chief Financial Officer, National Director HR, Hospital Group Chief Executive Officers, Community Health Organisation Chief Officers, Head of National Ambulance, Head of PCRS and Local Senior Managers and Line Managers are clearly outlined.

The Safety Statement must:

* Be specific to the Site or Service
* Set out the arrangements in place to safeguard the safety, health and welfare of staff, service users and visitors, along with the co-operation required from staff to achieve this
* Be based on the identification of hazards and the assessment of associated risks

**Supports Available:**

* [GD 001 Guidance on Writing your Site or Service Safety Statement](https://healthservice.hse.ie/filelibrary/staff/writing-your-site-or-service-safety-statement-guideline.pdf)
* Safety Statement Template (Appendix 3)
* National Health Safety Function Helpdesk ([https://healthservice.hse.ie/staff/benefits-services/health-and-safety/health-and- safety-helpdesk.html](https://healthservice.hse.ie/staff/benefits-services/health-and-safety/health-and-%20%20safety-helpdesk.html))

**4.3.1 COVID-19 Requirements**

[The Governments Work Safely Protocol](https://www.gov.ie/en/publication/bb7fd-work-safely-protocol/)sets out the minimum measures required in every place of work to prevent the spread of COVID-19 and to facilitate the re-opening of workplaces following temporary closures and the ongoing safe operation of those workplaces.

Each work site is required to develop a COVID-19 Response Plan detailing the policies and practices necessary to meet the Governments’ ‘Work Safely Protocol’ to prevent the spread of COVID-19 in the workplace.

The COVID-19 Response Plan forms an integral part of your safety management system and details the arrangements to manage and prevent the spread of COVID-19.

**Supports Available:**

* [COVID-19 Response Plan Template (Appendix 4)](https://healthservice.hse.ie/staff/coronavirus/safety-in-the-workplace/managing-employees-return-to-work-safely1.html#COVID-19-Response-Plan)
* National Health and Safety Function Helpdesk (<https://healthservice.hse.ie/staff/benefits-services/health-and-safety/health-and-safety-helpdesk.html>)

**4.4 Review and monitoring**

**4.4.1** To ensure that continuous improvement takes place, risk assessments should be continuously monitored and reviewed at least annually or earlier if there are changes in legislation, following review of incidents, changes in work practices/procedures or upon the introduction of new technology. Ultimately, the process should ensure that all identified risks in the workplace, that could cause harm to employees, service users, visitors and all who come into contact with our Services and/or who may be affected by our activities, are carefully examined and appropriately managed.

**4.4.2 Communication and Notification of Risk**

Where additional resources are required for the control of a hazard and such resources are not immediately available, the risks associated with this hazard should be incorporated onto the relevant risk register and prioritised for action or notified to the next level. In the interim the risk will continue to be managed and monitored so far as is reasonably practicable at local level and the relevant manager informed of any changing circumstances.

**4.5 Measuring Performance**

Performance measurement is an important part of the Safety Management System.

It is important that health and safety performance is measured at each management level within the Organisation. Managers at all levels have responsibility for monitoring the achievement of occupational safety and health objectives and compliance with any standards (KPIs) for which they and their staff are responsible.

Auditing is an essential element of the HSE’s occupational safety and health (OSH) management system. To support this process and ensure a consisted approach across the organisation a suite of internal [HSE self-assessment audit tools](https://healthservice.hse.ie/staff/benefits-services/health-and-safety/health-and-safety-auditing.html) have been developed. It is the responsibility of local management to implement the findings from the audit.

**Appendix 1 Prompt Sheets**

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| --- | --- | --- | --- |
|  | **cid:image003.jpg@01D2FB20.B009E750**  **Risk Assessment Prompt Sheet** | | |
| **PS:041:00** | **Re: COVID-19 Vaccination Centre** | | |
| **Issue date:** | March 2021 | **Revised date:** |  |
| **Author(s):** | National Health and Safety Function, Policy Team | | |
| **Note:**  **Legislation:**  **Scope:** | Safety Health and Welfare at Work Act, 2005 | | |
| The following is a non-exhaustive list of prompts relevant to hazard areas which should be considered when assessing and controlling the hazards associated within the Vaccination Centres. Where more detailed prompt sheets are available for hazard areas, these have been referenced and linked within this prompt sheet.  All control measures must be documented on the appropriate risk assessment form. For further guidance on undertaking workplace Occupational Safety Health (OSH) Risk Assessments, please refer to [Guideline RE: Completion of Occupational Safety and Health Risk Assessments](https://healthservice.hse.ie/filelibrary/staff/guideline-on-completing-occupational-safety-and-health-risk-assessment.pdf). | | |

|  |  |
| --- | --- |
| **Name of Manager:** |  |
| **Date:** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **No.** | **Hazard controls to be considered when carrying out your risk assessment** | **Yes** | **No** | **N/A** |
| **Exterior/Car Parking Area/ Traffic Management** | | | | |
| **1** | Are appropriate signs posted in external areas to include traffic management (e.g. one way system, parking, no parking signs in fire routes, etc.)? |  |  |  |
| **2** | Is there a documented traffic management plan?  If yes, has it been communicated to all relevant personnel? |  |  |  |
| **3** | Are walkways clearly designated/segregated? |  |  |  |
| **4** | Are the parking areas and walkways free from trip hazards (e.g. pot holes, cracks, etc.)? |  |  |  |
| **5** | Is the car park kept free of debris? |  |  |  |
| **6** | Is there adequate lighting? (Tip: lighting levels that enable users to perform tasks safely, especially during dusk or night time.) |  |  |  |
| **Security** | | | | |
| **7** | Has a risk assessment of security arrangements been carried out and control measures implemented?  Please refer to [PS:026:01 Department/Security](https://healthservice.hse.ie/staff/benefits-services/health-and-safety/work-related-aggression-and-violence.html) |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Safe Access/Egress** | | | | |
| **8** | Are all internal passageways, aisles and walkways free from obstructions, trailing leads, sharp edges and other trip hazards? |  |  |  |
| **9** | Are exits clearly visible, unobstructed and adequately lit? |  |  |  |
| **Accessibility** | | | | |
| **10** | Where necessary, is the Vaccination Centre organised to take account of staff/ service users with disabilities? (e.g. doorways, passageways, staircases, toilets, wash hand basins and workstations) |  |  |  |
| **Indoor Environment** | | | | |
| **11** | Is the floor in good condition and free from trip hazards? |  |  |  |
| **12** | Is there adequate ventilation/air flow within the work area? Are windows/ roller doors opened to allow for natural ventilation as much as possible? |  |  |  |
| **13** | Do staff have control over the thermal environment? |  |  |  |
| **14** | Is there adequate lighting for tasks and general observations (dawn to dusk lighting considered)? |  |  |  |
| **15** | Are all fixtures/fittings/lighting in good working order? |  |  |  |
| **Chemical Agents** | | | | |
| **16** | Are there any hazardous chemicals in the work area? Consider hand sanitisers, and cleaning agents. If **Yes:** Has a Chemical Agents Risk Assessment been carried out? (Refer to: <https://healthservice.hse.ie/staff/benefits-services/health-and-safety/chemicals.html>) |  |  |  |
| **Electrical** | | | | |
| **17** | Has a risk assessment on electricity been carried out and control measures implemented? Please refer to [PS:034:01 Risk Assessment Prompt Sheet Re Maintaining Portable Electrical Equipment in Low Risk Environments](https://healthservice.hse.ie/staff/benefits-services/health-and-safety/work-equipment-in-the-healthcare-setting.html) |  |  |  |
| **Inclement weather conditions** | | | | |
| **18** | Are there precautions in place for staff during inclement weather conditions? |  |  |  |
| **19** | Has consideration been given to excessive heat exposures, severe cold or wet conditions? |  |  |  |
| **Noise** | | | | |
| **20** | Do noise levels interfere with communication or the work being undertaken? |  |  |  |
| **Work Related Stress (WRS)** | | | | |
| **21** | Has WRS been risk assessed? (Refer to: <https://healthservice.hse.ie/staff/benefits-services/health-and-safety/managing-work-related-stress.html>) |  |  |  |
| **Welfare** | | | | |
| **22** | Is there a supply of drinking water? |  |  |  |
| **23** | Are suitable and adequate rest and eating facilities available for staff? |  |  |  |
| **24** | Are adequate staff toilets, hand washing and showering facilities provided? |  |  |  |
| **25** | Are there adequate changing rooms? |  |  |  |
| **26** | Do all the above facilities allow appropriate social distancing? |  |  |  |
| **First Aid** | | | | |
| **27** | Are first aid/emergency kits available, accessible and checked periodically? |  |  |  |
| **28** | Is there signage to indicate where first aid kits are stored? |  |  |  |
| **Lone Workers** | | | | |
| **29** | Have lone working activities been identified and risk assessed?  Please refer to [PS:028:01 Risk Assessment Prompt Sheet re Lone Working](https://healthservice.hse.ie/staff/benefits-services/health-and-safety/lone-working.html) |  |  |  |
| **Ergonomics** | | | | |
| **30** | Has a DSE Risk Assessment been carried out for each DSE User?  Please refer to: <https://healthservice.hse.ie/staff/benefits-services/health-and-safety/office-safety-and-display-screen-equipment.html> |  |  |  |
| **31** | Has an ergonomic risk assessment been carried out for the vaccination procedure? |  |  |  |
| **Working at Heights** | | | | |
| **32** | Have working at height activities been identified and risk assessed?  Please refer to [PS:032:01 Use of Kick Stools & Step Ladders at low levels (Work at height Equipment - WHE)](https://healthservice.hse.ie/staff/benefits-services/health-and-safety/working-at-height.html) |  |  |  |
| **Personal Protective Equipment** | | | | |
| **33** | Has the requirement for the use of PPE been risk assessed? |  |  |  |
| **34** | Is there an adequate supply of PPE based on risk assessment? |  |  |  |
| **35** | Have staff had the appropriate training in donning and doffing? |  |  |  |
| **36** | Where the requirement for the use of respirators e.g. FFP2/FFP3 has been identified through risk assessment, has fit testing been completed and records maintained? |  |  |  |
| **37** | Are there appropriate waste points available for disposal? |  |  |  |
| **38** | Do staff know what to do in the event of a breach of PPE? |  |  |  |
| **Manual Handling** | | | | |
| **39** | Have all manual handling activities been identified and risk assessed? **(**Refer to: <https://healthservice.hse.ie/staff/benefits-services/health-and-safety/manual-handling-healthcare.html> |  |  |  |
| **40** | Have all staff received up-to-date manual handling training? |  |  |  |
| **Biological Agents** | | | | |
| **41** | Has a biological agents risk assessment been completed and control measures implemented?  Please refer to: <https://healthservice.hse.ie/staff/benefits-services/health-and-safety/biological-agents.html> and [Framework – Interim HSE Guidance on Infection Prevention and Control](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/hseinfectionpreventionandcontrolguidanceandframework/) |  |  |  |
| **Sharps Exposure** | | | | |
| **42** | Has a sharps risk assessment been completed and control measures implemented?  Please refer to [PS:029:01 Use of Sharps](https://healthservice.hse.ie/staff/benefits-services/health-and-safety/safe-use-of-sharps.html) |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Non-Hazardous Waste** | | | | |
| **43** | Is there a documented system in place for the management of non-hazardous waste? |  |  |  |
| **Healthcare Risk Waste** | | | | |
| **44** | Is there a documented system in place for the management of healthcare risk waste?  Please refer to Waste Management Procedure at HSE Vaccination Hubs 2021 issued by Estates |  |  |  |
| **Decontamination** | | | | |
| **45** | Are cleaning, disinfection and laundry procedures in place, in line with the requirements set out in [HPSC Infection Prevention and Control Precautions for COVID-19](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/)? |  |  |  |
| **Incident Management** | | | | |
| **46** | Is there a system in place to ensure that all incidents are reported and managed in accordance with the [HSE Incident Management Framework](https://www.hse.ie/eng/about/qavd/incident-management/hse-2020-incident-management-framework-guidance.pdf)? |  |  |  |
| **47** | Is there a system in place for reporting of COVID-19 related incidents to   * Occupational Health? * State Claims Agency via NIMS? * Health and Safety Authority ?   **References:**   * HR Memo re Covid-19 Revised Incident Reporting Requirements, dated 13th January 2021 * HR Memo re Covid-19 Revised Incident Reporting Requirements, dated 9th September 2020 * [HPSC/HSE *Interim Guidance for Coronavirus - Healthcare Worker Management by Occupational Health April 2020*](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/occupationalhealthguidance/) |  |  |  |
| **Emergency Plans** | | | | |
| **48** | Are emergency plans in place for the following (non-exhaustive)   * Needlestick/Sharp Injury? * Blood/Body Fluid? * Chemical spillage? * Violent or Aggressive incident? * Workplace accident? * Medical Emergency? * Electrical Outage? |  |  |  |
| **49** | Is there a local procedure in place for the management of a suspected COVID-19 case in the workplace? |  |  |  |
| **50** | Have staff received the necessary training? |  |  |  |
| **Consultation** | | | | |
| **51** | Is there a system in place for the exchange of information and consultation with staff, COVID Response Manager, Lead Worker Representatives and Safety Representatives? (Please refer to: <https://healthservice.hse.ie/staff/benefits-services/health-and-safety/safety-consultation-and-safety-representation.html>) |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **COVID-19 Work Safely Protocol Requirements** | |  |  |  |
| **52** | Have the steps outlined in [PS: 039:01 RE: COVID-19 Work Safely Protocol - Government Resilience and Recovery 2020-2021: Plan for Living with COVID-19](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/covid-19-work-safely-protocol-risk-assessment-prompt-sheet.pdf) been documented and implemented in order to reduce the risk of the spread of COVID-19 in the workplace? |  |  |  |
| **Contractors** | | | | |
| **53** | Has a HSE Contracts Manager been appointed to oversee contracts regarding the provision of services or labour? |  |  |  |
| **54** | Has a service level agreement been developed for each contract/ service? |  |  |  |
| **55** | Has the content of the [HSE Policy on the Management of Health and Safety in Contract Work: Co-operation and Coordination with Contractors and Others 2018](https://healthservice.hse.ie/filelibrary/staff/policy-on-the-management-of-health-and-safety-in-contract-work.pdf) been communicated to Contractors? |  |  |  |
| **56** | Have the contractor(s) signed the declaration in ‘Appendix 1’ of the above policy? |  |  |  |
| **Training Needs** | | | | |
| **57** | Are staff training needs identified through risk assessment?  Please refer to Statutory Health and Safety Training Matrix  <https://healthservice.hse.ie/staff/training-development/health-and-safety/health-and-safety-training.html> |  |  |  |
| **58** | Is staff induction completed and recorded? |  |  |  |

