





Briefing Note – August 2020

Guidance for care providers to support shielded staff to return to work safely V0.2

Introduction and Scope

As we continue to move out of lockdown, the process of returning employees to the workplace is progressing. Arrangements should be in place to ensure that any return to the workplace is carefully managed, that workplaces are Covid-secure and that employees understand the new arrangements which are in place.

The current government guidance is that people should work from home where they can. Therefore, employees should only be considered for a return to a physical workplace in the following situations:

- Where their roles cannot be undertaken completely at home e.g. front-line roles
- Where personal or health issues have been identified through a homeworking risk assessment process.

Once they have been identified for a return to work, there are some employees who need additional consideration due to their having risk factors which make them more vulnerable to serious health complications as a result of Covid-19. These individuals fall into the following groups:

- Those who are <u>clinically extremely vulnerable</u> (the shielded group)
- Those who are <u>clinically vulnerable</u> (this includes those who are over 70, have a medical condition on the vulnerable list, are pregnant, have a BMI of over 40)
- Those who have other risk factors which have been identified as increasing the risk
 of a poor outcome in the event of catching Covid-19 (this includes those in the higher
 age brackets, those from a BAME background and being born outside of the UK or
 Ireland)

As our knowledge of the effect of Coronavirus develops, the guidance around which medical conditions are relevant has changed and additional risk factors have been identified. Therefore, all employees with a vulnerability should have an individual risk assessment which should be reviewed and updated as required.

The Covid-19 individual risk assessment has been developed for use in cases where individuals with one or more risk factors have been identified and they are required to return to work in a physical workplace.

Changes to shielding arrangements

The Government has announced that current shielding arrangements will be paused from 1st August, 2020. This means that, where previously these individuals were directed to remain









at home, they may, from this date, return to a workplace provided that workplace is Covidsecure and social distancing can be observed.

It is important to note that shielding arrangements have been **paused** but not removed. In the event of a future local or national lockdown, previous shielding arrangements may be reimposed. It is, therefore, important that employees within the shielded group can be readily identified to ensure any future changes can quickly and accurately be relayed to them.

For those within the shielded group, the return to a physical workplace may, understandably, be a cause of significant concern and anxiety. Through the process of risk assessment and adjustment, you should be able to allay the concerns which employees have and enable them to return to their role. It is believed that a return to work will be possible for the significant majority of employees, with the implementation of additional adjustments where required. This may include the provision of individual PPE. However, there may be a small number of cases where the risk of return to their normal role may still be too high, in which case other options will need to be considered.

Concerns may also be expressed by employees who live with someone within the shielded group, where they have not wished to put their families at risk by bringing infection into to their homes. The government has issued revised guidance for children within the clinically extremely vulnerable group and, from 1st August, the number within this group will significantly reduce. This is due to the lower impact which Covid-19 seems to have on children. Similarly, as shielding arrangements are amended for adults, there is no longer a need for social distancing to be observed within households.

Whilst employee concerns in this area remain understandable, it would not form part of an individual risk assessment which focuses on the risk factors to the individual. However, it is important that similar discussions are held with such employees and that their concerns are given due consideration. The individual risk assessment form and guidance may be used to guide these discussions but is not a requirement in such circumstances.

What is Covid secure?

Covid-secure describes the arrangements which need to be implemented within workplaces to reduce the risk of Covid transmission. This includes a range of measure such as:

- Social distancing including the use of one way systems and reduced capacity in buildings
- Hygiene measures such as the provision of hand sanitiser and wipes
- Arrangements for the use of kitchens and toilets for example, only one user at a time
- Changes to working arrangements to reduce pinch-points and busy periods
- Increased cleaning
- Clear signage on the entry to and within buildings







Social distancing

The government guidance is currently that everyone should observe 2m social distancing where at all possible. Where this can't be achieved, then 1m plus social distancing should be followed; the 'plus' applies to the additional measures which must be put in place. These may include things such as Perspex screens or PPE.

Support for care providers to carry out individual risk assessments

If additional support is required in how individual risk assessment should be completed, then in the first instance contact socialservices.contractingunit@northyorks.gov.uk

Risk assessment process

The individual risk assessment should be completed for all employees working outside the home who have an identified risk factor.

