

Covid-19 Risk Assessment Proforma

Covid-19 is a new illness that can affect your lungs and airways. It is caused by a virus called Coronavirus. Symptoms can be mild, moderate, severe or fatal. To ensure the safety of all staff and candidates all Safe Working Procedures (SWP), must always be adhered to. Failure to follow Safe Working Procedures will result in dismissal or termination from your job role.

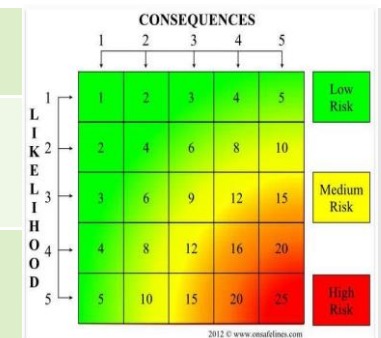
OCCUPATION, JOB OR TASK	COVID-19: General Medical Colleagues	DATE OF THIS ASSESSMENT	19.06.2020	No.	01
-------------------------	--------------------------------------	-------------------------	------------	-----	----

LOCATION	All ARC Medical Offices	NEXT REVIEW DATE	20.07.20	PAGE	1	OF	4	ISSUE No.	2
----------	-------------------------	------------------	----------	------	---	----	---	-----------	---

No. OF STAFF AT RISK		HOW OFTEN	Daily	SIGNED		ROLE	
----------------------	--	-----------	-------	--------	--	------	--

Risk Rating Guide

High	There is a risk of serious injury or lost time to one or more people. Further action will be necessary by a competent person to reduce risk or specific training provided and operating procedure implemented
Medium	There is a foreseeable risk of injury to one or more resulting in injury, which in rare cases may be serious and critical. Defined control measures are necessary to control risk. Further site specific assessments may also be necessary in some cases.
Low	Adequate control measures have been identified to significantly reduce the chances of occurrence or injury.



TASK/ACTIVITY	HAZARD	DEGREE OF RISK			RESIDUAL RISK & PRIORITY - If further action is required details to be entered at bottom of page					
		L	S	LxS	EXISTING CONTROLS			Action Required		
		1-5	1-5	1-25	L	S	LxS	Yes/No	Priority	
ARC Medical office/administration/sales staff undertaking sales, medical screening, bookings, administration and other office based activities.	ARC Medical staff contracting COVID-19 as a direct result from contact with infected staff or other person(s)	3	5	15	<ul style="list-style-type: none"> Working from home ensuring adherence to current and updated government guidance & legislation. <p style="margin-left: 20px;">If unable to work from home, then.</p> <ul style="list-style-type: none"> Approved company issue (ce)face masks to always be worn by staff, Approved company issue (ce)gloves to always be worn by the staff when handling materials that may be handled by others. No staff to access or use other staff member computers Printers to be used only when approved (ce)gloves are worn by the user 	1	5	5	No	

Covid-19 Risk Assessment Proforma

					<ul style="list-style-type: none"> • ARC Training centers to be suitably marked with signage to ensure 2m separation distance within office environment • Office(s) must have been assessed to ensure suitable adherence to 2m radial separation distances • Offices to identify seating arrangement of staff. Offices must not allow numbers of staff that will not allow radial distance to be achieved • Anti-bacterial gel stations to be provided in communal areas and identified. Staff required to apply following use of sanitation amenities, Sanitation areas to be suitably marked with guidance to wash hands with soap/water following use • Staff to use personal pens and not interchange with others • Staff to confirm each morning that they are not displaying any symptoms of COVID-19; • Random checks may be in operation or requested if ARC staff have any suspicion of symptoms being displayed by other staff. • Communal contact to be limited and breaks to be agreed with staff to stagger times and reduce numbers as assessed. • Hot & cold drinks may be made in kitchen • Staff to only use own Cup or disposable • Personal cups may be used but must be deep cleaned by owner at the end of the day. • Deep clean of office, communal areas and sanitation facilities to be conducted daily following completion of business. 						
--	--	--	--	--	---	--	--	--	--	--	--

Covid-19 Risk Assessment Proforma



CONTINUATION SHEET	No.	
---------------------------	------------	--

OCCUPATION, JOB OR TASK	PAGE	3	OF	4	ISSUE No.	1
--------------------------------	-------------	---	-----------	---	------------------	---

TASK/ACTIVITY	HAZARD	DEGREE OF RISK			RESIDUAL RISK & PRIORITY - If further action is required details to be entered at bottom of page						
		L	S	LxS	EXISTING CONTROLS	L	S	LxS	Action Required		
		1-5	1-5	1-25		1-5	1-5	1-25	Yes/No	Priority	
ARC Medical office/administration/sales staff undertaking sales, medical screening, bookings, administration and other office based activities.	ARC Medical staff contracting COVID-19 as a direct result from contact with infected staff or other person(s)				<p>Candidate booked into diary Candidate pays in full, or company to be invoiced <u>Reduce contact time with candidate</u> Candidate receives email which includes:</p> <ul style="list-style-type: none"> • Appointment confirmation • Information sheet with detailed instructions including wearing of mask • Link to complete online Medical Questionnaire <p>Medical Admin print off completed questionnaire and checks it has been completed correctly</p> <ul style="list-style-type: none"> • If omissions are made, candidate is telephoned by Med Admin and corrected <p>Candidate arrives at clinic location Candidate telephones clinic to advise of arrival Candidate is met at entrance - asked screening questions and temperature is taken. If they are not wearing a mask then issue one to candidate.</p> <ul style="list-style-type: none"> • If candidate is well, taken to admin room to sign paperwork • If candidate is unwell, advised that they should return home <p>Medical undertaken</p> <ul style="list-style-type: none"> • Limit time with candidate in a distance under 2M • No Spirometry testing currently being performed due to exhaling at force • Alcohol levels tested in Urine instead of breathalyser for same reason <p>Candidate immediately leaves the premises Reduce daily appointment slots to allow for sanitizing equipment and surfaces of room following departure of candidate. Nurses responsible for sanitizing task.</p>						

Covid-19 Risk Assessment Proforma



CONTINUATION SHEET							No.		
---------------------------	--	--	--	--	--	--	------------	--	--

OCCUPATION, JOB OR TASK		PAGE	4	OF	4	ISSUE No.	1
--------------------------------	--	-------------	---	-----------	---	------------------	---

TASK/ACTIVITY	HAZARD	DEGREE OF RISK			RESIDUAL RISK & PRIORITY - If further action is required details to be entered at bottom of page					
		L	S	LxS	EXISTING CONTROLS	L	S	LxS	Action Required	
		1-5	1-5	1-25		1-5	1-5	1-25	Yes/No	Priority