

RISK ASSESSMENT RECORD

Area: **Positive Infectious Disease Notification**

Risk Assessment Reference No:127

Assessment Completed by: Mark Hayward

Assessment Date	16/2/21
Review Date	20/12/21

Risk Rating Matrix						
LIKELIHOOD	Very likely	5	10	15	20	25
	Likely	4	8	12	16	20
	Fairly likely	3	6	9	12	15
	Unlikely	2	4	6	8	10
	Very unlikely	1	2	3	4	5
		No injury	First Aid	LTI	Major	Fatal
		SEVERITY				

Risk Evaluation	
01 - 09 = Low	(No further action required)
10 - 14 = Medium	(Urgent action required)
15 - 25 = High	(Immediate action required)

Insert a brief description of the Task, Hazards and Potential Consequences	Insert a brief description of the Risk	Risk Rating Likelihood	Risk Rating Severity	Total Risk rating = L * S	Insert any Recommended Additional Risk Controls 'if required' (Remember ERICP)	Revised Risk Rating L x S = H/M/L
Working Environment <ul style="list-style-type: none"> People working regularly in close proximity to others 	Contamination of shared airspace with possible airborne infectious droplets. Limited control	5	4	20	<p>Where possible arrange working from home. Limit office functions to essential on-site activities.</p> <p>Follow social distancing in all areas when working from home is not possible.</p> <p>Limit break areas to one person per table and limit total number of people in any break area to 1 person per 3 square meters or floor space.</p> <p>Limit total number of people in any enclosed space to 1 per 3 square meters of floor space. (Locker rooms, laundry room, DOR)</p> <p>Restrict flow of people around entrances and exits. Use a dedicated entry and a dedicated factory exit point for all staff.</p> <p>Installation of COVID screens in high impact areas such as packing zones, and back-to-back desks.</p>	Low

					<p>Installation of UV HEPA air purifiers in corridors/rooms with limited air flow. Further air purifiers to be installed in pinch points.</p> <p>Stagger shift start and end times by 30 mins per line.</p> <p>Implement 'Hall Monitor' style crew to control queueing and social distancing.</p> <p>Install exit queue from bakery floor to reduce crossover between arriving staff and leaving staff.</p> <p>Mark floor with safe distance measurements in ground floor corridors.</p> <p>Face coverings MUST be worn in all communal areas up to the Production Hall doorway except when eating or drinking.</p> <p>Shift check that all windows that can be opened to allow ventilation are opened. Increase signage to ensure communication.</p>	
	Contamination from other people	4	4	16	<p>Implement twice weekly full lateral flow testing of all staff that cannot work from home to eliminate asymptomatic spread.</p> <p>Restrict entire site access to non-employees to essential needs only. All non-employees must submit proof of negative test result within previous 48 hours.</p> <p>Ensure strict following of PHE guidelines.</p> <ul style="list-style-type: none"> • Isolate people with infection • Isolate people sharing home with infected people. • Increase hand washing frequency and ensure duration of at least 20 secs. • Ensure distancing wherever possible 	

				<p>Extend packing areas in the factory to allow distancing.</p> <p>Use face visors in all production areas. To be sanitised daily by the wearer.</p> <p>All users of equipment to sanitise their area during the shift and at the end of the shift.</p> <p>Take daily temperature reading of all members of staff at the start of the shift. Isolate anyone with a high temperature. Install upgraded wrist temperature monitor system to include automation of alert to reduce risk of poor temperature control.</p> <p>Non factory-based employees should limit the time in the office is they have to be on site and each function must ensure that the number of people from their area on site is reduced to ensure safe distancing.</p> <p>Conduct meetings via Microsoft Teams wherever practical.</p> <p>Any person showing signs of the symptoms of COVID-19 MUST inform their line manager immediately and be isolated from others.</p> <p>All car sharing must be minimised and all people in the car MUST wear face coverings and have windows open. All drivers to report daily the names of all car sharers.</p> <p>Move white coat cages to queue window area in corridor to reduce use of laundry room.</p> <p>Employing queue barriers outside the building to restrict flow of incoming people. Increase signage to instruct staff of queueing requirements.</p>	
--	--	--	--	--	--

