10 August Update: Changes to the Risk Assessment:

1. Individuals who had received a shielding letter from the Chief medical Officer and were shielding prior to 16 August 2020 are now included in the risk assessment tool and will automatically score 7 points. This puts them in the very high risk group.
2. The age category has been expanded to now include 70-79 years of age with a score of 4 points.

Introduction

On the 26th May 2020, Welsh Government launched the All Wales COVID-19 Workforce Risk Assessment Tool. It has been developed in collaboration with clinicians, equality practitioners, community groups and workforce colleagues. This guidance and the frequently asked questions have been developed in collaboration with trade unions.

This risk assessment tool has been developed to help people working in the NHS and social care in Wales to see if they are at higher risk of developing more serious symptoms if they come into contact with the COVID-19 virus. The Chief Medical Officer for Wales, Dr Frank Atherton has paused ‘Shielding’ guidance as infection rates in Wales are now very low. This risk assessment tool has been updated, as it remains vital that we protect our workforce defined on medical grounds as extremely vulnerable from COVID-19.

The Tool uses Government guidelines, and the most up to date research, evidence and data available to identify known risk factors, including age, sex, ethnicity, underlying health conditions, Body Mass Index (BMI) and any relevant family history in relation to COVID-19. It is a combination of these various factors coming together which contribute to the severity of infection.

The Risk Assessment Tool is a live resource that will be subject to ongoing review and evaluation as the evidence base builds and we learn from implementation. The impact of changes in Government advice will also be considered as part of the review process and the Tool updated as appropriate. Please use the correct and most up to date version. Users will be prompted if further revisions are made to the tool in future.

- Checkyourrisk
- Gwirioeichrisg

Learning@Wales
NHS Electronic Staff Record (ESR)

A separate set of FAQs have also been developed to answer specific questions on this risk assessment tool.
How do you use the Risk Assessment Tool?

The Risk Assessment Tool uses a self-assessment methodology. It is a self-assessment as a first step as only you will be able to complete all areas, without assumptions or mistakes being made. It is intended to start the conversation between you and your line manager, to support you the staff member. It also helps ensure that health and social care organisations fulfil their duty of care to employees.

Your manager has a duty to protect you from workplace risks and will be expected to actively ask and check that you have undertaken a risk assessment. You should feel confident to complete the risk assessment and then arrange a conversation with your line manager to discuss the outcome and identify any additional support needs.

On completing the risk assessment, once you have identified yourself as shielding prior to 16 August, you will not be required to answer any further questions you will automatically score 7 putting you at Very High Risk, indicating that you should continue to work from home or go to work only if you can work in a COVID secure workplace with stringent 2m social distancing at all times. This can be discussed as part of your ongoing conversation with your line manager.

We recognise that the clinically vulnerable ‘people at risk’ group includes a wide spectrum of disease severity. If you are in the ‘people at risk’ group, and have been working from home or on modified duties, you should continue to do so and arrange a discussion with your line manager.

You may also wish to discuss your health conditions with your GP or Occupational Health to discuss whether it is safe for you to return to work.

You may also wish to consider the need for an individual stress risk assessment or home working risk assessment, as a number of factors are important considerations in relation to your wellbeing. The Health and Safety Executive provide a generic Stress Risk Assessment\(^1\) for use.

---

\(^1\) [https://www.hse.gov.uk/stress/risk-assessment.htm](https://www.hse.gov.uk/stress/risk-assessment.htm)
If your circumstances change, such as moving from working at home back into the workplace environment or a change in your personal circumstances, the All Wales COVID-19 Workforce Risk Assessment risk assessment will need to be reviewed and updated.

Is the Tool for everyone?

Yes, this risk assessment is for everyone working or volunteering in health and social care in Wales.

Understanding your risk

The COVID-19 Workforce Risk Assessment Tool sets out the four steps that you need to take. Let's look at each point in more detail.

1. Check your risk

When you go through the risk assessment, you will see that areas have been identified, these are the known risk factors and have been given a value or point. Each additional point indicates increased risks to the individual. This would be different for each person completing it due to your individual risk factors. It is important that you are honest when you complete this so appropriate support is put in place, to ensure you are protected as much as possible.

Age – COVID-19 seems to have a bigger impact on people who are older. If you are over 50 you are at a higher level of risk, once over 60 and 70, this risk becomes further increased.

Sex at birth – Research shows that males are at an increased risk, we currently do not know why this is the case. By asking for sex at birth, it means we can also recognise the increased risk for transgender women, if the increased risk is for biological reasons. Therefore sex at birth is the correct terminology linked to risk.

Ethnicity – In April, growing evidence emerged that COVID-19 infection was having a disproportionate impact on people with Black, Asian, Minority or Ethnic (BAME) backgrounds. The term used in the risk assessment is BAME which also includes people of mixed heritage or race. Some people may not be familiar with the term BAME and may think it is just about skin colour, but it is much wider than that. For example, members of the Roma and Traveller community, who may be White, would also be included. This is because it is believed that systemic racism and social economic disadvantage over generations may also be a factor as to why BAME people are at increased risk. Your manager will need to fully understand your risk, please be confident to complete this section accurately.

There is emerging research identifying that Black and Filipino women may also be at increased risk. If you identify in these groups, please include this in your discussions with your line manager.

Underlying Health Conditions – People with underlying health conditions are additionally vulnerable to COVID-19. There are certain conditions that would
mean someone is at increased risk. Current evidence indicates that it is the combination of various factors coming together which contribute to the severity of infection. This is why each condition listed has a score. If you have several health conditions, your risk increases and this must be taken into account when identifying any support you need and action required.