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|  | **Risk Assessment Prompt Sheets** | | | **cid:image003.jpg@01D2FB20.B009E750** |
| **PS:026:01** | **RE: Department / Service Security** | | | |
| **Issue date:** | June 2018 | **Revised Date:** | June 2020 | |
| **Author(s):** | National Health and Safety Function | | | |
| **Note:**  **Legislation:**  **Scope:** | Safety, Health and Welfare at Work Act 2005, Section 8 Duty of the Employer | | | |
| The following is a non-exhaustive list of prompts relevant to the hazard which should be considered when assessing and controlling the risk associated with potential for breaches of security.  All control measures must be documented on the appropriate risk assessment form.  For further guidance on undertaking workplace Occupational Safety Health (OSH) Risk Assessments which are compliant with Section 19, of the Safety, Health and Welfare at Work Act, 2005 and associated legislation please refer to [*Guideline RE: Completion of Occupational Safety and Health Risk Assessments*](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/safetystatementsandriskassessments.html) | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **No.** | **Hazard controls to be considered when carrying out your risk assessment** | **Yes** | **No** | **N/A** |
| **Environment** | | | | |
| **1** | Is there controlled access to the building? |  |  |  |
| **2** | Has consideration been given to controlled access to the whole department/unit? |  |  |  |
| **3** | Has consideration been given to controlled access to individual areas of the department/unit? |  |  |  |
| **4** | Are security checks carried out to ensure windows/doors are closed and locked as required? |  |  |  |
| **5** | When closing an area in the evening or other times are all rooms checked for intruders? |  |  |  |
| **6** | Do staff have access to a secure area for the safety of valuables/ personal belongings? |  |  |  |
| **7** | Is appropriate signage in place regarding the non-tolerance of violence and aggression towards staff? |  |  |  |
| **Security Procedures and Alarms** | | | | |
| **8** | Are there documented security procedures? |  |  |  |
| **9** | Is there a documented procedure for security breaches? |  |  |  |
| **10** | Have all staff received appropriate information, instruction and training in the implementation of agreed security procedures? |  |  |  |
| **11** | Are personal and fixed alarms available based on risk assessment? |  |  |  |
| **12** | Are personal and fixed alarms serviced and records of servicing retained? |  |  |  |
| **13** | Are response mechanism(s) tested on a regular basis and the test documented? |  |  |  |
| **14** | Are emergency contact numbers prominently displayed? |  |  |  |
| **15** | Is there access to Security personnel when required? This requirement is based on risk assessment |  |  |  |
| **Dress Code/ Security Badges** | | | | |
| **16** | Does the dress code take into account security issues that may occur? (The wearing of jewellery, ties and footwear should be included in the risk assessment) |  |  |  |
| **17** | Are staff ID badges worn at all times? |  |  |  |
| **18** | Do lanyards worn by staff incorporate a safety release mechanism? |  |  |  |
| **19** | Is there a system in place whereby ID badges of staff not known to the service are checked prior to the commencement of duties? This can apply to agency staff, contractors and other HSE staff |  |  |  |
| **CCTV** | | | | |
| **20** | Is there signage in place to indicate to the public and others that CCTV is installed? |  |  |  |
| **21** | Does CCTV cover all necessary areas, i.e. no blind spots? |  |  |  |
| **22** | Is there a system in place to retain CCTV footage for a period of time? |  |  |  |
| **Accidents/Incidents and near misses** | | | | |
| **23** | Are all incidents/accidents/near misses recorded and investigated and remedial measures implemented? |  |  |  |
| **Risk assessments:** | | | | |
| **24** | Has a risk assessment been undertaken for the handling of cash? This must be risk assessed for areas such as canteens, accounts etc. |  |  |  |
| **25** | Have all employees been made aware of the risk assessment findings? |  |  |  |
| **26** | Are the results of the risk assessment communicated to all relevant employees and all who come in contact with HSE services and activities? |  |  |  |
| **27** | Are risk assessments reviewed at least annually or more frequently if necessary i.e. accident/incident or a change in circumstances to which they relate? |  |  |  |

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|  | **Risk Assessment Prompt Sheets** | | | **cid:image003.jpg@01D2FB20.B009E750** |
| **PS:034:01** | **RE: Maintaining Portable Electrical Equipment in Low Risk Environments** | | | |
| **Issue date:** | June 2018 | **Revised Date:** | June 2020 | |
| **Author(s):** | National Health and Safety Function | | | |
| **Note:**  **Legislation:**  **Scope:** | Safety, Health and Welfare at Work (General Application) Regulations, 2007 – Chapter 2 Part 2 Use of Work Equipment  Safety, Health and Welfare at Work (General Application) Regulations, 2007- Part 3 Electricity  For further information please refer to the Guide to Safety, Health and Welfare at Work (General Application) Regulations 2007 Part 3 Electricity on their website [www.hsa.ie](http://www.hsa.ie) and in “*Maintaining Portable Electrical Equipment in low-risk Environments” on* [*https://www.hse.gov.uk/pubns/indg236.htm*](https://www.hse.gov.uk/pubns/indg236.htm) | | | |
| The following is a non-exhaustive list of prompts relevant to the hazard which should be considered when assessing and controlling the risk associated with portable electrical equipment.  All control measures must be documented on the appropriate risk assessment form.  Contact HBS Estates for further advice on infrastructural electrical risk issues.  For further guidance on undertaking workplace Occupational Safety Health (OSH) Risk Assessments which are compliant with Section 19, of the Safety, Health and Welfare at Work Act, 2005 and associated legislation please refer to [*Guideline RE: Completion of Occupational Safety and Health Risk Assessments*](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/safetystatementsandriskassessments.html) | | | |

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| **No.** | **Hazard controls to be considered when carrying out your risk assessment** | **Yes** | **No** | **N/A** |
| **1** | Is any electrical equipment used in accordance with manufacturer’s instructions? |  |  |  |
| **2** | Is the equipment suitable for the job? |  |  |  |
| **3** | Are visual checks of electrical equipment carried out before use to identify any obvious faults? Look for signs of:   * damage to the lead including fraying, cuts or heavy scuffing, e.g. from floor box covers; damage to the plug, e.g. to the cover or bent pins * tape applied to the lead to join leads together * coloured wires visible where the lead joins the plug (the cable is not being gripped where it enters the plug) * damage to the outer cover of the equipment itself, including loose parts or screws; signs of overheating, such as burn marks or staining on the plug, lead or piece of equipment * equipment that has been used or stored in unsuitable conditions, such as wet or dusty environments or where water spills are possible * cables trapped under furniture or in floor boxes |  |  |  |
| **4** | Are employees instructed to carry out visual inspections (as above) before using equipment and report faults immediately? |  |  |  |
| **5** | Is faulty electrical equipment taken out of use immediately, labelled as faulty, and not used until repaired or replaced? |  |  |  |
| **6** | Are repairs undertaken by competent person/s only? |  |  |  |
| **7** | Are employees aware of the importance of not swapping equipment leads between devices? |  |  |  |
| **8** | Are employees advised to turn off power before cleaning / maintaining electrical equipment? |  |  |  |
| **9** | Are inspection and maintenance records available for all portable electrical equipment? |  |  |  |
| **10** | Are extension leads and multiple adaptors avoided wherever possible? |  |  |  |
| **11** | When unavoidable, are checks undertaken to ensure that sockets and extension leads are not overloaded? |  |  |  |
| **12** | Are fire extinguishers accessible, kept in good working order and inspected regularly? |  |  |  |
| **13** | Are employees aware of their locations and trained in their use? |  |  |  |
| **14** | Are emergency procedures in place? |  |  |  |
| **Accidents/Incidents and near misses** | | | | |
| **15** | Are all incidents/accidents/near misses recorded and investigated and remedial measures implemented? |  |  |  |
| **Risk Assessments** | | | | |
| **16** | Are the results of the risk assessment communicated to all relevant employees and all who come in contact with HSE services and activities? |  |  |  |
| **17** | Are risk assessments reviewed at least annually or more frequently if necessary i.e. accident/incident or a change in circumstances to which they relate? |  |  |  |