					Restrict flow of exiting staff during end of shift to limit contact points.	
	Transmission through contact surfaces. Standard cleaning routines	3	4	12	<p>Increase daily sanitisation of all contact surfaces to twice a shift. Including those listed below with Iso Propyl cleaner (Anti-bacterial and anti-viral wipes)</p> <p>Door handles/plates Telephone handles Stairwell handrails Keyboards Kitchen/Canteen facilities and equipment Break areas Clocking on areas and equipment</p> <p>Sanitising fogging in all communal areas such as changing/locker rooms, canteens, toilets within the first hour of each shift.</p> <p>Installation of anti-viral push pads and door handle covers.</p> <p>RIFD clock-in cards to be issued to all staff to limit risk from fingerprint point.</p> <p>Each member of staff to sanitise all touch points as they leave the locker rooms.</p> <p>Hairnets and earplugs to be collected before they leave the locker room.</p>	Low
First Aiders	Identify all risk to first aiders	4	5	15	Identify and Isolate infected person.	Medium

	Increased risk of longer-term health implications from treating colleagues with COVID				<p>Ensure Infectious Disease protocol is followed explicitly. Explicit PPE requirements include goggles, visor, gloves and disposable apron.</p> <p>Notify line manager if suspected cross contamination has taken place.</p> <p>Change overalls and wash hands and face with soap and water</p>	
	Performing CPR	3	5	15	<p>Recognise cardiac arrest by looking for the absence of signs of life and the absence of normal breathing. Do not listen or feel for breathing by placing your ear and cheek close to the patient's mouth. If you are in any doubt about confirming cardiac arrest, the default position is to start chest compressions until help arrives.</p> <p>Make sure an ambulance is on its way. If COVID 19 is suspected, tell them when you call 999.</p> <p>If there is a perceived risk of infection, rescuers should place a cloth/towel over the person's mouth and nose and attempt compression only CPR and early defibrillation until the ambulance (or advanced care team) arrives. Put hands together in the middle of the chest and push hard and fast.</p> <p>Early use of a defibrillator significantly increases the person's chances of survival and does not increase risk of infection.</p> <p>If the rescuer has access to any form of personal protective equipment (PPE) this should be worn.</p>	

					After performing compression-only CPR wash hands thoroughly with soap and water	
High Risk People Identify all high-risk personnel	Increased risk of longer-term health implications	4	5	15	Identify and Isolate all staff that are at higher risk Work from home where possible or shield. If not required to shield by medical advice, then close communication with line manager regularly and strict adherence to social distancing and personal measures. Anyone working from home MUST complete a Lone Worker Risk Assessment and discuss with their Line Manager	Medium
Transmission from food waste Hazardous waste from food packaging and containers	Bins are emptied daily but through collated waste.	3	4	12	All food waste to be wrapped and sealed into plastic bags. All bins to be emptied with the bag and double bagged	Low
Transmission via broken skin All cuts and grazes are an entry point for pathogens	First aiders on site	2	5	10	<u>Adherence to existing procedure</u> All cuts to be covered with a plaster Nitrile gloves also to be worn by anyone with a cut or graze to the hands. Daily colleague checking and support	Low

<p>Visitors/Contractors</p> <p>Possibility to spread the infection further or induce new infection</p>	<p>Visitor signing in process and contractor permit to work system</p>	<p>3</p>	<p>4</p>	<p>12</p>	<p>Prohibit all visitors and contractors from entering site unless required for essential site maintenance or services.</p> <p>For essential visitors/contractors ensure COVID health questionnaire is completed and the person is safe to enter site. All questionnaires MUST be reviewed and authorised by an NFF contact before the person is allowed on site. Contractors providing daily services must complete questionnaire on the first visit of the week.</p> <p>Notification sent to all suppliers detailing delivery requirements. SOP issued to warehouse staff.</p> <p>All non-employees coming onto site must present a NEGATIVE test result taken within the previous 48 hours. Lateral Flow testing may be provided in the absence of a PCR test result.</p> <p>All laundry cages must be sanitised before being moved into laundry area.</p> <p>All service contractors MUST fully sanitise their work area once finished.</p>	<p>Low</p>
<p>Other bodily fluids</p> <p>Risk from contamination in high risk areas (toilets)</p>	<p>Cleaned daily</p>	<p>4</p>	<p>5</p>	<p>20</p>	<p>Complete deep clean, spray and wipe all surfaces twice daily with contact anti-viral</p>	<p>Medium</p>

