

**NORWICH BIOSCIENCE INSTITUTES
COVID-19 RISK ASSESSMENT AND MANAGEMENT**

DEPARTMENT/ORGANISATION: John Innes Centre (JIC)

Persons Affected:	Workers from JIC, visitors such as contractors
Activities:	Laboratory and support activities
Work Locations:	JIC laboratories, glasshouses and other support areas
Assessor:	Sam Lister
Date:	13.08.20

RISK ASSESSMENT:

1. What are the hazards present from the work activity?

Possible exposure of workers to COVID-19 which may be present in the workplace as a communicable disease which could be distributed by infected persons on site during the current COVID-19 pandemic situation.

2. Consider factors that could affect the workers ability to do work or make them at particular risk from harm whilst at work:

Certain workers may be clinically vulnerable or extremely clinically vulnerable if they have an underlying health condition which may result in them being at higher risk of severe illness from COVID-19. These workers should take extra care in observing social distancing and hygiene and cleanliness measures.

A risk assessment must be conducted for any vulnerable worker who needs to work on site. This must consider whether the work is a critical task for the person to complete, 2m social distancing should be maintained and fresh air ventilation maximised. Additional safety measures should be considered such as; screens or barriers, single person occupancy in rooms, increased hand washing and surface cleaning. This must be formally approved by the Health and Safety team. See General Worker Risk Assessment; <https://intranet.nbi.ac.uk/infoserv/cgi-bin/documents/default.asp?id=58067>

Workers or visitors such as contractors could be at risk of coming into direct contact with a person who is infected with COVID-19. Workers could also be at risk of indirectly becoming exposed to the COVID-19 virus by touching a contaminated surface and then touching their face or ingesting food without effectively washing or sanitising their hands first.

Close proximity working at <2m should be risk assessed and a decision taken on a case by case basis as to whether the work is essential and whether appropriate additional control measures can be included for safe working.

First Aiders may be at increased risk of exposure to COVID-19 when providing first aid assistance. Certain first aid procedures may require a first aider to be closer than the recommended 2m social distancing. See the separate Risk Assessment for First Aiders Treating Potentially Infectious Persons.

3. Existing risk control measures:

Home Working

In the current COVID-19 pandemic situation social distancing must be observed, this may require work rotas for workers on site to avoid overcrowding and some office work may need to be done from home to minimise risk.

Social Distancing Measures

2m social distancing measures are applied as standard for all workers. Rotas are used to minimise the numbers of workers on site and working hours are staggered where possible. If workers need to perform the same task sub-teams of 2 or 3 people who always work together are used.

Restrictions are in place for how many workers can enter an area, with some rooms being single occupancy, this is indicated by signage. If more than one person can use a space working back-to-back or side-by-side is favoured. Face-to-face working is avoided. The number of workers in each area is agreed by the person responsible for the work area.

Movement inside buildings is minimised, outside routes are used where possible. Marking and signage is used to remind workers of social distancing on stairs and corridors. Priority access is in place in some areas. Worker breaks are staggered. Workers are reminded to use handrails for safe ascent and descent of stairs but to not touch their face until they have washed or sanitised their hands. Workers are asked to avoid using the lifts, which are for single occupancy at this time.

Smoking and vaping shelters are designated for single occupancy.

Meetings

Meetings are held virtually where ever possible. Meetings in person are conducted in well ventilated spaces, ideally outside if possible. If meetings are held indoors any windows are opened for fresh air ventilation. 2m social distancing, or 1m with additional measures is observed. If a meeting requires <2m social distancing this is only held in a naturally ventilated space with windows open. Internal rooms are not suitable. Where required there is signage provided to assist with social distancing.

Meeting times are minimised to 1 hour where possible. Longer meetings, interview panels or training are by exception. A 15 minute break is required between bookings to allow attendees to safely leave the room and the next attendees to enter. Attendee numbers are minimised at meetings. Only participants who absolutely must attend a meeting should attend.

The meeting organiser is responsible for checking room layout and that occupancy ensures 2m social distancing and ventilation is adequate. Approved room layouts for furniture and seating positions should be observed, any changes should ensure equivalent COVID-Secure arrangements. The meeting organiser is responsible for ensuring the sharing of pens and documents and other objects is avoided and that hand sanitiser is provided. Tables, shared equipment and touchpoints should be cleaned before and after use.

It may be necessary to arrange other measures for the room such as screens or face masks if social distancing or fresh air ventilation is not adequate. The arrangements required for specific meetings should be determined by assessing the meeting format, the meeting location and the number of persons attending.

The meeting organiser is also responsible for checking if any vulnerable workers are attending. If vulnerable workers are attending additional measures may be required, such as ensuring the person sits directly by an open window or door and not in the middle of a room. A face mask or covering may also be worn if appropriate.