The risk assessment should be a joint process between the care provider and employee with a full exploration of any concerns which the employee may have. When having these conversations, care providers should take appropriate steps so that employees have the confidence to openly discuss and resolve their concerns, including:

- ensuring that the conversation is confidential
- providing sufficient time for a detailed conversation to take place
- setting out the purpose of the conversation
- allowing opportunity for them to raise any concerns and ensure these are given serious consideration
- recording the outcome of the conversation on the individual risk assessment form

Where employees wish to be accompanied in these conversations by their union representative or a work colleague, this should be supported where at all possible.

The assessment is framed as yes/no questions; where the answer to a question is 'no' then no further action is required, where it is 'yes' control measures should be discussed and agreed. Control measures is the term used within risk assessments for the actions and arrangements which have been put in place to control the identified risks.

Individual risk assessment

The individual risk assessment focusses on the individual, their additional risk factors and what adjustments are required to support the employee at work.

On completion of the individual risk assessment, care providers should determine if having assessed their employee as being low, medium or high risk. It is not possible to provide guidance on every eventuality and the assessment of risk will depend on the specific circumstances of the individual. For example, two people with the same medical condition may be assessed at different risk levels due to additional risk factors such as age, ethnic background, gender and BMI.







The following has been provided as guidance to help managers assess individual employee risk levels.

Risk rating	Definition	Workplace considerations
High	High risk of hospitalisation, serious complications or death if	If attending work, the risk should not be significantly greater than the risk within their own home
	infection occurs	Ensure low likelihood of anyone breaching social distancing. Ensure they can maintain good personal
	Likely to be those within the shielded group or those with multiple clinical	hygiene with low likelihood of contacting contaminated objects and surfaces
	vulnerabilities or risk factors	Likely to need additional control measures including, possibly, PPE. May need to be considered for adjusted duties or redeployment into lower risk roles
Medium	Risk of becoming hospitalised and seriously ill if infection occurs	Acceptable for them to attend work if the risk of doing so is no greater than the risk of going shopping or taking exercise
	Likely to be those with a lower number of risk factors or clinical	Risks at work should be kept as low as reasonably practicable by controls including PPE.
	vulnerabilities	Should be able to undertake care work and working closely with others (such as teaching, sharing a vehicle, using public transport) provided controls (e.g. screens, PPE) are effective in managing the risk
Low	Those for whom the risk of developing severe disease is low	An increased risk of infection may be accepted where there are no reasonably practicable means or reducing it further.
		Should be able to undertake all roles.

The impact of job role

The shielding arrangements have been paused from 1st August, so all employees who have been shielding at home may be required to return to work outside the home.

Whilst individuals will have their own risk level, this needs to be considered in the context of their job role. Different roles will carry different risks depending on a range of factors.

Consideration should be made for returning employees and new recruits with identified health concerns to complete a health check as part of the return to work / recruitment process.

Care Providers are encouraged to think about the potential risk factors associated with a role and the following common scenarios are provided as guidance:







Description of working arrangements	Considerations
Role based in a care setting where the employee will only come into contact with other employees.	Covid-secure arrangements have been put in place in building All employees must have complete an induction session on following Covid-secure guidance Care providers can consider additional measures for individuals if required e.g. designated desk, staggered start times, etc.
	These would be considered low risk work environments suitable for all employees
Role based in a care setting building where the employee may be working with service users who are	These work places are likely to be higher risk however managers will be experienced at managing risk and clear policies are in place around the provision and use of PPE
vulnerable or may not be able to follow social distancing requirements.	Social distancing may not be possible due to the need for physical contact or the need to provide personal care.
	Roles within these workplaces may not be suitable for those who are high risk, especially where Covid-19 infection has been identified. Care providers should consider additional measures for individuals, though redeployment to lower risk roles may need to be considered
Role based in community for the majority of working time where the employee may be working with service users	There are a range of factors which will affect the potential risks in these roles, including but not limited to: The length of time spent in a place or in close contact Access to handwashing facilities
who are vulnerable or may not be able to follow social distancing requirements.	 Can duties be undertaken in another way to reduce contact and risk? What are travel arrangements and are vehicles
	necessarily shared?What guidance has been implemented and is the employee aware of these?
	Has PPE been provided and has the employee been trained in its use? Risk assessment will need to include all relevant factors and
	whether suitable control measures can be put in place to reduce risks. Reorganisation of duties or redeployment may need to be considered for those at high risk.