<p>Communication</p> <p>Risk from poor information sharing</p>	<p>Daily Operational meeting and Short Interval Control</p>	<p>2</p>	<p>4</p>	<p>8</p>	<p>Any required update from SMT to be communicated to all line managers</p> <p>Weekly Corona Virus focus group meeting. Increased to daily during any outbreak.</p> <p>Internal communication channels and cascading of messages through line managers will be carried out regularly to reassure and support employees in a fast-changing situation.</p> <p>All communication submitted electronically will also be posted in the canteen and on noticeboards.</p> <p>Line managers will offer support to staff who are affected by Coronavirus or has a family member affected.</p> <p>Following any suspected infection an internal track and trace process must be followed to identify and isolate any close contacts.</p>	<p>Low</p>
---	---	----------	----------	----------	--	------------

ASYMPTOMATIC TESTING

<p>Insert a brief description of the Task, Hazards and Potential Consequences</p>	<p>Insert a brief description of the Risk</p>	<p>Risk Rating Likelihood</p>	<p>Risk Rating Severity</p>	<p>Total Risk rating = L * S</p>	<p>Insert any Recommended Additional Risk Controls 'if required' (Remember ERICP)</p>	<p>Revised Risk Rating L x S = H/M/L</p>
<p>Asymptomatic Testing</p>		<p>2</p>	<p>4</p>	<p>8</p>	<p>Asymptomatic: All subjects are to be advised in advance not to attend if they –</p> <ul style="list-style-type: none"> ○ Have any symptoms of COVID 19. 	<p>Low</p>

<p>Contact between subjects increasing the risk of transmission of COVID19</p>	<p>Transmission of the virus leading to ill health or potential death</p>				<ul style="list-style-type: none"> ○ Live with someone who is showing symptoms of COVID 19. ○ Have been in close contact with someone who has received a positive test result. ○ Have been instructed to self-isolate by the NHS test and trace app. <p>Face coverings:</p> <ul style="list-style-type: none"> ○ Face coverings to be worn by subjects at all times whilst on the premises except for brief lowering at time of swabbing. ○ Compliance with wearing of face covering of all subjects to be visually checked on arrival by reception / security staff. ○ Spares on site to provide to anyone who has forgotten theirs <p>Hand hygiene: All subjects to use hand sanitiser provided on arrival & adherence to this enforced by reception staff. Colleagues who are required to top up supplies within test areas should do so at the beginning of each testing group and when no subjects are present.</p> <p>Physical distancing: Two metre social distancing to be maintained between subjects</p> <ul style="list-style-type: none"> ○ Building and space used within building assessed for occupancy limits – space should be big enough to accommodate the number of stations required and people in the space at any one time ○ Measured floor markings in place where queues form to ensure compliance. ○ A one-way flow of subjects through the building is to be initiated and maintained at all times. ○ Member of staff designated to direct subjects out of the test centre ○ Clear signage used to indicate entrances, exits, traffic routes and waiting areas 	
--	---	--	--	--	--	--