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|  | **Risk Assessment Prompt Sheet** | | | **cid:image003.jpg@01D2FB20.B009E750** |
| **PS:028:01** | **RE: Lone Working** | | | |
| **Issue date:** | June 2018 | **Revised Date:** | June 2020 | |
| **Author(s):** | National Health and Safety Function | | | |
| **Note:**  **Legislation:**  **Definition:**  **Scope:** | Safety, Health and Welfare at Work (General Application) Regulations, 2007, Regulation 2(3) | | | |
| ***“****Lone workers are those employees who work by themselves without close or direct supervision. Lone workers are employees who are physically isolated from colleagues and without access to immediate assistance”.*  Lone working refers to situations where employees in the course of their duties work alone:   * In fixed workplaces e.g. Health centres, employees working out of hours in laboratory, x-ray department, reception areas, community group homes, maintenance departments etc. * Workers working away from their base e.g. community based employees, ambulance personnel, employees working / attending meetings in a non HSE facility etc.   *(Ref: Adapted from* [*HSA Guidance on Lone Working in the Healthcare Sector, 2011*](https://www.hsa.ie/eng/Publications_and_Forms/Publications/Healthcare_Sector/Guidance_on_Lone_Working_in_the_Healthcare_Sector.html)*)*  For further information, please refer to the [HSE Policy on Lone Working](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/policies.html) and [FAQ](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/frequentlyaskedquestionsfaq.html) | | | |
| The following is a non-exhaustive list of prompts relevant to the hazard which should be used and considered when assessing and controlling the hazards associated with Lone Working.  All control measures must be documented on the appropriate risk assessment form.  For further guidance on undertaking workplace Occupational Safety Health (OSH) Risk Assessments which are compliant with Section 19, of the Safety, Health and Welfare at Work Act, 2005 and associated legislation please refer to [*Guideline RE: Completion of Occupational Safety and Health Risk Assessments*](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/safetystatementsandriskassessments.html) | | | |

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| **No.** | **Hazard controls to be considered when carrying out your risk assessment** | **Yes** | **No** | **N/A** |
| **1** | Have all lone workers been identified? |  |  |  |
| **Aggression & Violence; Contact with difficult clients; Hostile environment; Inappropriate behaviour** | |  |  |  |
| **2** | Are clear procedures in place to set limits on what can and cannot be done whilst working alone and are staff aware when to stop and seek advice? |  |  |  |
| **3** | Have lone workers received sufficient information, training and instruction in performing their duties? |  |  |  |
| **4** | Are the following personal details of lone workers held on file: name, address, mobile number, car registration, make and model and next of kin details? |  |  |  |
| **5** | Where necessary, are lone workers provided with a client history including any relevant background information from colleagues or other professional bodies e.g. referring agency, GP, An Garda Siochana? |  |  |  |
| **6** | Does contact with service users initially commence with a referral through an authorised source? |  |  |  |
| **7** | Where self-referrals are made from a client that is not known to the service, is a specific risk assessment carried out and, where possible, do two staff members attend the initial visit? |  |  |  |
| **8** | Where there are known risks associated with a particular location or service user, is a risk assessment conducted to identify whether a home visit is appropriate or whether an alternative location is warranted? |  |  |  |
| **9** | Is there a central point of contact for staff to leave details of their lone working activities? e.g.   * Office base – manned at all times when employees are lone working * An answer phone that is monitored at agreed intervals * Nominated person with a mobile phone |  |  |  |
| **10** | Does the central point of contact have access to the lone workers personal details and is there an agreed escalation procedure in place that is initiated in the event of the lone worker failing to make contact? |  |  |  |
| **Transport to include: Driving; Travelling by Foot: Travelling by Public Transport; Travelling by Taxi; Escorting Clients** | |  |  |  |
| **11** | Are safe systems (safety procedures) documented for staff travelling by the identified modes of transport? |  |  |  |
| **Occupational Blood Exposures** | |  |  |  |
| **12** | Are procedures in place for the management and reporting of accidental exposure to blood and bodily fluids and are employees trained in these procedures (to include 24/7 care where applicable)? |  |  |  |
| **Manual Handling** | |  |  |  |
| **13** | Have written moving and handling risk assessments been carried out and are safe systems documented for the lone worker? |  |  |  |
| **Chemical Agents** | |  |  |  |
| **14** | Have chemical agents risk assessments been completed? |  |  |  |
| **Psychosocial (Stress / Isolation)** | |  |  |  |
| **15** | Is there regular contact and supervision between the line manager and lone worker which forms a key part in ensuring the safety of the lone worker? |  |  |  |
| **16** | Are staff aware of the HSE supports available? |  |  |  |
| **Training** | |  |  |  |
| **17** | Have lone workers received training in the following (as appropriate according to Training Needs Assessment (TNA))?   * Personal safety * Management of work-related aggression and violence training * First aid procedures * Emergency procedures * Training in the use of lone worker technology |  |  |  |
| **Use of Lone Worker Technology / Devices** | |  |  |  |
| **18** | Where hazards have been identified above, have lone worker technology / devices been provided? |  |  |  |
| **19** | Are there clear and robust protocols in place in the event of activation? |  |  |  |
| **20** | Is lone worker technology tested periodically and records of testing retained? |  |  |  |
| **21** | Is lone worker technology maintained in accordance with Manufacturers’ instruction and maintenance records maintained? |  |  |  |
| **Occupational Health** | |  |  |  |
| **22** | Are systems in place for lone workers to access Occupational Health if required? |  |  |  |
| **Supervision** | |  |  |  |
| **23** | Is there regular contact and supervision between the Line Manager and Lone Worker which forms a key part in ensuring the safety of the lone worker? |  |  |  |
| **Emergency Procedures** | |  |  |  |
| **24** | Are procedures in place for all foreseeable emergencies e.g. sudden illness? |  |  |  |
| **Accidents/Incidents and near misses** | |  |  |  |
| **25** | Are all incidents/accidents/near misses recorded and investigated and remedial measures implemented? |  |  |  |
| **Risk Assessments** | |  |  |  |
| **26** | Are the results of the risk assessment communicated to all relevant employees and all who come in contact with HSE services and activities? |  |  |  |
| **27** | Are risk assessments reviewed at least annually or more frequently if necessary, i.e. accident/incident or a change in circumstances to which they relate? |  |  |  |

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|  | **Risk Assessment Prompt Sheets** | | | **cid:image003.jpg@01D2FB20.B009E750** |
| **PS:032:01** | **RE: Use of Kick Stools & Step Ladders at low levels (Work at height Equipment - WHE)** | | | |
| **Issue date:** | June 2018 | **Revised Date:** | June 2020 | |
| **Author(s):** | National Health and Safety Function | | | |
| **Note:**  **Legislation:**  **Definition:**  **Scope:** | Safety, Health and Welfare at Work (General Application) Regulations, 2007, Part 4 (otherwise known as Work at Height) applies to all work at height where there is a risk of a fall liable to cause personal injury. | | | |
| *“Work at height means working in a place (except a staircase in a permanent workplace) where a person could be injured by falling from it, even if it is at or below ground level”.*  Some examples of activities covered by the Regulations include: using a kick stool or stepladder in the course of your work activities e.g. to retrieve stock items from a shelf overhead in a storage room, to access files/folders stored on shelving at a height , to carry out cleaning, to change or hang curtains etc. | | | |
| The following is a non-exhaustive list of prompts relevant to the hazard which should be considered when assessing and controlling the risk associated with working at height.  All control measures must be documented on the appropriate risk assessment form.  For further guidance on undertaking workplace Occupational Safety Health (OSH) Risk Assessments which are compliant with Section 19, of the Safety, Health and Welfare at Work Act, 2005 and associated legislation please refer to [*Guideline RE: Completion of Occupational Safety and Health Risk Assessments*](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/safetystatementsandriskassessments.html) | | | |

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| **No.** | **Hazard controls to be considered when carrying out your risk assessment** | **Yes** | **No** | **N/A** |
| **Activities** | | | | |
| **1** | Are working at height activities avoided where possible? |  |  |  |
| **2** | Have all working at height activities been identified? |  |  |  |
| **3** | Are all working at height activities properly planned, organised, supervised and carried out in a safe manner? |  |  |  |
| **Equipment (i.e. Kick Stool/Step Ladder)** | | | | |
| **4** | Is WHE appropriate, suitable, stable and strong enough for the work activity? |  |  |  |
| **5** | Is the WHE used and maintained as per manufacturer’s instructions? |  |  |  |
| **6** | Is there an appropriate procedure in place for the checking, inspection and maintenance of WHE, and the recording of same? |  |  |  |
| **7** | Are WHE operator’s manual/instructions available to employees? |  |  |  |
| **8** | Is WHE inspected and maintained by a competent person(s)? |  |  |  |
| **9** | Have those involved in the inspection of WHE received the appropriate training? |  |  |  |
| **10** | Are appropriate procedures in place for reporting defects promptly? |  |  |  |
| **11** | Are appropriate procedures in place for removing unsafe equipment? |  |  |  |
| **Environment** | | | | |
| **12** | Is the working environment appropriate for the work at height activity being undertaken e.g. space constraints, members of the public or service users within the vicinity and any other work activities being carried out etc.? |  |  |  |
| **13** | Are floor surfaces suitable for the use of the equipment e.g. firm, stable etc.? |  |  |  |
| **14** | Is lighting suitable for the task? |  |  |  |
| **Training** | | | | |
| **15** | Have employees received adequate information, instruction and/or training in working at heights and the correct and safe use of equipment used? |  |  |  |
| **Footwear** | | | | |
| **16** | Do staff wear appropriate footwear? |  |  |  |
| **Falling objects** | | | | |
| **17** | Is the potential for injury from falling items reduced by appropriate storage of items e.g. store heavier items at lower levels? |  |  |  |
| **Accidents/Incidents and near misses** | | | | |
| **18** | Are all incidents/accidents/near misses recorded and investigated and remedial measures implemented? |  |  |  |
| **Risk Assessments** | | | | |
| **19** | Are the results of the risk assessment communicated to all relevant employees and all who come in contact with HSE services and activities? |  |  |  |
| **20** | Are risk assessments reviewed at least annually or more frequently if necessary i.e. accident/incident or a change in circumstances to which they relate? |  |  |  |

