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| *Bolton Council Mono RGB 300dpi for templates* | **COVID 19** Return to work flowchart for individual staff assessments |  |

 *This document is supplementary to the COVID 19 Early Education & Childcare Support Pack. It is important that employees (particularly those who have been identified as at increased risk from COVID 19 are individually risk assessed. This document is based on advice issued to the maintained schools sector and has been adapted as tool for Early Education and Childcare Settings which they may wish to use.*

1. Manager to speak to any individual employee in a confidential setting to discuss issues / find out why employee does not want to come back to the workplace, i.e the root causes including ongoing medical issues, general anxiety, general reassurances, childcare issues, misinformed, social distancing issues, hygiene concerns. It is also important to risk assess / discuss returning to the workplace with people from Black, Asian, and Minority Ethnic (BAME) communities due to the increased risk this population appear to have from COVID19.
2. Determine if individual has an existing medical problem that prevents them from returning e.g. fit note, shielding letter, other prescribed conditions, or other issues which may need to be considered.
3. If required seek advice from your Health and Safety provider, HR provider, Occupational Health provider, Corporate Property Provider, Public Health Professionals etc.
4. In any one to one meeting and discussions with individual - keep a thorough and details written record of all discussions and agreements (which can be used in the R/A).
5. Record all staff information on the Early Years Education and Childcare settings individual risk assessment template and share with individual. Keep a record of this for when the individual returns to their workplace.
6. Review the Individual Risk Assessment on an on-going basis to ensure necessary controls are in place.

**Additional support**

The Start Well Service is here to help with advice regarding the Early Years Foundation Stage and can assist with interpreting Government guidance, you can reach us on 01204 33 8149 or via email at StartWell@bolton.gov.uk. For specific Health and Safety advice you **should continue to contact your own H&S Competent Person(s) for support.**

**Document 4 – Individual Risk Assessment**

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| Bolton Council Mono RGB 300dpi for templates | **COVID 19 - Generic Risk Assessment****STAFF RETURNING TO WORK** |  |

**IMPORTANT PLEASE READ -** This generic risk assessment template has been developed to help you manage the re-population of staff who may need support back into the environment. It is based on current advice from the Government. This assessment covers some of the main considerations’ managers, and the individual must consider and touches on how you can support their wellbeing.

**ACTION YOU NEED TO TAKE** – Read through this template and use it to help you complete a specific risk assessment for the individual. Add hazards relevant to the person and activity. Make changes to this document as you work through it, it will become a tool to plan the action you need to take. It can also help you identify who you need support from (CPS/TU/Cleaning Services/HSW/HR) and where further action is needed. Remember to add risk ratings in box 5 when your assessment is complete.

**\*If new Government or Public Health England information or advice comes out this document will be amended as appropriate.**

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| **1.What are the hazards?**e.g. slip/trip hazards, electricity, manual handling, work equipment, stress etc. | **2.Who might be harmed and how?**e.g. staff, service users, visitors etc... and likely injury e.g. bruises, muscle strain, fracture, poisoning, mental health, etc. | **3.What are you already doing to control the hazard?** | **4.What further action or additional controls are required** (if necessary) | **5.Risk rating**(after control measures) | **6.Action by who** | **7.Action by when** | **8.Date completed** |
| Individual returning to work is in a clinically extremely vulnerable or clinically vulnerable category or they live with person(s) shielding.  | Individuals identified in these categories - exposure to COVID19 could result in them becoming fatally unwell, very unwell, unwell or could pass COVID19 to shielding person(s) at home. | * Manager to work the individual, to identify the vulnerable category (seeking advice from HR Service where applicable). The manager must then follow current government guidance about whether they can return to work and the level of support needed.
* Employees must be made aware that they should inform their managers immediately if their circumstances change e.g. if they or someone they live with becomes vulnerable.
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| Individual returning to work is BAME. | Individuals identified in these categories - exposure to COVID19 could result in them becoming fatally unwell, very unwell, unwell. | * Manager to work the individual, to identify the vulnerable category (seeking advice from HR Service where applicable). The manager must then follow current government guidance about whether they can return to work and the level of support needed.
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| Asking individuals to come into work when they could carry out that activity in full at home. |  | * Currently, the government requires employers to enable individuals to work at home where they can.
* Many posts in the Setting require staff to work from a specific workplace. The manager needs to demonstrate why this individual needs to attend a workplace to complete their tasks.
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| Commuting to and from the office and getting onto site. | Not maintaining 2 metre recommended social distancing resulting in an increased risk of infection. | * Managers need to consider how individuals will arrive at and leave work. (Please see some examples below, add, amend, delete as needed).
* Wherever possible individuals should walk or use their own transport e.g. cycle, motorbike, car etc. This will facilitate social distancing rather than the use of public transport.
* Managers may consider staggering start and finish times to support staff and reduce the numbers on public transport.
* Managers to discuss with staff, how they are travelling to and from work and how this might impact start and finish times.
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| Individual given tasks which could lead to exposure to COVID19 | Risk of infection. | Manager to identify the individual’s specific tasks and how they will be safely completed.Consider:* How 2m social distancing would be maintained.
* Any activities which should not be carried out.
* Hygiene procedures
* Emergency arrangements
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| Communal areas, welfare facilities or kitchen areas do not allow for social distancing or are not kept hygienically clean. | Setting – (legal/financial/reputational risk) not following government social distancing and hygiene guidelines. Staff – infected because of closer working, surfaces/touch points etc. spread virus. Staff loose trust and confidence. | Manager to identify how the individual can safely use communal areas, welfare facilities etc. (Please see examples below – add, amend or delete points as needed).* Kitchen areas, toilets, break out areas to maintain minimum social distancing.
* Are your current systems suitable for their use?
* How will they use toilets to maintain distancing?
* Where should they eat lunch?
* Ensure that cleaning regime has been increased.
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| Wellbeing issues / concerns. | Staff - Stress* Not aware of the support available.
* Lack of trust and confidence in the organisation.
* Risk of infection