**Obesity** – The data indicates that COVID-19 seems to have a bigger impact if you are overweight. To be as protective as possible the Tool considers a number of measures. Body mass index (BMI) is a measure that uses your height and weight to work out if your weight is healthy. Waist measurement is also included, recognising that health impacts differ when linked with some ethnicities.

**Family History** – Data shows that some families, especially twins, have family susceptibility to COVID-19, this is recognised in the Tool. It is important where an immediate family member has been in ITU or has passed away from COVID-19 that this link is identified and appropriate protections are put in place.

You may know the answers to the questions yourself, you may also want to consult your GP about your health conditions.

2. **Understand your score**
   Once you have completed the section on risk factors and established your score, you can look at what that score might mean for you personally.

   The Risk Assessment Tool provides actions to take in relation to your score and workplace setting which will support you to take the most appropriate actions for you. Below are some examples of job roles that would link to these areas to help you identify where you might sit.

**What is AGP?**

AGP stands for Aerosol Generating Procedures, examples of such procedures include; intubation, extubation and related procedures and tracheostomy procedures. If you are not involved in AGP activity and work in secondary care then the term Non-AGP would apply to you.

<table>
<thead>
<tr>
<th>Community Care</th>
<th>District Nurse, care worker, community support or outreach worker, personal assistant, domiciliary care worker, community social worker.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Care</td>
<td>General Practitioner (GP), dentist, pharmacist, optometrist, primary care nurse.</td>
</tr>
<tr>
<td>Secondary Non AGP</td>
<td>administration, catering, laundry, porters, Allied Health Professionals</td>
</tr>
<tr>
<td>Secondary with AGP</td>
<td>Healthcare assistant, Nurse, Doctor, Allied Health Professionals</td>
</tr>
</tbody>
</table>

It is important to remember that risk is associated to the task or procedure and not the job role. So think about the different tasks you would be undertaking and the risk associated with those tasks or procedures.
e.g. secondary Non AGP and secondary with AGP is about the procedures you are involved with and not include roles, for example a secondary care geriatric consultant is likely to be non-AGP, whilst a cleaner or porter in a higher risk area (A&E/ITU) may actually be likely to be closer to AGP’s or handling items contaminated via AGP’s than a doctor on a rehab ward.

Once you have your score you use the traffic light system table to identify what actions you need to take in a workplace setting.

Now you have completed your COVID-19 Risk Assessment, please discuss with your line manager to ensure that the appropriate actions are put in place for your individual circumstances.

REMEMBER – Discussing your risk assessment with your line manager is an essential part of the process. The risk of the workplace setting will vary with the background level of escalation, and the precise exposure to COVID-19. Occupational health, workforce team, union representative or advocates are also available for advice and support to ensure you are appropriately protected. Other risk factors can be considered, including the outcomes of a stress risk assessment. This is so that you are supported as an individual.

3. Identifying the right actions for you
In identifying any risk in the workplace you and your line manager can also identify further support. This includes actions you can take and areas where your employer needs to provide support. The Risk Assessment Tool provides suggestions for each. It is important that you are able to challenge if the support you require is not available. This can be done via workforce, union representatives or staff networks as appropriate.

It is also important to remember the existing, important and continuing behaviours to avoid COVID-19 infection:
• Ensure frequent hand and surface hygiene
• Maintaining 2 metre social distancing in both formal and informal workplace activity
• Appropriate use of PPE depending on the setting and the procedural risk
• Ensuring the right training to protect staff and patients including up to date infection control training
• Stay at home and arrange testing if symptoms emerge

4. Act now – take the right action
Step 4 in the risk assessment considers reasonable adjustments, linking to your additional support needs or concerns such as mental health and requires evidence of the safeguards put in place. This may include discussions where you have been identified as being at a high or very high risk, but do not want to be removed from the work environment, or at lower risk but would like to be removed from the workplace. There may be multiple reasons for this, including domestic abuse or toxic home environments, childcare arrangements or family member shielding at home. Anxiety and mental health issues have increased due to lockdown.
In these cases, honest and sensitive conversations need to happen between you and your line manager so your individual risks can be measured and appropriate support put in place. In doing so you should be confident any adjustments won't be used negatively and are to support your wellbeing.

**Review**

It is important that once completed, review dates are put in place with your manager, so you can discuss if there have been any changes in government advice, research or working circumstances, your personal circumstances / health or updates to the risk assessment tool and appropriate adjustments are made if needed.

**NOTE for Managers**

The All Wales COVID-19 Workforce Risk Assessment Tool is based on scientific data and research evidence, but staff and managers need to also communicate other risks to a staff member’s wellbeing and this should also be taken into account when identifying actions to protect individual staff. This may include previous mental health concerns and anxiety. The score should not be taken in isolation and the value comes from the discussions individuals and managers have as a result of the risk assessment.
Annexe 1: Shielding – **People defined on medical grounds as extremely vulnerable from COVID-19**

1. Solid organ transplant recipients
2. People with specific cancers:
   - People with cancer who are undergoing active chemotherapy or radical radiotherapy for lung cancer
   - People with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
   - People having immunotherapy or other continuing antibody treatments for cancer
   - People having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors
   - People who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs
3. People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe Chronic Obstructive Pulmonary Disease (COPD)
4. People with severe single organ disease (e.g. Liver, Cardio, Renal, Neurological).
5. People with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as Severe Combined Immunodeficiency (SCID), homozygous sickle cell).
6. People on immunosuppression therapies sufficient to significantly increase risk of infection.
7. Pregnant women with significant heart disease, congenital or acquired.