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|  | **Risk Assessment Prompt Sheet** | | | **cid:image003.jpg@01D2FB20.B009E750** |
| **PS:029:01** | **RE: Use of Sharps** | | | |
| **Issue date:** | June 2018 | **Revised Date:** | June 2020 | |
| **Author(s):** | National Health and Safety Function | | | |
| **Note:**  **Legislation:**  **Definitions:**  **Scope:** | The European Union (Prevention of Sharps Injuries in the Healthcare Sector) Regulations, 2014 - the Safety, Health and Welfare at Work Act, 2005 and the Safety, Health and Welfare at Work (Biological Agents) Regulations, 2013.  Safety, Health and Welfare at Work (General Application) Regulations, 2007, Regulation 2 | | | |
| *Sharps are objects or instruments necessary for the exercise of specific healthcare activities, which are able to cut, prick, and cause injury and/or infection. E.g. scalpels, needles, cannula and trocar, etc. Sharps are considered to be work equipment within the meaning of Regulation 2 of the Safety, Health and Welfare at Work (General Application) Regulations, 2007.*  *(Ref*[*: HSE Policy on the Prevention of Sharps Injuries*](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/policies.html)*)*  For further information please refer to the [HSE Policy on the Prevention of Sharps Injuries](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/policies.html) and [Fast Fact](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/guidelines%20safety%20advisory%20guidance%20notes%20fast%20facts.html) | | | |
| The following is a non-exhaustive list of prompts relevant to the hazard which should be considered in assessing and controlling the risk associated with Use of Sharps.  All control measures must be documented on the appropriate risk assessment form.  For further guidance on undertaking workplace Occupational Safety Health (OSH) Risk Assessments which are compliant with Section 19, of the Safety, Health and Welfare at Work Act, 2005 and associated legislation please refer to [*Guideline RE: Completion of Occupational Safety and Health Risk Assessments*](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/safetystatementsandriskassessments.html) | | | |

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| **No.** | **Hazard controls to be considered when carrying out your risk assessment** | **Yes** | **No** | **N/A** |
| **1** | Is the HSE Policy on the Prevention of Sharps Injuries available to staff? |  |  |  |
| **2** | Has consideration been given to the unnecessary use of sharps by reviewing and implementing changes in practice? Examples to include the introduction of needleless intravenous systems / needle free connectors; eliminating unnecessary injections, etc. |  |  |  |
| **3** | Are safety engineered devices used where available and appropriate and it is reasonably practicable to do so? |  |  |  |
| **4** | In line with the requirements of the National Policy on the Prevention of Sharps Injuries, is the re-capping of needles prohibited? |  |  |  |
| **5** | Have staff received training in line with: *“Core Infection, Prevention and Control Skills – A Framework Document, 2015”*? |  |  |  |
| **6** | Are standard precautions implemented in all clinical areas and for all clinical procedures? |  |  |  |
| **7** | Are employees offered relevant vaccinations free of charge? |  |  |  |
| **8** | Are adequate numbers of easily accessible sharps bins provided? |  |  |  |
| **9** | Are sharps bins assembled in accordance with manufacturers’ instructions? |  |  |  |
| **10** | Do sharp bins display the following:   * UN number (UN3291 ), * A diamond shaped risk label with class number “6” and * Biohazard symbol?   Ref*: DOH Healthcare Risk Waste Management Segregation Packaging and Storage Guidelines for Healthcare Risk Waste, November 2010)* |  |  |  |
| **11** | Is the temporary closure on the sharps bin in place when not in use? |  |  |  |
| **12** | Are bins filled in accordance with manufacturers fill line? |  |  |  |
| **13** | Are bins free from protruding sharps? |  |  |  |
| **14** | When full are the sharps bins clicked into the fully closed position and tagged? |  |  |  |
| **15** | Are all sharps bins labelled and signed on assembly and disposal? |  |  |  |
| **16** | Are needles and syringes discarded into a sharps bin as one unit? |  |  |  |
| **17** | While in use, are bins stored safely, away from the public and out of reach of children? |  |  |  |
| **18** | Are full sharps bins stored in a designated locked area awaiting collection/disposal? |  |  |  |
| **19** | Are waste posters displayed detailing the correct segregation of clinical risk waste, where clinical risk waste is collected for disposal? |  |  |  |
| **20** | Has training been provided on the correct segregation of clinical risk waste? |  |  |  |
| **21** | Are employees provided with and trained in the use of appropriate PPE? |  |  |  |
| **Incident Reporting** | | | | |
| **22** | In the event of an injury, are the Guidelines for the Emergency Management of Injuries & post exposure prophylaxis adhered to? |  |  |  |
| **23** | Are local procedures in place to ensure that employees who have suffered an adverse event have access to treatment and follow up support including out of hours care? |  |  |  |
| **24** | Are all incidents/accidents/near misses recorded and investigated and remedial measures implemented? |  |  |  |
| **Risk Assessments** | | | | |
| **25** | Are the results of the risk assessment communicated to all relevant employees and all who come in contact with HSE services and activities? |  |  |  |
| **26** | Are risk assessments reviewed at least annually or more frequently if necessary, i.e. accident/incident or a change in circumstance to which they relate? |  |  |  |

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|  | **Risk Assessment Prompt Sheet** | | | **cid:image003.jpg@01D2FB20.B009E750** |
| **PS:039:01** | **RE: COVID-19 Work Safely Protocol - Government Resilience and Recovery 2020-2021: Plan for Living with COVID-19** | | | |
| **Issue date:** | May 2020 | **Revision Date:** | November 2020 | |
| **Author(s):** | National Health and Safety Function | | | |
| **Note:**  **Legislation**  **Scope:** | Safety Health and Welfare at Work Act, 2005.  The Government’s [*Work Safely Protocol*](https://www.gov.ie/en/publication/bb7fd-work-safely-protocol/#work-safely-protocol) addresses the measures needed to both ensure the safe operation of workplaces and the reopening of workplaces following temporary closure due to local and regional restrictions. Managers are required to review and update their risk assessments to ensure the control measures in place are adequate to prevent the spread of COVID-19 in the workplace. All managers should check HSE.ie on a daily basis to keep informed of up to date information and advice. | | | |
| Thefollowing non-exhaustive list of prompts has been updated in response to the [Government’s Work Safely Protocol (November 2020)](https://www.gov.ie/en/publication/bb7fd-work-safely-protocol/#work-safely-protocol) which describes the steps that must be taken in order to reduce the risk of the spread of COVID-19 in the workplace.  The risk assessment prompt sheet must be reviewed in conjunction with the above Work Safely Protocol.  If “No” has been answered to any of the questions, document the findings on the [General Risk Assessment Form](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/safetystatementsandriskassessments.html)  For supporting documentation please refer to [www.hse.ie/safetyandwellbeing](http://www.hse.ie/safetyandwellbeing). | | | |

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| **No.** |  | **Yes** | **No** | **N/A** |
| **Working together to suppress COVID-19 in the Workplace (Ref. Protocol Section 1B)** | | | | | |
| **Occupational Health and Safety Responsibilities** | | | | | |
| **1** | |  | | --- | | Has a person/team been identified to manage compliance with COVID-19 requirements in the workplace? **i.e. COVID-19 Response Manager and/or Team** | |  |  |  |
| **2** | |  | | --- | | Has a person/team been appointed to assist in implementing and monitoring adherence to COVID-19 requirements? **i.e. Lead Worker Representative(s) (LWR)** (Ref:[*Summary of key support roles in the implementation of the HSE’s Return to Workplace Protocol*](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/safetystatementsandriskassessments.html)) | |  |  |  |
| **3** | |  | | --- | | Has the governance structure for the appointed person/team been clearly articulated? i.e. to Senior Management | |  |  |  |
| **4** | |  | | --- | | Is the LWR(s) clearly identifiable to staff? | |  |  |  |
| **5** | |  | | --- | | Has relevant and necessary training been provided to the LWR as per national guidance and local training needs assessment? | |  |  |  |
| **6** | |  | | --- | | Are there arrangements in place to consult with the Safety Representative(s) and with staff? E.g*.* Safety Committee*.*  Ref: Section 25 & 26 of SHWW Act, 2005, HSE Corporate Safety Statement | |  |  |  |

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| **No.** |  | **Yes** | **No** | **N/A** |
| **Steps for Employers and Workers to reduce risk of exposure to COVID-19 in the Workplace (Ref. Protocol Section 3A)** | | | | |
| **Occupational Safety and Health (OSH) Management System/Documentation** | | | | |
| **7** | Has the COVID-19 Response Plan been updated? |  |  |  |
| **8** | Has the [Site or Service Safety Statement](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/safetystatementsandriskassessments.html) been updated to reflect the changes made by COVID-19? |  |  |  |
| **9** | Have [risk assessments](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/safetystatementsandriskassessments.html) been updated in response to hazards associated with COVID-19? |  |  |  |
| **10** | Do risk assessments address sensitive risk groups and vulnerable staff to include young workers, older workers, pregnant workers, night and shift workers, workers with an underlying condition? (Ref: [Guidance on fitness for work of Healthcare Workers in the Higher Risk Categories](https://www.hse.ie/eng/staff/workplace-health-and-wellbeing-unit/covid-19-guidance/guidance-on-fitness-for-work-of-healthcare-workers-in-the-higher-risk-categories.pdf)) |  |  |  |

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| **No.** |  | **Yes** | **No** | **N/A** |
| **Develop, Update, Consult, Communicate and Implement Workplace Changes or Policies (Ref. Protocol Section 3C)** | | | | |
| **11** | Have relevant HR/OSH/GDPR policies such as absence, sick leave, etc., been reviewed and updated to reflect COVID-19 requirements? |  |  |  |
| **12** | In instances of temporary workplace closure due to local and regional restrictions is the [Pre-Return to Workplace form](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/safetystatementsandriskassessments.html) completed for staff returning to the workplace? |  |  |  |
| **13** | Is a contact log maintained in line with public health requirements? |  |  |  |
| **14** | Has the plan for dealing with suspected cases of COVID-19 been updated to include:   * The assessment of the incident to identify follow up actions   and   * The specific measures for dealing with an outbreak of COVID-19? |  |  |  |
| **15** | Are arrangements in place for the reporting and management of incidents relating to employees in line with [HPSC COVID-19: Interim Public Health guidance for the management of COVID-19 outbreaks](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/outbreakmanagementguidance/COVID%20HP%20Outbreak%20Plan.pdf) and the [HSE Incident Management Framework](https://www.hse.ie/eng/about/qavd/incident-management/)? |  |  |  |

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| **Working from Home (Ref. Protocol Section 3 D7)**  Working from home should **continue where practicable**. The Resilience and Recovery 2020-2021: Plan for Living with COVID-19 sets out when only essential workers or other designated workers should go to work. (***See also section on remote working*** ) (Ref: <https://www.hse.ie/eng/staff/resources/hr-circulars/hr-circulars-2020.html>) |