Setting – (legal/financial/reputational risk) not following government social distancing guidelines.  | Managers to discuss concerns with staff prior to their return and try to answer them or provide support.In addition:* Encourage staff input on how we can manage this phase better.
* Remind staff of any Employee Assistance Programme and provide their telephone number (where in place).
* Review working procedures weekly, initially.
* Raise issues with the Settings Health and Safety Competent Person or provider.
* Develop and discuss Health, Safety and Wellbeing guidance with your staff.
* Hold daily catch ups / briefings.
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| Lack of soap, water, towels etc. | Staff – infected as a result of poor hygiene. Staff loose trust and confidence. | * Adequate supply of soap, water and if needed hand sanitiser in place.
* Posters reminding staff of need for good hygiene.
* Regular reminders of good hygiene e.g. sanitiser is not a substitute for hand washing, at team catch ups and briefings.
* Provide hand sanitisers at all high contact points – areas such as entrances, desks, rest areas, toilets etc Ensuring any hand sanitiser is out of reach of young children.

Provide wipes to allow staff to keep their areas clean hygienically clean. |  |  |  |  |  |
| Cleaning regime not adequate to maintain hygiene or safe working practices for the number of persons on site.  | Staff – infected as a result of poor hygiene.Staff lose trust and confidence. | * Ensure increased cleaning regime in shared common areas (entrance, hallways, handles, switches etc) is in place and maintained.
* Remind staff of the importance of good hygiene.
* Provide hygiene wipes to clean down desks/handsets etc and ensure wipes are disposed of immediately into waste bins and hand washing follows.
* Arrange for a deep clean to be carried out, if necessary.
 | Ensure suitable provisions are in place to deal with discarded PPE worn by cleaners. |  |  |  |  |
| Member of staff exposed to others with COVID19 at work or becomes unwell with COVID19 symptoms.  | Staff – infected because of poor hygiene, or lack of social distancing.Delay in manager taking action, Potential for panic amongst individuals in the office.  | Managers must be familiar with the procedures to follow should a member of staff be exposed to or display COVID19 symptoms.  |  |  |  |  |  |
| First Aid/Fire Warden provision (including those with additional requirements). | Setting does not meet its legal obligations.Staff at risk of injury or stress due to delayed or inadequate fire warden or first aid assistance. | * Managers to ensure a plan is put in place for deployment of fire evacuation and First Aid provision.
* Managers to discuss with staff who may be returning to work with additional needs so that evacuation (PEEPS) plans and support can be identified.

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| **CATEGORIES OF LIKELIHOOD** |
| **Highly Likely** | Expected to happen/reoccur, possibly frequently. |
| **Possible** | Might happen/reoccur at some time depends on circumstances. |
| **Unlikely** | Not expected to happen/reoccur but possible in certain circumstances. |
| **Very Unlikely** | Would only occur in very exceptional circumstances. |
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| **CATEGORIES OF CONSEQUENCE SEVERITY** |
| **Catastrophic** | Incident could result in one or more fatalities.  |
| **Major** | Major injury resulting in incapacity, hospitalisation >24 hours. |
| **Significant** | Injury requires attention of a Doctor or Hospital treatment or hospitalisation <24 hours. |
| **Minor** | Small cut, bruise, abrasion, basic first aid treatment provided. |
| **Negligible** | Some discomfort, self-help. No treatment required. |

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| **RISK CLASSIFICATIONS** |
| **A** | **Unacceptable risk,** requires immediate attention. Work should not be started or continued until the level of risk has been reduced. |
| **B** | **High risk,** requires immediate attention. Control measures must be identified and put into place as soon as possible.  |
| **C** | **Medium risk,** requires attention as soon as possible. The risk should be only be tolerated in the short term and only when further control measures are being planned and introduced, Timescales must be short.  |
| **D** | **Low risks,** confirm that there are no low/no cost solutions which may eliminate/ reduce the risk further. |
| **E** | **Trivial risk,** no further action required but review at regular intervals to ensure controls remain effective. |

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| **RISK RATING** |
|  | **Highly Likely** | **Possible** | **Unlikely** | **Very Unlikely** |
| **Catastrophic** | **A** | **A** | **B** | **E** |
| **Major** | **A** | **B** | **C** | **E** |
| **Significant** | **B** | **C** | **D** | **E** |
| **Minor** | **C** | **D** | **E** | **E** |
| **Negligible** | **E** | **E** | **E** | **E** |

**Please Ensure all Parties Sign Below to confirm the information detailed above is a true and accurate record of discussions;**

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|  | **Printed** | **Signed** | **Dated** |
| **Employee Name** |  |  |  |
| **Manager Name** |  |  |  |

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| **ADDITIONAL COMMENTS**  |