Overall Risk

The interaction of employee risk and workplace risk will give an overall risk factor as follows:

Workplace		Employee Risk	
Risk	Low	Medium	High
Low	Low overall risk –	Low overall risk –	Low overall risk –
	monitor existing	monitor existing	monitor existing control
	control measures only	control measures only	measures only
Medium	Low overall risk –	Medium overall risk –	Medium overall risk –
	monitor existing	Review/add controls	Review/add controls and
	control measures only	and monitor	monitor
High	Low overall risk –	Medium overall risk –	High overall risk – seek
	monitor existing	Review/add controls	competent advice/
	control measures only	and monitor	amend duties/ redeploy

- Where the overall risk is high, employees may not be able to return to their usual role at this time. Care providers should consider their own HR policies and procedures. Alternative options are detailed below.
- Where the overall risk is medium, care providers should consider whether
 additional control measures are necessary. They may wish to consider their own HR
 policies and procedures around the effect of an individual's condition and the
 suitability of control measures.
- Where the overall risk is low, it is still important that existing control measures are maintained.

In all cases, individual risk assessments should be regularly reviewed to ensure they remain current and sufficient. Should there be any changes to the employee's circumstances/health or their workplace, the risk assessment should be reviewed.

New and expectant mothers

All pregnant women should have an individual risk assessment regardless of the Covid-19 outbreak. Further information regarding the impact of coronavirus in pregnancy is available on the Royal College of Obstetricians and Gynaecologists website. There is no current evidence of significantly increased risk to mother or baby unless the mother has other significant medical problems.

Where possible, pregnant workers should work at home where they are able to do so. Where this is not possible, those within the first and second trimester (i.e. up to 28 weeks' pregnant), with no underlying health condition, should be able to continue to work in a front-line role **provided that social distancing can be maintained** and any risks identified are reduced as far as reasonably practicable. Those within the third trimester of pregnancy i.e. from 28 weeks onwards, or have an underlying health condition, should avoid contact with anyone with symptoms and significantly reduce unnecessary social contact.







Possible actions and additional control measures

It is important that any changes to the employee's current role are discussed and agreed with the employee. Any change will be temporary and may vary or cease based on evolving government guidance.

Amendments to the current role – where possible, duties should be amended to reduce the risk to the employee where this is considered medium/high. Possible options include:

- relocating employees to a different part of a building or location where the risk is lower
- moving the employee to different duties with a lower risk of infection
- allowing the employee to complete some of their role from home where possible, reducing the amount of time they spend in contact with others
- consider changing the way in which activities are undertaken and what can be done remotely rather than face-to-face

Amendments to the workplace – whilst the Covid-secure arrangements should be effective in reducing risk, employees with vulnerabilities may understandably be worried about a return to working outside the home or have particular concerns which managers should try and address. Additional measures could include:

- Employees can be designated their own desk or workspace which only they are allowed to use
- Screens could be provided to reduce contact with others
- The employee could be located near a window which opens to ensure good ventilation
- The employee could be relocated to a different building or area which is guieter
- Signage can be put up, with the employee's agreement, indicating that they are at higher risk to ensure other employees stringently observe social distancing measures
- Supplies of hand sanitiser and wipes can be made available near to the employee's workstation
- The employee could be encouraged to bring their own food and drink negating the
 need for them to use shared kitchens e.g. bring a thermos of coffee, bring food in a
 chill bag so it doesn't need to be put in a shared fridge, etc.
- The employees uniform could be washed by the care provider.
- Item of clothing that may not be easily washed e.g. such as jackets should not be worn in the care setting.
- Vary the employee's start and finish time to ensure they can avoid bottlenecks at entrances and exits
- Undertake building inductions, care providers may wish to consider whether additional specific inductions or reintroduction activities would assist in allaying any concerns
- Consider how the employee travels to work and encourage walking, cycling or using their own car where possible. Where the employee is required to use public transport, consider whether working times can be varied to enable them to avoid busier periods. Car-sharing should be avoided if at all possible, but where it is not







the passenger should sit in the back and ensure there is good ventilation. Individuals may wish to wear face coverings as is the legal requirement on public transport.

- Where the employee is required to work with other employees, consider creating bubbles so they always work with the same colleagues to reduce the chances of exposure to infection
- Employees in care settings should wear a face covering whilst at work.
- The employee may be considered for the provision of enhanced PPE

Other alternatives – it is anticipated that the majority of employees will be able to return to their normal roles once the above measures have been implemented. However, there may be small number of cases where this is more problematic, as follows:

- Where the overall risk remains unacceptably high despite the implementation of control measures
- Where the employee does not agree with the assessment of risk and, through a
 genuinely held belief about the risk to their own health, refuses to return to their role
 In these circumstances the care provider should instigate their own HR policies and
 procedures.









