

APPENDIX C:

Template for Risk Assessment

Why is this document needed: Public Health England and the Health and Safety Executive require this documentation to ensure end to end health, safety and infection control risks for mass lateral flow testing are identified, pre-assessed, managed and monitored regularly by the site owners and testing operators

Assessment Date	dd/mm/yy	Lead Assessor		Contract		Assessment Number			
Activity / Task									
Description of task / process / environment being assessed	nment being General and clinical activities on the asymptomatic testing site at								
Activities Involved		Fraversing the site on foot Festing University staff and students				Location			
Who Might be affected	Empl		Client 🗸	C	ontractor ✓	Visitor 🗸	Service User ✓		

Hazard Identification and evaluation



No	Hazards	Associated risks	Current Control/ Mitigation Measures		Risk Evaluation (post measures)		
				Probability	Severity	Risk	
1	Contact between subjects increasing the risk of transmission of COVID19	Transmission of the virus leading to ill health or potential death	Asymptomatic: All subjects are to be advised in advance not to attend if they have any symptoms of COVID 19, or live with someone who is showing symptoms of COVID 19 (including a fever and/or new persistent cough) or if they have returned within 14 days from a part of the world affected by the virus or have been in close contact with someone who is displaying symptoms. Face masks: Prominent signage reminding attending subjects of the above to be displayed at the entrance to the building. Face coverings/masks to be worn by subjects at all times whilst on the premises except for brief lowering at time of swabbing. Requirement to wear face covering/mask to be reminded to all subjects in advance at time of test booking. Compliance with wearing of face covering/mask of all subjects to be visually checked on arrival by reception / security staff. Compliance with wearing of face covering/mask of all subjects to be visually checked through building by queue managers and all other staff. Hand hygiene: All subjects to use hand sanitiser provided on arrival & adherence to this enforced by reception staff. Social distancing: Two metre social distancing to be maintained between subjects with measured floor markings in place to ensure compliance in addition to verbal reminders if necessary from reception, queue management & sampling staff. A one-way flow of subjects through the building is to be initiated and maintained at all times. Compliance with this is to be ensured by queue management staff. Cleaning: Regular cleaning of the site including wipe down of all potential touchpoints in accordance with PHE guidance. Limited clutter-chairs only on request; no physical handing of documents to subjects except barcodes and PCR test kits for first 200 subjects	1	4	4	
2	Contact between subjects and staff increasing the risk of transmission of COVID19: Welcome & registration	Transmission of the virus leading to ill health or potential death					



3	Contact between subject and sampler increasing the transmission of COVID19: Sample taking	Transmission of the virus leading to ill health or potential death			
4	Contact between sample and test centre runner increasing the transmission of COVID19: Sample transport	Transmission of the virus leading to ill health or potential death			
5	Contact between samples and sample testers increasing the transmission of COVID19: Sample processing & analysis.	Transmission of the virus leading to ill health or potential death			
6	Contact between samples and sample testers increasing the transmission of COVID19: Sample disposal and waste disposal	Transmission of the virus leading to ill health or potential death			
7	Incorrect result communication	Wrong samples or miscoding of results	 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 staff at the sample collection bay Barcodes are checked for congruence at the analysis station 1 and applied to Lateral Flow Device at this station 		



8	Damaged barcode, lost LFD, failed scan of barcode	Orphaned record on registration portal & No result communicated to individual	 Rule based recall of subjects who have not received a result within x hrs of registration Subjects are called for a retest 		
9	Extraction solution which comes with the lab test kit contains the following components: NA ₂ HPO ₄ (disodium hydrogen phosphate), NaH ₂ PO ₄ (sodium phosphate monobasic), NaCl (Sodium Chloride)	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 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.	 PPE: nitrile gloves which meet the Regulation (EU) 2016/425 to be used at all times when handling the extraction solution. Safety glasses with side shields which are tested and approved under appropriate government standards to be worn at all times when handling the extraction solution. Impervious clothing to be worn to protect the body from splashes or spillages. Environmental: do not let product enter drains Spillages: wipe surfaces which the solution has been spilt on and dispose of cleaning material in line with the lab's waste disposal procedures Do not use if the solution has expired Training to be provided in handling potentially biohazardous samples, chemicals and good lab practice. Adhere to guidelines in these training procedures to prevent improper handling. Follow procedures on the MSDS form provided by Innova to mitigate against inhalation, skin contact or ingestion of these chemicals. 		
10	Occupational illness or injury				
11	Manual handling				
12	Unauthorised access by members of the public				
13	Uneven surfaces (floor protection in the Testing and Welfare areas)				
14	Stairs to / from sample processing / registration area and welfare space				