					<p>Subject leaves immediately after sample has been provided and does not wait in the testing centre for result.</p> <p>Cleaning: Regular cleaning of the site including wipe down of all potential touchpoints in accordance with PHE guidance.</p> <p>Limited clutter - chairs only on request; no physical handing of documents to subjects except barcodes and PCR test swab</p>	
Contact between subjects and staff increasing the risk of transmission of COVID19 : <u>Welcome & registration</u>	Transmission of the virus leading to ill health or potential death	2	4	8	<p>Physical Distancing: Two metre physical distancing to be maintained between test technician/registration assistant and subjects. Queuing – A one-way flow of subjects through the building is to be initiated and maintained at all times Face shield, Fluid-resistant (Type IIR) surgical mask (FRSM) to be worn by test technician and registration assistant. These should be disposed of after each session (i.e. before leaving the test centre for breaks or at the end of the working day)</p> <p>Screens are in place where required.</p>	Low
Contact between subject and sampler increasing the transmission of COVID19: <u>Testing assistant and subject during sample taking</u>	Transmission of the virus leading to ill health or potential death	2	4	8	<p>Crowd Control – A system is in place to ensure that only 1 subject is sent to the hatch when testing assistant is ready.</p> <p>Distancing – the subject and test assistant will be 2m+ apart. Subjects will self-sample and test assistant describe the process to the subject.</p> <p>Face coverings – subject keep face covering on until they are ready to take the sample.</p> <p>PPE – (as test assistant is also processing the samples) Test assistant should wear a Fluid-resistant (Type IIR) surgical mask (FRSM), a disposable apron, visor (depending on individual preference) and nitrile gloves when carrying out swab test. Gloves should be replaced after every test has been undertaken including</p>	Low

					<p>processing them, all other PPE replaced after every session unless suspected of contamination.</p> <p>Staff to be trained in the donning and doffing of PPE. Please refer to the SOP.</p> <p>Sampling – The subject will be informed that the swab may sometimes initiate the gag reflex and they should use a sick bowl for any expectoration or vomit and guidance will be given regarding what to do with this if used. This should be disposed of as described in Bodily Fluid section above and appropriate hygiene procedures followed.</p> <p>Hand Hygiene – Mandatory use of hand sanitiser before and after taking the sample.</p>	
Contact between sample and test centre runner increasing the transmission of COVID19: <u>Sample transport</u>	Transmission of the virus leading to ill health or potential death	2	4	8	<p>The testing and processing operative is the same person – PPE as described in Testing Centre SOP</p> <p>Sample handling by colleague collecting - Mandatory use of nitrile gloves when handling samples.</p> <p>The unprocessed swabs will not be taken from one part of the site to another</p> <p>The testing area and processing areas are set up through the window</p>	Low
Contact between samples and sample testers increasing the transmission of COVID19: <u>Sample processing & analysis.</u>	Transmission of the virus leading to ill health or potential death	2	4	8	<p>The testing and processing operative is the same person and should wear a Fluid-resistant (Type IIR) surgical mask (FRSM), a disposable apron, goggles/visor (depending on individual preference) and nitrile gloves. Gloves should be replaced after every test processed, all other PPE replaced after every session unless suspected of contamination.</p> <p>Processing operative to be trained against the SOP by Black and Banton</p>	Low

					<p>Processing operative to clean sample prep areas with disinfectant after each sample has been processed.</p> <p>Processing operative to sanitise hands after each session</p>	
<p>Contact between samples and testing facility staff, waste contractors, building facilities staff, increasing the transmission of COVID19: Misclassification or inappropriate disposal of waste <u>Sample disposal and waste disposal</u></p>	<p>Transmission of the virus leading to ill health or potential death</p>	2	4	8	<p>Guidance from the Regulatory Bodies (Environment Agency, Department of Health and HSE), states that while all waste (excluding the test packaging) must be treated as Healthcare waste it not infectious and therefore must not be treat as Clinical Waste. Furthermore, the Regulatory Bodies have confirmed that reagents within the testing swabs effectively inactivate the virus.</p> <p>The following categorisation of waste stream must be used:</p> <ul style="list-style-type: none"> • Packaging – General Waste – Black Bags – General Waste Bins • Used Swabs – Non-hazardous healthcare waste – 18 01 07 - White Biobins • Completed tests - Non-hazardous healthcare waste - 18 01 07 – Yellow unmarked bags • PPE – Offensive Waste – Tiger Stream – Yellow and Black Bags • Bodily Fluids – Offensive Waste – Tiger Stream – Yellow and Black Bags • Mop heads and other generic items used for cleaning - General Waste – Black Bags – General Waste Bins <p>Waste will be removed from the testing bays by the Testing Assistants or Cleaning Teams and placed in the corresponding skip or bin outside of the building. The exit route for the building and skip location will be noted on the site plan.</p> <p>The operative should sanitise their hands after removing any waste from the building.</p>	
<p>Indirect contact transmission associated</p>	<p>Transmission of the virus leading to ill health or potential death</p>	2	4	8	<p>High touch surfaces to be cleaned at least twice per day, one of these being at the end of the day</p>	Low