Hygiene and Cleanliness

Workers are reminded to wash their hands regularly and thoroughly for at least 20 seconds and to dry

hands thoroughly. Guidance from NHS is provided; <https://www.nhs.uk/live-well/healthy-body/best-way-to-wash-your-hands/>

If hand washing facilities are not available hand sanitiser is provided. Instruction is given that hands should be washed when arriving at work, when leaving to go home, before and after meal breaks, before and after using the toilet. Hand sanitisers are provided throughout work areas and workers are reminded to use them if washing facilities are not available.

Workers are reminded to avoid touching their face, to catch coughs and sneezes in a tissue and to immediately safely discard it, then wash or sanitise their hands.

Workers are reminded to regularly clean and disinfect their work stations and work surfaces, local touchpoints, equipment, tools, phone etc. The sharing of equipment and tools is minimised and decontamination of surfaces is conducted after every use. The Cleaning team provide enhanced cleaning and touchpoint disinfection in the buildings.

Health Monitoring

Workers are asked not to come to work if they, or anyone they live with has a high temperature or a new, continuous cough, or a loss or change in the sense of smell and taste. In this instance workers should stay at home for 10 days from the onset of symptoms.

Personal Protective Equipment

Workers are provided with the appropriate Personal Protective Equipment for the work tasks they need to perform. This is determined by risk assessment.

There is additional provision of surgical masks and non-laboratory gloves that are provided for worker comfort and re-assurance whilst at work, these are for when workers are not carrying out duties involving hazardous work materials. Workers are given guidance on how to safely put on and remove surgical masks;

https://www.who.int/docs/default-source/epi-win/how-to-use-mask-v0-1-print.pdf?sfvrsn=64ba1493_2

Vehicles

Vehicles are designated for single occupancy. If two people must share a vehicle additional control measures are required. Windows are kept open for good ventilation and each person stays separated as much as possible with one in the front and one in the back. Surgical face masks may be worn for additional protection. Where possible the same person(s) are allocated the same vehicle. Hand sanitiser and a disinfection kit are supplied for each vehicle. Workers clean hands before and after using the vehicle. Key touchpoints in the vehicle are surface disinfected before and after use.

First Aiders and Emergencies

In an emergency help is summoned by phoning 333 on an internal phone or 01603 450333 from a mobile.

First Aiders may be at increased risk due to social distancing and the potential treatment of an infectious person. First Aiders are instructed to follow the 'NBI Procedure for a Potentially Infectious Person at Work'. This details the need to maintain a 2m safe distance where possible and the use of emergency response kits for treatment of an infectious persons. It also explains implementing safe strategies, isolation of any person showing COVID-19 symptoms and measures to minimise contact.

Training has been provided for First Aiders in the hazards of COVID-19, safe procedures including the correct donning and removal of PPE. This is fully detailed in the; 'NBI Procedure for a Potentially Infectious Person at Work';

First Aiders are instructed not to give mouth to mouth resuscitation and if CPR is required they should only give 'chest only compressions'.

Disinfection and Waste for First Aid Activities

Detailed disinfection, hand hygiene and waste handling processes have been prepared for first aider activities as advised by Public Health England and following Local Rules for waste handling. Any waste or contaminated items such as PPE that require incineration following treatment of a suspected COVID-19 case are placed in sealed clinical waste bags for disposal by a registered waste contractor.

Disinfection of affected surfaces uses chlorine based disinfectants (sodium hypochlorite) as these are recognised as being the most effective. Disposable equipment is used for cleaning where possible and this is discarded as clinical waste after cleaning is completed.

1. Prepare a working concentration of 2,500ppm active chlorine
2. Use 25ml of the 10% sodium hypochlorite from Stores (01032500) in 1 litre of water. Leave for a minimum contact time of 10 minutes

Bioguard disinfectant spray can be used for fabric and surfaces that sodium hypochlorite would damage by the bleaching action

On completion of providing first aid treatment for a potentially infectious person First Aiders safely remove PPE according to the 'NBI Procedure for a Potentially Infectious Person at Work';

4. *Level of risk:*

Low:

X

Moderate:

High:

FURTHER ACTION REQUIRED TO CONTROL RISK

Regular review of the Public Health England website, Government websites and other health and safety professional bodies to monitor daily updates for infectious disease guidance. The risk assessment and control measures will be updated in response to changes in Government guidance.

The risk assessment will also be updated in response to any local changes or new information of relevance to the assessment.

Any potentially higher risk work activities that require workers to be within 2m of others will be risk assessed and a decision taken on a case by case basis as to whether the work is essential and whether appropriate additional control measures can be included for safe working.

VALIDATION - This is a suitable and sufficient assessment of the risks. The risk assessment should be reviewed regularly and if there are any changes or problems.

Name: **Samantha Lister (Head of HSEQA)**

Date: **13.08.20**

Review date: **12.08.21**

JIC Safe Working Requirement document provides full details of site arrangements.