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| **No.** |  | **Yes** | **No** | **N/A** |
| **Physical Distancing (Ref. Protocol Section 3 D3)** | | | | | |
| **16** | Have organisational (to include work practices), physical space and patient flow measures been considered to prevent overcrowding within health and social care facilities? Ref: [Framework – Interim HSE Guidance on Infection Prevention and Control (IPC) August 2020](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/hseinfectionpreventionandcontrolguidanceandframework/FRAMEWORK%20DOCUMENT%20FOR%20IPC.pdf) |  |  |  |
| **17** | Can touchless technology be introduced at contact points such as entry points? |  |  |  |
| **18** | Has close contact with reception staff been eliminated or reduced? E.g. screens, marked out waiting area |  |  |  |
| **19** | Are workspaces compliant with the 2 metres distance? E.g. clinical rooms, workstations, offices, reception? |  |  |  |
| **20** | Are control measures in canteen areas adequate to ensure physical distancing is maintained? E.g. supervision, staggering use, extend times, removing chairs/tables, queue systems etc.  Consider closing the canteen facilities if public health measures including social distancing cannot be facilitated |  |  |  |
| **21** | Can payment systems in canteens or food and drink dispensers receive contactless payments? |  |  |  |
| **22** | Are staff organised into teams or pods who consistently work and take breaks together? |  |  |  |
| **23** | When catering is provided, can food options be pre-packed, menu options reduced? |  |  |  |
| **24** | Is the use of passenger lifts kept to a minimum and social distancing observed? *Encourage stair use* |  |  |  |
| **25** | Are all potable water outlets cleaned and sanitised on a regular basis? |  |  |  |
| **26** | Are meetings conducted, as far as reasonably practicable, using online remote systems? |  |  |  |
| **27** | Are controls in place to reduce meeting durations, capacity in meeting rooms/clinical rooms to meet social distancing requirements? E.g. signs posting maximum capacity, remove chairs, etc. Ref: [Meeting Risk Assessment Prompt Sheet](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/safetystatementsandriskassessments.html) |  |  |  |
| **28** | Is there appropriate [HSE COVID-19 Social Distancing signage](https://www.hse.ie/eng/services/news/newsfeatures/covid19-updates/partner-resources/) in place? |  |  |  |
| **29** | Access into and leaving the building: Can distancing be implemented for staff, service users and visitors arriving at similar/same times? E.g. use of one way systems where practicable |  |  |  |
| **30** | Is the Visitor/Contractor self-declaration form held in line with GDPR requirements? |  |  |  |
| **31** | Are social distancing measures applied in locker room/showers/other welfare facilities? |  |  |  |
| **32** | Is a no handshaking policy implemented? |  |  |  |
| **Note:** Where 2 metre worker separation cannot be ensured a specific activity risk assessment must be conducted and alternative protective measures must be put in place e.g. comprehensive hygiene measures minimising the frequency and time staff are within 2 metres of each other, minimising the number of staff involved in the task, physical barriers, provision of face masks | | | | | |

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| **No.** |  | **Yes** | **No** | **N/A** |
| **Cleaning – (Ref. Protocol Section 3 D10)** | | | | |
| **33** | Have cleaning arrangements been reviewed and documented in line with public health guidance? (Ref: [European Centre for Disease Prevention ( March 2020) Disinfection of environments in healthcare and non-healthcare settings potentially contaminated with SARS-CoV-2](https://www.ecdc.europa.eu/sites/default/files/documents/Environmental-persistence-of-SARS_CoV_2-virus-Options-for-cleaning2020-03-26_0.pdf), [HPSC.ie](https://www.hpsc.ie/)) |  |  |  |
| **34** | Are cleaning materials appropriate for use? Are new materials added to the chemical list? |  |  |  |
| **35** | Are disinfectants and hand sanitisers suitable for use against COVID-19 and on the [Department of Agriculture approved list](http://www.pcs.agriculture.gov.ie/registers/biocidalproductregisters)? |  |  |  |
| **36** | Are hand sanitisers provided at appropriate locations? *Consider touchless options* |  |  |  |
| **37** | Is there a clean desk policy in place? (Staff instructed to clear their desk at the end of each day), If not- this must be considered |  |  |  |
| **38** | Are local desk and IT equipment cleaning materials available? (e.g. phones, keyboard, desk) |  |  |  |
| **39** | Have staff who perform cleaning received training relevant to their role to include:   * Hand hygiene * Standard and transmission based precautions (where appropriate) * PPE to include donning/doffing (where appropriate)? |  |  |  |
| **40** | Has appropriate [PPE been provided](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/ppe/) for cleaning staff? (Also refer to Safety Data Sheet for each cleaning product) |  |  |  |
| **41** | Is there adequate supervision of cleaning arrangements? |  |  |  |
| **42** | Is there appropriate [HSE COVID-19 signage](https://www.hse.ie/eng/services/news/newsfeatures/covid19-updates/partner-resources/) in place? |  |  |  |
| **43** | Are furnishings appropriate to the setting easy to clean? |  |  |  |
| **44** | Have all non-essential items in the workplace been removed (declutter)? |  |  |  |
| **45** | Have employees been provided with hand sanitisers and cleaning equipment for their work vehicles? |  |  |  |
| **46** | Are all surfaces and floors made of suitable materials and in a good state of repair to facilitate cleaning? |  |  |  |

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| **No.** |  | **Yes** | **No** | **N/A** |
| **Waste Management (Ref. Protocol Section 3 D10)** | | | | | |
| **47** | Are systems in place for the safe management of healthcare waste (risk and non-risk waste) for all settings? |  |  |  |

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| --- | --- | --- | --- | --- |
| **No.** |  | **Yes** | **No** | **N/A** |
| **Building Management Systems (Ref. Protocol Section 5)** | | | | |
| **48** | Is the Planned Preventative Maintenance (PPM) Schedule up to date? |  |  |  |
| **49** | Are Life Safety Systems tested and in operational order? (e.g. fire alarm systems) |  |  |  |
| **50** | Have Heating Ventilation Air Conditioning (HVAC) systems been inspected? Filters changed? Are upgrades required? *Contact Maintenance/ Estates as appropriate* (Ref: [HPSC Guidance on non-healthcare building ventilation during COVID-19](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/guidanceforhealthcareworkers/publichealthguidance/Guidance%20on%20non%20HCbuilding%20ventilation%20during%20COVID-19.pdf), [HPSC Infection Control Guiding Principles for Buildings Acute Hospitals and Community Settings](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/buildingsandfacilitiesguidance/Infection%20Control%20Guiding%20Principles%20for%20Building.pdf)) |  |  |  |
| **51** | Has a legionella risk assessment been completed and corrective actions taken as required? |  |  |  |
| **52** | To facilitate staff who are choosing to cycle to work can additional bicycle storage facilities be provided? |  |  |  |
| **53** | Can additional car parking be offered, if necessary? |  |  |  |

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| **No.** |  | **Yes** | **No** | **N/A** |
| **Managing Third Parties: Contractors, Visitors (Ref. Protocol Section 3 D9)** | | | | |
| **54** | Is the Contractor Management procedure fit for purpose to include induction training? *Consider how contractors will adhere to new site/building requirements* |  |  |  |
| **55** | Is there a system for recording visits to the site? |  |  |  |
| **56** | Have actions been considered when contract or contingency staff become unwell / symptomatic / identified as a close contact? |  |  |  |
| **57** | Has third party signage been considered? E.g. to cover visitors, delivery management, couriers, mail providers, customers, etc. |  |  |  |

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| **No.** |  | **Yes** | **No** | **N/A** |
| **Emergency Response (Ref. Protocol and Section 3 D5 and Section 5B)** | | | | |
| **58** | Fire Procedures - are changes required to reflect new staff numbers, potential loss of fire wardens and key emergency personnel, new layout, etc.? |  |  |  |
| **59** | Occupational First Aid: Are changes required to ensure adequate coverage? |  |  |  |
| **60** | Are First Aiders aware/briefed on new COVID-19 requirements? |  |  |  |
| **61** | Is PPE available to First Aiders? Note: [PHECC protocol](https://www.phecit.ie/PHECC/Publications_and_Resources/Newsletters/Newsletter_Items/2020/PHECC_COVID_19_Advisory_v1.aspx) |  |  |  |
| **62** | Can staff who become symptomatic in work be isolated in an appropriate room that is used for this purpose only? |  |  |  |
| **63** | Are training certifications still in-date for Emergency Response Team members? |  |  |  |

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| --- | --- | --- | --- | --- |
| **No.** |  | **Yes** | **No** | **N/A** |
| **Remote Working (Ref. Protocol Section 3 D7)** | | | | |
| **64** | Are managers and staff aware of the [HSE Guideline Document COVID-19 Home Working](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/health-and-safety-guideline-to-home-working-during-covid-19.pdf)? (Ref: [HSA Guidance for Employers and Employees working from home](https://www.hsa.ie/eng/publications_and_forms/publications/safety_and_health_management/guidance_on_working_from_home_for_employers_and_employees.html)) |  |  |  |
| **65** | Has a [risk assessment](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/safetystatementsandriskassessments.html) been carried out to ensure employees have a safe work environment, suitable work equipment and support while working from home? |  |  |  |

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| **No.** |  | **Yes** | **No** | **N/A** |
| **Managing Mental Health and Wellbeing ( Ref. Protocol Section 5C)** | | | | |
| **66** | Have staff been informed/reminded of the HSE supports in place? |  |  |  |
| **67** | Do existing procedures need to be reviewed /updated? |  |  |  |

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| **No.** |  | **Yes** | **No** | **N/A** |
| **Training (Ref. Protocol Section 1B, Section 3 D4)** | | | | |
| **68** | Has induction training (HSEland / local) been provided to staff prior to their return? |  |  |  |
| **69** | Have training plans been reviewed and updated? |  |  |  |
| **70** | Are training delivery systems (including online systems) fit for purpose? (Ref: [Guidance Document on Infection Prevention and Control Practices in Relation to Delivering Face to Face Education during the Global COVID-19 Pandemic](https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/educationguidance/IPC%20Guidance%20for%20delivering%20face%20to%20face%20education.pdf)) |  |  |  |
| **71** | Are there arrangements in place to keep staff appraised of COVID-19 related information to include (non-exhaustive)   * The symptoms * How each individual can protect themselves * What to do if a staff member becomes symptomatic at work * Any current restrictions in place (e.g. travel for work etc.) * The rationale behind social distancing * Good hygiene measures to include hand hygiene, cough etiquette and cleaning? |  |  |  |

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| **No.** |  | **Yes** | **No** | **N/A** |
| **Travelling to/from and for Work (Ref. Protocol Section 3 D8)** | | | | |
| **72** | Do staff conduct travel for work in line with[*HSE Guidance on Staff travel during COVID-19 Outbreak - Things to consider when you and your employees are to engage in travel*?](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/safetystatementsandriskassessments.html) |  |  |  |

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| **No.** |  | **Yes** | **No** | **N/A** |
| **PPE- Personal Protective Equipment (Ref. Protocol Section 3 D11)** | | | | |
| **73** | Have Risk Assessments been conducted for all tasks that may require PPE? |  |  |  |
| **74** | Has the HSE and HPSC guidance been consulted in relation to the selection and use of PPE? (Ref: <https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/ppe/>) |  |  |  |
| **75** | Has the appropriate PPE identified by risk assessment been sourced and provided? |  |  |  |
| **76** | Have staff been trained on proper use, cleaning, storage and disposal of PPE? |  |  |  |
| **77** | Where the risk assessment has deemed RPE is required, has appropriate fit testing been provided? |  |  |  |
| **78** | Are PPE/RPE inspection arrangements in place? |  |  |  |
| **Use of Facemasks / Face Coverings** | | | | |
| **79** | Is the wearing of face masks or face coverings in line with guidance issued by the HPSC? |  |  |  |

**Appendix 2 HSE General Risk Assessment Form**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Description: cid:image003.jpg@01D2FB20.B009E750  **Health & Safety Risk Assessment Form** | | |
| **Ref: CF:005:05** | **RE: General Risk Assessment Form** | | |
| **Issue date:** | October 2017 | **Revised Date:** | June 2020 |
| **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:[[1]](#footnote-1)** | Please note exposure to COVID-19 may present a health risk to staff and others at our places of work. It is essential that the latest public health advice is followed and suitable control measures identified and implemented to mitigate the risk of COVID-19 infection.  When conducting risk assessments consideration should be paid to the risk presented and the means of avoiding and mitigating any such risk so far as is reasonably practicable.  Where 2 metre worker separation cannot be ensured a specific activity risk assessment must be conducted and alternative protective measures must be put in place e.g. comprehensive hygiene measures, minimising the frequency and time staff are within 2 metres of each other, minimising the number of staff involved in the task, physical barriers, provision of face masks.    *It is responsibility of local management to implement any remedial actions identified.* | | |