<p>with contaminated surfaces and objects. <u>Cleaning procedures</u></p>				<p>Cleaning of high touch surfaces, hard surfaces, chairs, floors etc scheduled to take place when the activity is no longer being conducted i.e. in between sessions and at the end of the day. Cloths, mop heads etc to be used and cleaned using approved chemical after each use.</p> <p>Space used should not have a carpeted floor – floor should be one that can be easily cleaned in case of spills</p> <p>At the test station, surfaces that the subject has touched should be cleaned in-between subjects by the test subject.</p> <p>If there is a spillage or if the sick bowl has been used at a testing station, the station should be taken out of use until this area has been cleaned thoroughly by Black and Banton Test Assistants. Assistance to be given by site hygiene team</p> <p>PPE: Cleaning staff should wear disposable gloves, disposable plastic apron, fluid-resistant (Type IIR) surgical mask (FRSM). Eye protection (goggles or visor depending on individual preference) will be used in testing bays.</p> <p>Desks, reception areas, phones and computers etc should be wiped down by the colleagues using them after their shift.</p>	
<p>Aerosol transmission (<5 micron diameter) may play a role under some conditions such as poorly ventilated, crowded environments.</p>	<p>Transmission of the virus leading to ill health or potential death Risk increases with time spent in the same shared air and proximity of the infectious person particles</p>	2	4	<p>Ventilation of building and space to be used to be checked for suitability and ventilation systems will not recirculate. There is a ventilation strategy for the centre and this will be followed.</p> <p>Additional Anti-Viral air filtration units to be used within testing facility.</p>	<p>Low</p>

					Occupancy and 2m distancing measures described above used to mitigate against crowding and face coverings/masks will be worn. Doors/ opened periodically to increase fresh air circulation.	
Incorrect result communication	Wrong samples or miscoding of results	2	4	8	2 identical barcodes are provided to subject at check in The subject registers their details to a unique ID barcode before conducting the test Barcodes are attached by trained colleagues at the sample collection bay Barcodes are checked for congruence at the analysis station 1 and applied to Lateral Flow Device at this station The third barcode is attached to the test register	Low
Damaged barcode, lost LFD, failed scan of barcode	Orphaned record on registration portal & No result communicated to individual	2	4	8	Registration and testers to identify damage and additional equipment to be provided. All failure points to be recorded on the Issue Log Subjects to contact their shift manager for a retest who have not received a result within 12 hrs of registration. Validation of successful test from the Test Register may be used.	Low
Exposure to the extraction solution in kit - NA_2HPO_4	These components do not have any hazard labels associated with them, and the manufacturer states that there are no hazards anticipated under conditions of use as described	2	4	8	PPE used for sample processing adequate for chemical hazards Environmental: do not let product enter drains	Low