15	Inclement weather				
16	Electrical safety / plant & equipment maintenance Defective electrical equipment				
17	Use of shared equipment				
18	Incorrect result communication	Wrong samples or miscoding of results	 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 staff at the sample collection bay Barcodes are checked for congruence at the analysis station 1 and applied to Lateral Flow Device at this station 		
19	Damaged barcode, lost LFD, failed scan of barcode	Orphaned record on registration portal & No result communicated to individual	 Rule based recall of subjects who have not received a result within x hrs of registration Subjects are called for a retest 		
20	Extraction solution which comes with the lab test kit contains the following components: NA ₂ HPO ₄ (disodium hydrogen phosphate), NaH ₂ PO ₄ (sodium phosphate monobasic), NaCl (Sodium Chloride)	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 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.	 PPE: nitrile gloves which meet the Regulation (EU) 2016/425 to be used at all times when handling the extraction solution. Safety glasses with side shields which are tested and approved under appropriate government standards to be worn at all times when handling the extraction solution. Impervious clothing to be worn to protect the body from splashes or spillages. Environmental: do not let product enter drains Spillages: wipe surfaces which the solution has been spilt on and dispose of cleaning material in line with the lab's waste disposal procedures Do not use if the solution has expired Training to be provided in handling potentially biohazardous samples, chemicals and good lab practice. Adhere to guidelines in these training procedures to prevent improper handling. Follow procedures on the MSDS form provided by Innova to mitigate against inhalation, skin contact or ingestion of these chemicals. 		



Control Im	Control Improvements									
Action No	Recommended additional control measures	Responsibility	Target Date	Date completed						
1	Content of the risk assessment to be communicated with all workers as part of induction	Covid Coordinator								
2	Toolbox talks to be delivered to all workers on a regular basis including slips trips falls and complacency	Covid Coordinator								

Additional Notes	



Risk Evaluation

		Cor	nsequence o	of event ocu	rring (Sever	rity)
		Negligible	Minor	Moderate	Major	Critical
ocurring	Almost Certain	Tolerable 5	Substantial 10	Intolerable 15	Into lerable	Intolerable 25
nt ocu ity)	Likely	Tolerable 4	Substantial 8	Intolerable 12	Into lerable	Intolerable 20
od of event ((Probability)	Possible	Trivial 3	Tolerable 6	Substantial 9	Into lerable	Intolerable 15
Likelihood (Pr	Unlikely	Trivial 2	Tolerable 4	Tolerable 6	Substantial 8	Substantial 10
Likel	Rare	Trivial 1	Trivial 2	Trivial 3	Tolerable 4	Tolerable 5

Likelihood	Severity	Risk control strategies
Rare, will probably never happen/recur	Negligible	Intolerable – stop activity, take immediate
Unlikely, do not expect it to happen, but is possible	Minor	action to reduce the risk
Possible, Might happen	Moderate	
Likely, will probably happen	Major	Substantial - Take action within an agreed period
Almost Certain, will undoubtedly happen	Critical	period
		Tolerable – monitor the situation
		Trivial – No action required

Declaration - If the above control measures are implemented the risks posed by the task / process / environment assessed will be controlled to as low as is reasonably practicable.						
Persons involved in assessment						
Signature of Lead Assessor	Date					



	Reviews – this assessment should be reviewed at intervals no greater than 12 months or when there are changes in operational procedure, personnel, the work environment or following an incident									
Review date	Comments	Reviewed by	Signature	Review date	Comments	Reviewed by	Signature			

Health and Safety Risk Assessment Sign off Sheet	Assessment Number	
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Declaration by employees involved in the activity detailed above – I fully understand the activity outlined above and the risk control measures that I must implement, use or wear. I have received sufficient information, instruction and training so as to enable me to conduct this activity with the minimum of risk to myself and others.



Employee Name	Signature	Supervisors Name	Date	Employee Name	Signature	Supervisors Name	Date