**\*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.**

|  |  |  |  |  |  |  |  |
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| **General Risk Assessment Form** | | | | | | | |
| **Division:** | | | | **Source of Risk:** | | | |
| **HG/CHO/NAS/Function:** | | | | **Primary Impact Category:** | | | |
| **Hospital Site/Service:** | | | | **Risk Type:** | | | |
| **Dept/Service Site:** | | | | **Name of Risk Owner (BLOCKS):** | | | |
| **Date of Assessment:** | | | | **Signature of Risk Owner:** | | | |
| **Unique ID No:** | | | | **Risk Co-Ordinator:** | | | |
|  | | | | **\*Risk Assessor (s):** | | | |
| **\*\*HAZARD & RISK DESCRIPTION** | | **EXISTING CONTROL MEASURES** | | **ADDITIONAL CONTROLS REQUIRED** | | **ACTION**  **OWNER (i.e. the Person responsible for the action)** | **DUE DATE** |
|  | |  | |  | |  |  |
| **INITIAL RISK** | | | | **Risk Status** | | | |
| **Likelihood** | **Impact** | | **Initial Risk Rating** | **Open** | **Monitor** | | **Closed** |
|  |  | |  |  |  | |  |

**Appendix 3 – Safety Statement Template**



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| --- | --- | --- | --- |
| **Document**  **reference**  **number** | Please insert | **Document developed by** | Please insert |
| **Revision**  **number** | Please insert | **Document approved by** | Please insert |
| **Approval Date** | Please insert | **Responsibility for implementation** | Please insert name of senior manager |
| **Revision Date** | Please insert | **Responsibility for review and audit** | Please insert name of senior manager |

**Safety Statement**

**For**

**..........**

**[Insert site / service name].**

**Signature Sheet[[2]](#footnote-2)**

I have read, understood and agree to adhere to the attached Safety Statement:

|  |  |  |  |
| --- | --- | --- | --- |
| **Print Name** | **Signature** | **Area of Work** | **Date** |
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**(Please insert relevant page number)**

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**Section 3 Organisational Responsibilities**

**Section 4 Hazard Control Service Arrangements**

**Section 5 Risk Management Process**

**Section 6 Consultation & Information**

**Section 7 Resources**

**Section 8 Distribution of the Site / Service Safety Statement**

**Section 9 Revision of the Site / Service Safety Statement**

**Section 10 Performance Measurement**

**Section 11 Departmental Safety Statement & associated Risk Assessments**

**Populate the following Sections in line with the guidance provided.**

Section 1 to 10 to be completed by the most senior manager[[3]](#footnote-3) in consultation with staff.

**Section 1 Safety Policy**

**Wording**

**1.1 [Insert the HSE Policy Statement as set out by the CEO in the most recent** [**HSE Corporate Safety Statement**](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/safetystatementsandriskassessments.html)

**Section 2 Declaration of Intent**

**Suggested Wording**

**2.1** This Safety Statement has been prepared in accordance with the provisions of the Safety Health and Welfare at Work Act, 2005 for **[Insert name of site or service as appropriate].** The basic intent of the document is to formally declare the means by which the management of **[insert site / service name]** ensures, so far as is reasonably practicable, the safety, health and welfare of employees, service users, visitors and all who come into contact with our Services and/ or may be affected by our activities. This Safety Statement contains details of how safety, health and welfare will be managed at **[insert site / service name].**

Safety is everybody's business and the success of our safety policy will depend on the co-operation of employees. It is important that employees are familiar with the arrangements for health and safety in the service and incorporate these as an integral part of the tasks performed while at work.

The following are our local Occupational Safety and Health (OSH) objectives for **[insert year and provide detail]**

The Site / Service Safety Statement will be revised and evaluated as follows **[provide detail]**

The contents will be brought to the attention of employees and others **[provide detail]**

Signed........................................................... Date..........................................

**Section 3 Organisational Responsibilities**

**[Insert a suitable management flow chart that details the structure within the site/service and includes the names and job titles of relevant employees with responsibility for health and safety starting with the most Senior Manager i.e. Hospital Group Chief Executive Officers (CEOs) and Chief Officers Community Health Organisations (COs) or equivalent (Delete as appropriate)]**

# 3.1 Hospital Group Chief Executive Officers (CEOs), Chief Officers Community Health Organisations (COs), Head of National Ambulance Services and Head of PCRS

**(Delete as appropriate)**

**[Insert name of Senior Manager]** is accountable respectively to the Director **[Acute Operations/ Community Operations/ National Services (delete as appropriate)]** for the effective integration of safety, health and welfare across all disciplines and services within their area of responsibility, so far as is reasonably practicable.

Responsibilities **(Please specify)** to include:

* Ensuring there are adequate and appropriate arrangements in place for the successful implementation, monitoring, evaluation and review of the safety management system
* Ensuring that each site or service has in place a written Safety Statement and associated risk assessments which is communicated, monitored, reviewed and updated at least annually and in the event of any significant change in legislation, work activity or place of work
* Ensuring necessary resources are allocated and are available for the implementation of the safety management system
* Seeking advice from the National Health and Safety Function via [www.hse.ie/](http://www.hse.ie/safetyandwellbeing)safetyandwellbeing, specialist health and safety professionals and risk advisors/managers as necessary
* Ensuring that a health and safety training needs analysis based on risk assessment has been undertaken and training programmes implemented to ensure the safety, health and welfare of employees and others affected by the work activities
* Ensuring that suitable arrangements are in place to facilitate effective consultation on matters pertaining to occupational safety, health and welfare
* With regard to emergencies or situations of serious or imminent danger ensuring adequate plans and procedures are in place and periodically tested
* Putting in place appropriate procedures to ensure all incidents are reported and managed in accordance with the HSE Incident Management Policy and prescribed accidents and dangerous occurrences are reported to the Health and Safety Authority
* Ensuring that workplaces are designed and maintained in a condition that is safe and without risk to health, that there is a safe means of access to and egress from the workplace and that plant, equipment and other articles are safe and without risk to health so far as is reasonably practicable
* Ensuring that systems of work are planned, organised, performed, maintained and revised as appropriate, so as to be safe and without risk to health so far as is reasonably practicable
* Managing and conducting work activities in such a way as to prevent, so far as is reasonably practicable, any improper conduct or behaviour likely to put the safety, health or welfare at work of his or her employees at risk
* Ensuring safety, health and welfare legislation forms part of the general conditions of a contractor’s work specification at all stages of the procurement process
* Ensuring that all safety related records are maintained appropriately and are available for inspection
* Integrating performance indicators in relation to safety, health and welfare as part of performance management
* Identifying and nominating key personnel who will act as a liaison on matters pertaining to occupational safety, health and welfare to the National Health and Safety Function

**3.2.2 Local Senior Managers**

Local Senior Managers (LSM) and Line Managers (LM) are responsible for ensuring that safety is managed at local level and that safety is inherent in the services provided.

Essentially, LSM and LM must, at an operational level, implement the requirements set out in 3.1 above through the activities, staff and workplaces within their control.

**3.2.3 Line Manager(s)**

Delegated Roles and Responsibilities of the Line Manager are as follows:

* Ensuring that adequate and appropriate arrangements are in place to implement, disseminate and communicate the HSE Corporate Safety Statement and the Site/Service Safety Statement at local level e.g. Dept. / Unit
* Ensuring that a hazard identification and risk assessment process is completed that reflects the specific work activities of employees and others in the place of work
* Ensuring that the Site/Service Safety Statement and associated risk assessments are reviewed and updated on a regular basis, at least annually, and in the event of any significant change in the work activity or place of work
* Reporting all safety, health and welfare risks identified that are not within their ability to control to the relevant Local Senior Manager for escalation to the risk register
* Ensuring that suitable arrangements are in place to facilitate effective consultation on matters pertaining to safety, health and welfare
* Providing systems of work that are planned, organised, performed, maintained and revised as appropriate so as to be safe and without risk to health as far as is reasonably practicable
* Promoting the integration of safety, health and welfare into all activities within their area of responsibility i.e. departmental/service team meetings, procurement etc.
* Empowering employees within their area of responsibility to take ownership of safety, health and welfare risks and promote best practice in the management of these risks
* Monitoring the performance of the safety, health and welfare programme through performance indicators and audit and ensure the outcomes of the monitoring process are acted on through the development of appropriate action plans
* Ensuring
  + That a training needs assessment based on risk assessment is used to determine the appropriate training required for all employees within their area of remit
  + That employees have access to, and facilitate their attendance at, safety, health and welfare training appropriate to their role
* Maintaining a record of each employee’s training
* Ensuring that a comprehensive incident management process is in place for all incidents occurring within the department/service
* Managing and conducting work activities to prevent any improper conduct or behaviour likely to put the safety, health or welfare at work of employees at risk
* Ensuring that all safety related records are maintained and available for inspection
* Undertaking walk about safety audits or inspections of respective departments, and documenting the findings while following up on any corrective action required to manage any deficits identified
* Drawing up suitable emergency precautions for area of responsibility and ensure that fire and evacuation drills are carried out
* Estimating the resource allocation and budget requirements for the implementation of the safety management programme within area of remit
* Seeking advice from health and safety professionals and risk advisors/managers as and when required

**3.2.4 Employees**

All employees have a responsibility for their own safety, health and welfare and that of others in the workplace and should therefore:

* Take reasonable care of their own safety, health and welfare and that of others
* Ensure they are not under the influence of an intoxicant to the extent that they may endanger themselves or others
* Co-operate with their employer or any other person as appropriate
* Not engage in improper conduct or behaviour (including bullying/harassment)
* Attend all necessary training
* Use safety equipment or PPE provided, or other items provided for their safety, health and welfare at work
* Report to their line manager as soon as is practicable:
  + Any work which may endanger the health and safety of themselves or others
  + Any defect in the place of work, systems of work, articles or substance
  + Any breach of health and safety legislation of which he or she is aware

Employees must not:

1. Interfere with, misuse or damage anything provided for securing the health, safety and welfare of those at work

(ii) Place anyone at risk in connection with work activities

(iii) Intentionally or recklessly interfere with or misuse any appliance, or safety equipment provided to secure the safety health or welfare of persons at work

The management of safety, health and welfare will not succeed unless each employee co-operates fully. Failure to comply with the terms of the Safety Statement may result in disciplinary action.