<p>(disodium hydrogen phosphate), NaH₂PO₄ (sodium phosphate monobasic), NaCl (Sodium Chloride)</p>	<p>in other product literature. This is the case for exposure to: eye, skin, inhalation, ingestion, chronic toxicity, reproductive and developmental toxicity, carcinogenicity, and medical conditions aggravated by exposure.</p>				<p>Spillages: wipe surfaces which the solution has been spilt on and dispose of cleaning material in line with the waste disposal procedures. This would be offensive waste.</p> <p>Do not use if the solution has expired</p> <p>Training to be provided in handling potentially biohazardous samples, chemicals and good lab practice.</p> <p>Adhere to guidelines in these training procedures to prevent improper handling.</p> <p>Follow procedures on the MSDS form provided by Innova to mitigate against inhalation, skin contact or ingestion of these chemicals.</p>	
<p>Use of Stairs, uneven floor surfaces</p>	<p>Slips, trips and falls resulting in potential injury of staff or subject</p>	<p>2</p>	<p>4</p>	<p>8</p>	<p>Housekeeping – Clear housekeeping standards, areas have been cleared of unnecessary equipment or chairs / tables.</p> <p>Signage – Clear demarcation of the floors for queuing, barriers if necessary, signage and instruction for those attending the testing facility</p> <p>Floor cleaning to take place outside of testing sessions</p> <p>Walkways are maintained and designed according to legal requirements.</p> <p>Any spillages will be cleaned as soon as possible.</p> <p>Wet floor signs displayed</p>	<p>Low</p>

Violence from subject	Violent behaviour if subject has been queuing a while or is feeling frustrated at the process	2	4	8	<p>Testing staff briefed in techniques to dissipate violent or aggressive behaviour.</p> <p>There will be several colleagues available to assist at all times and contact numbers to be posted within the testing centre</p>	Low
Electrical safety / plant & equipment maintenance, Defective electrical equipment	Electrocution of staff or subjects, potential to cause fire	2	4	8	<p>All portable electrical equipment which is to be used is subject to PAT testing and prior to use checks as per the Company Guidelines.</p> <p>All equipment used must be in good working order with no wires exposed or casings damaged.</p> <p>Any damaged or defective equipment must be taken out of use immediately and reported as per local instructions.</p>	Low
Use of shared equipment	Transmission of COVID-19 VIA Touch points	2	4	8	Shared equipment kept to a minimum, if necessary (e.g. computers) then this must be cleaned before and after use by the user.	Low
Fire or transmission of covid-19 during a fire evacuation	<p>Transmission of Covid-19 due to physical distancing measures being compromised during and after building evacuation following the activation of a fire alarm.</p> <p>Exposure to fire or smoke as a result of lack of fire evacuation management or individuals not following evacuation procedures.</p>		4	8	<p>Adequate number of fire wardens/marshals to support the testing site</p> <p>Fire evacuation routes clearly marked</p> <p>Staff to be briefed on location of the fire assembly point for the building</p> <p>Staff and subjects to evacuate promptly if an alarm sounds, maintaining physical distancing where possible</p> <p>Following the evacuation, all building users should proceed to the designated Assembly</p>	Low

					<p>point whilst continuing to maintain physical distancing measures. If the area starts to become crowded, people should dissipate further if necessary</p> <p>When it is safe to re-occupy the building, all building users should again, make sure that they maintain the recommended physical distance from others</p>	
First aid	<p>Inadequate response to injury of health due to lack of first aid provision</p> <p>First aiders exposed to risks from CV19 due to providing First Aid in the workplace.</p>		4	8	<p>At least one first aider to be available while testing sessions are taking place.</p> <p>First aiders will be provided with additional PPE including surgical mask and an apron.</p> <p>An Automatic External Defibrillator is available on site and in close proximity of the testing centre.</p>	Low
False notification of close contact by test and trace	<p>Impact on workforce availability</p> <p>Impact on mental health</p>	2	4	8	<p>Test and trace app to be switched off when working in the centre</p> <p>Colleagues informed</p>	Low

Additional Control Measures to be implemented <i>(transferred from column 6 of the risk assessment form)</i>	Line Manager responsible for implementing Control Measures	Agreed Implementation Target Date	Actual Implementation Date Completed

<p>This document is to be used to instruct employees and others who may be affected of the appropriate risk control measures when undertaking this task</p>	<p>Task Titled</p>	<p>Risk assessment Reference Number:</p>	<p>Date the Briefing Was Provided</p>
---	--------------------	--	---------------------------------------

<p align="center">Employees Risk Controls Briefing Notes</p>	
---	--

Risk assessment signature sheet

Name	Signature	Department	Date

--	--	--	--