

## Risk Assessment Form

**Client: All**

**Date of Assessment: 01/05/2020**

**Review Date: 01/09/2020**

### Risk Evaluation

Hazard	Risk	Rating	Existing Control Measures	Additional Action Required (action by whom, by when)	New Rating
<i>Nature of the hazard</i>	<i>What is the risk? To whom?</i>	1 Low 2 Mild 3 Moderate 4 High 5 V. High	<i>What currently mitigates the risk?</i>	<i>How can the risk be managed? (List steps to be taken)</i>	<i>Rating when managed</i> 1 Low 2 Mild 3 Moderate 4 High 5 V. High
COVID-19 Prevention (Applies to all staff and clients)	Staff and clients	4	<ul style="list-style-type: none"> <li>• All staff are issued a weekly pack of PPE, including a week's supply of masks, boxes of gloves and hand sanitizer is refilled as and when needed</li> <li>• Hand gel used by staff</li> <li>• Hand-washing promoted at start and end of each visit</li> </ul>	Management Team to ensure adequate stocks of PPE are available   As above   Reminders to be sent on occasional basis by text and email	<b>3</b>

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			<ul style="list-style-type: none"> <li>Maintaining 6 feet distance wherever possible</li> </ul>	As above	
Client or family member has a suspected or confirmed case of COVID-19.	Caregivers contracting virus	4/5	<b>Gloves, aprons, fluid-resistant facemask worn during every visit. Good hand-hygiene</b>	Additional PPE to be worn, including goggles/faceshield, sleeve protectors.	<b>3</b>
Client has recently been into hospital for any reason.	Client may have contracted COVID-19 and currently be asymptomatic. Risk to family and caregiver.	4	<b>Gloves, aprons, fluid-resistant facemask worn during every visit. Good hand-hygiene</b>	Additional PPE to be worn, including goggles/faceshield, sleeve protectors.	<b>3</b>
Client is in the highly vulnerable or shielding category	Client contracting virus from caregiver	4	<b>Gloves, aprons, fluid-resistant facemask worn during every visit. Good hand-hygiene</b>	Reduce number of staff allocations to further prevent opportunities for cross-infection	<b>3</b>
Caregiver displays signs of COVID-19	Client contracting virus from caregiver	4	<b>Gloves, aprons, fluid-resistant facemask worn during every visit. Good hand-hygiene</b>	<p>Caregiver to notify office.</p> <p>Office to notify clients and other caregivers with possible contact.</p> <p>Office to arrange COVID testing</p> <p>Caregiver removed from duties as per Government guidelines.</p>	<b>3</b>

Hazard	Risk	Rating	Existing Control Measures	Additional Action Required (action by whom, by when)	New Rating
Member of caregiver's family displays signs of COVID-19	Caregivers contracting virus.  Client contracting virus from caregiver	4	<i>Home hygiene rules apply</i>	Caregiver to notify office.  Office to arrange COVID testing  Caregiver removed from duties as per Government guidelines.	<b>3</b>

<b>Signature: SMT</b> <b>Name:</b> Senior Management Team <b>Date:</b> 01/05/2020	<b>Review Date:</b> 01/09/20
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