**3.2.5 Competent Persons**

**[Detail the competent personnel support available to your site/service under the Safety, Health and Welfare at Work Act, 2005]**

Examples include:

* National Health and Safety Function (NHSF)
* Health & Safety Professionals
* Occupational Health Professionals
* Employee Assistance Counselling Services (EACS)
* Fire Safety Personnel
* Moving and Handling Advisors/Co-ordinators/Ergonomists/Instructors
* Infection, Prevention and Control Specialist
* HSE Estates

(Further details can be obtained from the HSE Corporate Safety Statement)

**Section 4 Hazard Control Service Arrangements**

**4.1 [Document in this section the risk reduction measures/organisational arrangements in place within your site or service area to facilitate the management of occupational safety and health. This will include control measures implemented to reduce to the lowest possible level hazards which have been identified and are inherent in your specific workplaces and work practices. In this regard consideration should be given to the non-exhaustive list of headings given below**:

**Note: All arrangements must be reviewed to take cognizance of the public health measures to prevent the spread of COVID-19**

**Physical Hazards Examples**

* + 1. Manual handling
    2. Slip or trip hazards
    3. DSE
    4. Housekeeping
    5. Driving for work
    6. Lone working
    7. Security
    8. Equipment
    9. Noise
    10. Vibration
    11. Lighting
    12. Ventilation
    13. Working at height
    14. Electricity/ electrical safety
    15. Machinery
    16. Fire
    17. Radiation safety

**Chemical Hazards**

* + 1. Chemical substances
    2. Cleaning agents
    3. Dust and fumes from various processes

**Biological Hazards**

4.1.21 Exposure to bacteria, viruses, fungi (including yeasts and moulds) and internal human parasites (endoparasites)

**Psychosocial Hazards**

* + 1. Dignity at Work
    2. Prevention and Management Work related stress
    3. Prevention and Management Aggression and violence

**In addition detail the OSH Management Arrangements to include:**

* + 1. Provision of and access to health and safety training, information and instruction
    2. Access and distribution to national and local PPPGs
    3. Provision of and access to PPE
    4. Management of shared workplaces
    5. Management of welfare facilities
    6. Access to Occupational Health Services
    7. Access to First Aid
    8. Management of special risk groups e.g. protection of expectant mothers; disabled employees, young persons,
    9. Management of contractors
    10. Traffic management
    11. Environmental and waste management
    12. Management of internal emergencies e.g. flooding / chemical spills
    13. Covid-19 Response Plan[[4]](#footnote-4)
    14. Incident Management

**4.2 Examples of Wording**

**The following paragraphs provide examples of wording to document the hazard control service arrangements in place.**

**Note: The description of arrangements in this section must be specific to the site or service.**

**4.2.1 Slips, trips and falls**

‘Premises and external areas are regularly inspected for slip, trip and fall hazards, findings are recorded and action is taken to resolve the issues identified. However the prevention of slip and trip incidents in the workplace relies on the involvement of employees and everyone is encouraged to deal with hazards when noticed.

* Employees should always store equipment in designated locations and in particular keep walkways free from obstruction and trailing cables. They are also advised that they should report hazards which they cannot personally resolve
* Steps and Stairs are maintained in a good condition and they are fitted with handrails
* Cleaning regimes are in place but if a spillage occurs employees are responsible for ensuring that it is cleaned up promptly and any wet floor is clearly highlighted
* Wet floor signs are used where floors remain wet after cleaning or as a result of other causes such as wet weather. However, floors which people are expected to use whilst wet, will be dried so far as is reasonably practicable
* Waste is removed regularly to ensure that it does not accumulate and cause a trip hazard
* Employees are encouraged to wear sensible footwear and safety footwear is provided where risk assessments have deemed it necessary to provide it
* Suitable and sufficient lighting is provided for normal tasks, and emergency lighting is provided to aid escape in case of lighting failure, employees are requested to report faulty lighting immediately
* Arrangements will be in place for dealing with adverse weather conditions’

**4.2.2 Manual and people handling**

**‘[Insert name of site or service as appropriate]** is committed to reducing, so far as is reasonably practicable, the risks associated with manual handling activities in line with legislative requirements and in compliance with the HSE Manual and People handling Policy 2018. To help reduce the likelihood and potential of incidents arising from manual handling activities the following are adhered to:

* All staff adheres to the HSE Manual and People Handling Policy, 2018.
* Where manual handling cannot be avoided, manual handling risk assessments are conducted by Line Mangers as appropriate in conjunction with staff. Where the risk assessment identifies a particular activity presenting a risk of injury, this is assessed in greater detail by completing a Task Specific Risk Assessment. Any residual risks arising from the risk assessment which cannot be managed locally are escalated onto the NHSF risk register for action.
* Individual people handling risk assessments are undertaken for all service users and reviewed as indicated by the service users changing needs and/or as required by legislation.
* Where expert advice is required, access to the services of the Ergonomist is made through the Line Manager as appropriate. For further information, on the role of the ergonomist please refer to section 3.2.5.
* All staff have received manual handling training and manual handling refresher training is provided every 3 years in line with national Policy. Training for all staff is co-ordinated through **[Insert details]**. Training records are maintained on local databases and copies held on file in **[Insert details]**.
* The **[Insert name of site or service as appropriate]** have a number of Manual Handling Instructors **[Insert details]** who provide training to staff’.

**4.2.3 COVID-19 Response Plan**

‘Severe acute respiratory syndrome coronavirus 2’ (SARS-CoV-2), the virus responsible for the disease COVID-19 belongs to the Coronaviridae family. This family also includes severe acute respiratory syndrome-related coronavirus (SARS-virus) and Middle East respiratory syndrome coronavirus (MERSvirus). Both of these viruses are classified as risk group 3 biological agents under the Safety, Health and Welfare at Work (Biological Agents) Regulations 2013.

In response to the Governments ‘Return to Work Safely Protocol’, and the ‘HSE Approach to Return to Work Safely Protocol’, a COVID-19 Response Plan has been developed detailing the measures to prevent the spread of COVID-19 in the workplace. The COVID-19 Response Plan is available **[Insert details of where the COVID-19 Response Plan is located and how staff can access same]**’

**Section 5 Risk Management Process**

**Suggested Wording**

**‘[Insert Site or Service Name]** is committed to complying with the requirements of Section 19 of the Safety, Health and Welfare at Work Act, 2005 with regard to hazard identification / risk assessment. It is the responsibility of all Line Managers in consultation with their staff to identify the hazards at the place of work, assess the risk presented by those hazards and put in place the necessary protective and preventative measures to control those hazards.

Risk assessments are completed for physical, chemical, biological and psychosocial hazards.

Risk rating is carried out taking into account the existing control measures in place and is determined by considering the likelihood that a specified hazardous event may occur or reoccur and the potential impact of harm or loss to staff, service users, services, environment or the organisation as a result of the undesired event occurring. The HSE’s risk assessment tool is utilised to determine the scoring.

The selection and implementation of the most appropriate method of risk or hazard control will be considered, utilising the hierarchy of control. In line with the HSE’s agreed approach to risk assessment, additional control measures are prioritised and assigned to an ‘action person’ for implementation.

Control measures will be evaluated on a regular basis to assess their effectiveness and ensure they are achieving the desired result.

In line with legislation and HSE policy, risk assessments will be reviewed “when there has been a significant change in the matters to which it relates” or “there is another reason to believe that it is no longer valid” and at least annually.

The process for risk assessment is conducted in line with HSE’s Guideline Document Re: Completion of Occupational Health and Safety Risk Assessments available at: <https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/guidelineoncompletionofoshriskassessments.pdf>’

**[Where risks cannot be managed locally describe here the local communication and notification process onto the appropriate service risk register]**

**Section 6 Consultation Arrangements**

**[Detail the arrangements in place for consultation in the service, this should include the name and work contact details of the Safety Representative(s), details of any safety committee/integrated quality, risk and safety committees including terms of reference or meetings carried on to facilitate consultation arrangements for distribution of the safety statement]**

**Suggested Wording**

‘The management of [**insert name of site / service]** is committed to a policy of co-operation and consultation between management and employees and will take account of any representations made by employees. The effectiveness of the consultation arrangements will be reviewed at regular intervals.

Consultation with all relevant employees will take place:

* When new risk assessments are being carried out or revised
* When there is a change, update or modification to a particular work process
* When new machines or processes are introduced
* When new substances or materials are introduced

Furthermore, should any employees raise any matters relating to their health and safety that are connected in any way to the work activities in **[Insert service/location/facility]**, consideration will be given to such matters and all necessary or appropriate action will be taken to deal with the matters raised.

The following consultation mechanisms are in place:

* **Safety Committee** **[Detail local arrangements]** (Further guidance can be obtained from [www.hse.ie/safetyandwellbeing](http://www.hse.ie/safetyandwellbeing) “GD/003/04 Health and Safety Consultation – Guidance for the Establishment of local Health and Safety Committees”)
* **Safety Representative(s)** Under the provisions of the Safety, Health and Welfare Act 2005, employees have a right to select a colleague to represent them in health, safety and welfare at work matters.

**[Insert service/location/facility]** Safety Representative is **[insert name and contact details of Safety Rep(s)]**

A safety representative having given reasonable notice to the employer and in accordance with the Safety, Health and Welfare at Work Act 2005 may:

* Investigate accidents or dangerous occurrences
* Make oral or written representations to inspectors on matters of safety, health and welfare at work
* Receive advice and information from inspectors
* Carry out inspections and present them to the employer
* Investigate potential hazards and complaints made by a member of staff
* Accompany an inspector on any tour of inspection other than that made by an inspector for the purpose of investigating an accident’

**Section 7 Resources**

**[Describe here details of the resources provided by the site or service in place or required to achieve implementation of the safety management programme in terms of time, people and finance, to ensure the management of safety, health and welfare of staff, service users and visitors]**

**Suggested Wording**

‘It is necessary to expend resources in order to achieve the implementation of the safety management programme. This takes the form of personnel, time and finance. **[Insert name]** will identify resource requirements to maintain the safety management system through the risk assessment process. Where controls are identified through the risk assessment process that cannot be implemented locally, the risk and required resources are escalated to senior management through the appropriate channels’. **[Detail the resources expended on OSH and describe the escalation process and how this links with the service planning process]**

**Section 8 Distribution/Access to the Safety Statement**

**Suggested Wording**

‘The Safety Statement is available to all employees and others who may also require access to it e.g. contractors/agency staff.

The master copy of the Safety Statement is held by **[insert detail].** Controlled copies of Safety Statement will be issued by personnel as specified on the distribution list.

When making changes to the Safety Statement and to ensure that each copy of the document contains records of all changes **[insert name]** will ensure that all circulated Safety Statements are removed and will issue new revised documents with the appropriate changes. The revision number and date of revision will be recorded.

This Safety Statement will be brought to the attention of all new employees and to existing employees at least annually and following any amendments **[insert details of how this will be achieved locally]**. It will also be brought to the attention of non-employees who may be exposed to specific risks in the workplace (e.g. contractors)

This Safety Statement will be brought to the attention of the above persons in a form, manner and as appropriate, language that will be understood’.

**Section 9 Revision of the Safety Statement**

**Suggested Wording**

‘This Safety Statement will be reviewed annually or when there has been a significant change in the matters to which it refers such as legislative, organisational changes, there is another reason to believe that the Safety Statement is no longer valid, or a HSA inspector in the course of an inspection, investigation, examination, or inquiry directs that the Safety Statement be amended’.