Appendix One - Example COVID-19 INDIVIDUAL RISK ASSESSMENT FORM

This risk assessment checklist is to be completed for those employees who are at greater risk from work exacerbating their health e.g. due to an underlying medical condition, disability or injury. It also includes those individuals who may be at greater risk, such as Black, Asian or minority ethnic (BAME) from specific issues such as Coronavirus.

Please note it is not necessary when completing this assessment to record sensitive personal medical data or history. The focus of this assessment is on those reasonable adjustments or practicable controls that can be put in place to reduce risks, facilitate working arrangements and minimise the impact on those who have protected characteristics, health conditions or other issue.

Whilst the primary focus of this assessment is the risk around contracting Covid-19, it is important that consideration is also given to other ongoing workplace risks e.g. DSE, manual handling, etc. Where employees may have previously had workplace adjustments prior to the Covid-19 outbreak, then these need to be reviewed as part of the risk assessment process.

Name of Care provider:	Name of Care Setting:		Job Title		
Name of User:		Date of assessment:		Review Date:	
Usual Base Address		Manager:			
Details of the normal work activities to be carried out:					

Visiting a frier	nd or relative who is living in a care setting	
Details of person undertaking this assessment:		

Risk ra	ting	Action
	HIGH	Urgently review/add controls & monitor seek competent advice e.g. Occupational Health
	MEDIUM	Review/add controls (as far as reasonably practicable) & monitor
	LOW	Monitor control measures

1.	Medical assessment	Yes	No	Control measures required in place? What are they? Impact on Individual/Service
1.	Are you in an extremely clinically vulnerable group in relation to the risk of COVID-19 (also known as the shielded group). You are not clinically extremely vulnerable if: • you do not have any of the conditions listed in the government guidance on the hyperlinked website • you have not been told by your GP or specialist that you are clinically extremely vulnerable or received a letter saying you are clinically extremely vulnerable			Employees who are extremely clinically vulnerable should work from home if possible. Where this is not possible then from 1st August 2020 (subject to any additional national/local controls) they may return to a physical workplace but may need to be reallocated to duties where they can maintain appropriate precautions such as social distancing, hand washing etc. in a designated "COVID Secure" premises. Where this is not "reasonably practicable" and a return to front line duties is required then the provision of personal protective equipment may be considered. It should be noted that PPE may cause other health related issues such as overheating. In situations where PPE may be an additional individual control or the PPE issued may exacerbate a pre-existing condition then it is recommended that HR policies and procedures should be followed.
2.	Are you in a <u>clinically vulnerable</u> group in relation to the risk of COVID-19?			If employee is clinically vulnerable they should work from home where possible and take extra care to control contact with others outside their household whilst maintaining social distancing arrangements and hand washing. Further advice on specific issues is here

Visiting a friend or relative who is living in a core patting
Visiting a friend or relative who is living in a care setting
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		Employees who are new or expectant mothers (NEM) should work from home if possible due to risks from COVID-19. Those unable to work remotely should ensure social distancing and hand washing is followed. Depending upon the duties being performed personal protective equipment may be required. The use of such equipment should be in accordance with public health and / or HR policies and procedures.
 3. Are you in a vulnerable group in relation to the risk of COVID-19? This includes those who have increased risk due to their: age – your risk increases as you get older being a man being from a Black, Asian or minority ethnic background (BAME) being born outside of the UK or Ireland 		Certain characteristics such as age, overweight and/or Black, Asian and Minority Employees (BAME) can pose additional risks, particularly in relation to the seriousness of the symptoms should they develop the illness. These risk are higher where they are combined with other conditions and characteristics. For example, an otherwise healthy 25-year-old male would not be considered at additional risk and would, therefore, not require an individual risk assessment.
4. Where the employee is in one of the above categories and they are unable to work from home can they work from a workplace that has been designated "COVID Secure"? Output Description:		Staff should work from home where possible if this is not possible those staff who may have a number of these risk factors may be at greater risk in certain roles. Therefore, those unable to work remotely should ensure social distancing and hand washing is followed e.g. by working out of a COVID Secure building. COVID Secure buildings allow for social distancing, normally 2 metres, and hand washing etc. rules to apply. Where this is not possible have alternative controls in place e.g. screens, adjusted seating positions and/or enhanced cleaning regimes in place. Where these arrangements are not possible then further specific advice may be required. Changes to the employee's job role or work environment may be considered. Where risks cannot be reduced it may be necessary to implement HR policies and procedures.
Do you have issues using personal protective equipment, e.g. difficulty breathing		Some PPE can be uncomfortable but also lead to overheating and or breathing difficulties e.g. full face respirators which require a degree of fitness level in order to wear for prolonged periods such as a full shift. This can be addressed by alternative PPE, where appropriate, redeployed onto other duties, or staff rotation. Further specific advice may be required from an Occupational Health Advisor.