**Section 10 Measuring Performance**

**[Detail the arrangements to measure, monitor and evaluate Health and Safety Performance to include:**

* **Site or Service Objectives (local KPIs)**
* **National Health and Safety KPIs**
* **Health and Safety Quality Improvement Plans (QIPs)]**

**Section 11 Department / Unit / Service or Discipline Safety Statement and Risk Assessments**

**Introduction**

This is the **[Department / Unit / Service or Discipline Safety Statement and Risk Assessments delete as appropriate] for [Insert service/location/facility]**

Provide:

* A brief description of the activities within the Department / Unit / Service or Discipline
* Details of the disciplines of staff working within the area
* The name and job title of the Line Manager including their signature
* Include all relevant up to date work environment and work practice risk assessments as appropriate e.g.
* Physical Agents Risk Assessment (e.g. work environment, manual handling, DSE, electricity, radiation, noise, slips, trips and falls, working at height, driving for work, security, lone working, management of money, night workers, sensitive risk groups)
* Biological Agents Risk Assessment to include exposure to sharps, legionella, COVID-19
* Chemical Agents Risk Assessment to include hazardous chemicals, medical gases and bottled gas
* Psychosocial Risk Assessments (e.g. work-related stress, aggression and violence)

**Appendix 4- Template COVID-19 Response Plan**

## **Section 1. COVID-19 Policy Statement**

## The management[[5]](#footnote-5) of *[Insert the name of the site]* is committed to providing a safe and healthy workplace for employees and others affected by our activities. To support this commitment, we have developed the following COVID-19 Response Plan. All senior managers, line managers and employees are responsible for the implementation of this plan and a combined effort will help contain the spread of the virus.

We will:

* Continue to monitor our COVID-19 response and amend this plan in consultation with our workers
* Provide up to date information(in a form, manner and language that will be understood by all) to our employees on the Public Health advice issued by the HSE and Gov.ie
* Display information on the signs and symptoms of COVID-19 and correct hand-washing techniques
* Appoint a COVID-19 Response Manager who will provide governance and support to the Lead Worker Representative(s)
* Provide an adequate number of trained Lead Worker Representative(s)[[6]](#footnote-6) (by agreement) who are easily identifiable and put in place a reporting system
* Inform all workers of essential hygiene and respiratory etiquette and physical distancing requirements
* Adapt the workplace to facilitate physical distancing
* Keep a log of contacts / group-work, etc. to help with contact tracing
* Have all employees attend an induction / familiarisation briefing
* Develop a procedure to be followed in the event of someone showing symptoms of COVID-19 while at work or in the workplace and include specific measures for dealing with an outbreak of COVID-19
* Provide instructions for workers to follow if they develop signs and symptoms of COVID-19 during work
* Review cleaning arrangements in line with government advice

All employees will be consulted on an ongoing basis and feedback is encouraged on any concerns, issues or suggestions. This can be done through the Lead Worker Representative(s) and or Safety Representative(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_ *[Insert name(s)]*

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Responsible Person (most Senior Manager)**

## Section 2 - Responsible Persons

The following persons have been identified to help ensure implementation of the COVID-19 Response Plan.

*[Insert the name of the COVID-19 Response Manager and the Lead Worker Representative(s)/ Safety Representative(s)]*

The above named persons have agreed to take on the responsibilities as outlined below:

**Role of the COVID-19 Response Manager[[7]](#footnote-7)**

1. Oversee compliance with the requirements of the Return to Work Safely Protocol
2. Ensure areas of non-compliance are escalated to an agreed Senior Manager *[Insert the name of the Senior Manager]*
3. Ensure an employee contact log is maintained
4. Ensure emergency plans and first aid procedures are reviewed and updated
5. Facilitate the appointment of a Lead Worker Representative(s) (LWR) for each site *(Number(s) to be proportionate to the workplace[[8]](#footnote-8)[[9]](#footnote-9))*
6. Provide the LWR(s) with information and training in relation to their role
7. Ensure LWR(s) receives induction prior to their return to the workplace
8. Consult with the LWR(s) and Safety Representative(s) on the implementation of control measures
9. Agree a means of regular communication with the LWR(s)
10. Agree with the LWR(s) the type and frequency of COVID-19 inspections

**Role of the Lead Worker Representative[[10]](#footnote-10)**

1. Undertake the required training
2. Work collaboratively with the employer to ensure, so far as is reasonably practicable, the safety, health and welfare of employees in relation to COVID-19
3. Promote good hygiene practices such as washing hands regularly and maintaining good respiratory etiquette along with maintaining social distancing in accordance with public health advice
4. To assist in monitoring adherence, carry out inspections at a frequency and type agreed with the COVID-19 Response Manager
5. Assist in keeping fellow employees up to date with the latest COVID-19 advice and promote good hygiene practices, good respiratory etiquette and social distancing in accordance with public health advice
6. Escalate areas of non-conformity to the COVID-19 Response Manager
7. Consult with fellow employees, raise their concerns and provide timely feedback
8. Share relevant information with the Safety Representative(s)

Note: See Appendix 1 for Template Poster for identifying the COVID-19 Response Manager and Lead Worker Representative, which should be completed and displayed in prominent locations at each workplace.

### Section 3 - Return to Work – Planning and Preparing

In this section of the COVID-19 Response Plan detail the measures in place for the safe operation of the workplace to include those workplaces that have not been in use or have had reduced usage for a number of weeks to include:

**Suggested wording**

*“In planning for the safe return we have:*

* *Updated Safety Statement [insert date and reference number]*
* *Reviewed and revised all risk assessments*
* *Conducting additional COVID-19 related risk assessments to include [detail what additional risk assessments have been conducted]*
* *Developed a plan for dealing with suspected cases of COVID-19 to include the specific measures for* dealing with an outbreak of COVID-19 *[detail where this can be located]*
* *Implemented the national Pre-Return to Workplace Form [detail where this can be located]*
* *Appointed a Lead Worker Representative(s) (reference section 2 above)”*

### Section 4 - Control Measures

In this section of the COVID-19 Response Plan document the control measures/arrangements being implemented to prevent or minimise the spread of COVID-19 in the workplace. The arrangements to facilitate compliance are required to be documented under Section 4 Hazard Control Service Arrangements of your Site or Service Safety Statement (Note: this can be facilitated by cross referencing your COVID-19 Response Plan under Section 4 of the Site or Service Safety Statement). For further advice and support please see <https://www.hse.ie/eng/staff/safetywellbeing/>

**Suggested wording**

*“We are implementing the following additional specific arrangements [detail the specific arrangements for each control measure below]:*

* *Working from home where possible (as per Government Resilience and Recovery 2020-2021 : Plan for Living with COVID-19, ,*
* *Hand hygiene*
* *Respiratory hygiene*
* *Physical distancing*
* *Minimise face to face interactions where appropriate (by making use of technology to communicate)*
* *Physical barriers where social distancing is not possible (to be considered as part of hierarchy of controls)*
* *Travel to work and travel for[[11]](#footnote-11) work (Please see ‘*[*HSE Safe Driving for Work Policy, 2018’*](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/safe%20driving%20for%20work%20policy%202018.pdf)*,*  [*‘Guidance on Staff travel during COVID 19 Outbreak - Things to consider when you and your employees are to engage in travel’*](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/guidance-on-staff-travel-during-covid-19-outbreak.pdf) and [*Risk Assessment Prompt Sheet, ‘Staff Travel during COVID 19 Outbreak’*](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/safetystatementsandriskassessments.html)*, see:* <https://www.hse.ie/eng/staff/safetywellbeing/>)
* *Use of PPE where required in line with: [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/Current%20recommendations%20for%20the%20use%20of%20Personal%20Protective%20Equipment.pdf)*
* *Wearing of face masks / face coverings in line with HPSC guidance*
* *Cleaning*
* *At-risk workers ( very high risk (extremely vulnerable) and high risk )*
* *Visiting Contractors / Others*

**The following paragraph provides sample wording to document the control measures/ arrangements in place with regard to hand hygiene.**

***Hand Hygiene***

*“Basic infection prevention control measures are being implemented within [Insert the name of the site]* *at all times. Staff are required to complete the HSElanD modules on how to perform hand hygiene. (Certificate of completion required)*

*Staff are instructed to wash their hands for at least 20 seconds with soap and water frequently throughout the day, but especially at the beginning and end of their shift, prior to any mealtimes and after using bathroom facilities*

*All visitors to [Insert the name of the site]* *will be required to wash or sanitise their hands prior to or immediately upon entering the facility. Hand-sanitiser dispensers are placed at entrances and locations so they can be used for hand hygiene in place of soap and water, as long as hands are not visibly soiled.”*

*[Describe how necessary handwashing and/or sanitiser facilities will be provided, supplied and maintained, and that staff will be allowed to perform handwashing to meet this precaution]*

### Section 5 - COVID-19 Induction training

In this section, provide details of the COVID -19 Induction Training (i.e *COVID - 19 Staff Induction training on HSELand and local induction)* in place and how it will be brought to the attention of staff for completion prior to returning to the workplace.

**Suggested wording**

*It is the responsibility of every employee to complete the COVID - 19 Staff Induction training on HSELand and provide the Line manager with a certificate of completion.*

*Each Line Manager will then take an individual or groups of employees through the 'COVID- 19 Returning to the Workplace Safely Prompt Sheet’ and the associated documentation to include:*

* *Updated Safety Statement*
* *Reviewed and revised risk assessments to include any additional COVID-19 related risk assessments*
* *The COVID -19 Response Plan*
* *The plan for dealing with a suspected case(s)*
* *Contact log*
* *Organisational, physical space and patient flow measures*
* *Revised business continuity plan*
* *Relevant HR/OSH/ GDPR PPPGs e.g. absence, sick leave*

**Resources / Additional Information**

Please refer to the following link for up to date information and guidance:

<https://healthservice.hse.ie/staff/coronavirus/safety-in-the-workplace/managing-employees-return-to-work-safely1.html>



**COVID-19 Response Poster**

|  |  |
| --- | --- |
| **Employer Name:** |  |
| **Workplace Address:** |  |
| **Senior Manager (Name and Contact Details):** |  |
| **Lead Worker Representative / Safety Representative (Name and Contact Details):** |  |
| **Number of Employees:** |  |

## 

1. Please note this cover does not require printing for every Risk Assessment [↑](#footnote-ref-1)
2. Note - This record can be held electronically [↑](#footnote-ref-2)
3. *Responsible Person i.e. Most Senior Manager with responsibility for the management of Health and Safety within the site/service* [↑](#footnote-ref-3)
4. Note: A Template Covid-19 Site Response Plan is available on the NHSF website click [HERE](https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/safetystatementsandriskassessments.html) [↑](#footnote-ref-4)
5. Where a workplace is shared by a number of services and there is no single management structure, appointment of the COVID-19 Response Manager will be by collective agreement and documented in the Site Safety Statement [↑](#footnote-ref-5)
6. For further information refer to SN:002:01 Summary of key support roles in the implementation of the HSE Return to Workplace Protocol [↑](#footnote-ref-6)
7. For further information refer to SN:002:01 Summary of key support roles in the implementation of the HSE Return to Workplace Protocol [↑](#footnote-ref-7)
8. Consider factors such as size and number of premises, complexity, number of staff, geographical dispersal, nature of service, etc. (non-exhaustive) [↑](#footnote-ref-8)
9. This role may be assumed by existing Safety Reps by agreement [↑](#footnote-ref-9)
10. For further information refer to SN:002:01 Summary of key support roles in the implementation of the HSE Return to Workplace Protocol [↑](#footnote-ref-10)
11. Driving for work includes any person who drives on a road as part of their own work (not including driving to and from work unless in receipt of travel expenses) either in: • A HSE vehicle, or • their private vehicle, receiving travel expenses from the HSE. [↑](#footnote-ref-11)