	Visiting a friend or relative who is living in a care set	ting			
6.	Are you experiencing new or additional mental health, general physical and emotional wellbeing issues arising from COVID-19 e.g. anxiety, depression etc.?				
2.	Disability and workplace adjustments	Yes	N	lo	Control measures required in place? What are they? Impact on Individual/Service
1.	Did you already have a workplace risk assessment completed prior to the Covid-19 outbreak?				Review the risk assessment to ensure any actions from previous assessments are still in place
2.	Do you need any additional support, adjustments or other changes in place at work e.g. due to Covid-19 or changes in your circumstances?		С	-	Do arrangements need to be reviewed or changed due to changes which have been made to the workplace as a result of making them Covid-secure e.g. lifts being out of use, the employee working in a different location and not having access to specialist equipment, etc. Employees who may be at more risk due to protected characteristics e.g. staff with a disability, managers make reasonable adjustments to avoid staff who need additional support/adjustments. Similarly making sure that the steps taken do not have an unjustified impact on some groups compared to others, for example, those with caring responsibilities or those with religious commitments. However, such arrangements should not put these individuals at higher risk.
3.	Have appropriate arrangements for Fire /Emergency evacuation been put in place? (Personal Emergency Evacuation Plan needed?)				Where an employee requires assistance during emergency evacuation this must be discussed with the line manager. A Personal Emergency Evacuation Plan (PEEP) must have been developed and agreed for emergency evacuation.

3.	Workplace considerations	Yes	No	Control measures required in place? What are they? Impact on Individual/Service
1.	Do you have difficulty accessing and egressing a workplace (difficulty in accessing site, slips and trips, stairs/lifts)?, incorrect			Consideration should be given to any changes which have been made to buildings to make them Covid-secure and how these may impact on the employee.
2.	Do you have issues using the welfare facilities, e.g. toilets, break areas, kitchens, etc.?			Particular arrangements may need to be made if the employee has additional requirements.

Where an employee takes a specific medication to control symptoms which may impact the workplace. The impact needs to be discussed to introduce reasonably adjustments if practicable. Further advice may be required from an Occupational Health Advisor.

4. Do you need any specific support in relation to first aid, medication, medical emergency?

	Visiting a friend or relative who is living in a care settir	ng		
3.	Do you have to undertake regular manual handling activities?			Employees to limit the need for manual handling as much as possible. Existing trolley used to carry items to and from office. Assistance sought from other staff in carrying equipment and boxes around office.
4.	If yes is there a significant risk of these activities aggravating or making your condition worse?			
5.	Do you need to work on your own in buildings (outside your own home) or other community setting?			Arrangements in place for employee to inform colleagues when working late, Employee carries mobile phone or other communication device such as a radio at all times. Employee avoids higher risk activities (manual handling, work at height etc) when lone working.
6.	Do you have to drive for work purposes, and are there any issues with this that need to be considered as part of this assessment?			Do any restrictions from driving due to medication/health being taken have to be implemented? Has the employee arranged alternative means for getting to work as home working is not practical? Does the employee need alternative working arrangements in place to avoid site visits? Do breaks have to be built into journeys and limit distances travelled
4.	Any Other issues to consider?	Yes	No	Control measures required in place? What are they? Impact on Individual/Service
	Any Other issues to consider? Do you have to use public transport to travel to and from your place of work?	Yes	No	
1.	Do you have to use public transport to travel to and from			
1.	Do you have to use public transport to travel to and from your place of work?			
1. 2. 3.	Do you have to use public transport to travel to and from your place of work? Are there any other hazards that have not been covered? Have all relevant health issues been addressed in this			

Assessor's Details (if applicable)

ACTION PLAN				
Action		Priority - High/ Medium/Low	By Whom (name)	Date for Action
Individual Being Assessed				
Name:	Date:			

Date:

Date:

Name:

Name:

Manager's Details