**COVID-19 SELF ASSESSMENT QUESTIONNAIRE**

As we pass the first peak, the health, well-being and protection of our staff remains paramount – completing risk assessments for our staff to secure, especially now we are living with coronavirus (COVID-19), is a vital component of this.

We are asking all of our Bank Workers to self-assess their risk by completing the form below. Once completed, please forward the form to:

bartshealth.selfassessment@nhs.net

If, whilst you are completing the form, you recognise that you might be a medium or high risk from COVID- 19, please discuss your concerns and any mitigating actions that might be appropriate with the line manager of your next assignment.

The form will be retained as confidential and used to report on the numbers of risk assessments carried out and on common themes arising from the process to inform the Trust’s response and planning.

***FOR ACTION: Once completed, please retain a copy of this document as a confidential record and send electronically to*** bartshealth.selfassessment@nhs.net

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| **Employee Name:** Click here to enter text. | **Job Role:** Click here to enter text. | **Date of Self-Assessment:** Click here to enter text. |
| **Employee ESR Number:** Click here to enter text. | **Site & Location/Ward (Including GSS/CSS) :** Click here to enter text. | **Working Hours:**Click here to enter text. |
| **Bank Staff Y/N :**Click here to enter text. | **Manager Name:**Click here to enter text. |

Coronavirus (COVID-19) can make anyone seriously ill, but for some people, the risk is higher.

There are 2 levels of higher risk:

* high risk (clinically extremely vulnerable)
* moderate risk (clinically vulnerable)

**Risk Groups**

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| **High Risk (Clinically extremely vulnerable)** |
| Staff in the [extremely vulnerable group](https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19), notified as on 12 week ‘shielding’ Pregnant women (>28 weeks gestation should not attend work, home-working as an alternative) |
|  **Moderate risk (Clinically vulnerable)** |
| **Vulnerable/ pregnant staff** < 28 weeks or with comorbidities particularly cardiac |
| **BAME colleagues** – Black, Asian and minority ethnic, including (including Filipino and Arab)*there is a significantly increased risk of being severely affected by COVID-19 for black and ethnic minority staff compared to the national average*  |
| **Age: > 55**  |
| **Sex/Gender: Male** *Men are at an increased risk compared to women.*  |
| Staff with an **underlying health condition** as per PHE list, including any impact on mental health |
| **BMI**: Body mass index (BMI) of 40 or over |
| **Other specific concerns** *e.g. disability, caring for vulnerable relative, living with someone shielding, travelling to work*  |
| **You may consider yourself at medium risk where you have a combination of the above** |
| **Low risk** |
| **Low risk group**: Staff colleague not in vulnerable groups above but has been made aware of safe practices during pandemic and availability of support through CiC (Employee Assist Programme). |
| **Confirmation** | **Please Tick - Yes** | **No - Please contact your line manager for a full risk assessment** |
| **I am in the Low Risk Group** |  |  |

**Training Assessment**

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| **PPE use** | **Please Tick** **Yes N/A** |
| I have been made aware of safe COVID-19 working practices  | ☐ | ☐ |
| I have received training to use appropriate PPE | ☐ | ☐ |
|  I feel confident and competent in using appropriate PPE. | ☐ | ☐ |
|  I have been [fit-checked](https://weshare.bartshealth.nhs.uk/download.cfm?ver=20854) or fit tested (delete as appropriate) | ☐ | ☐ |
| I am aware of training videos on WeShare for [Donning](https://weshare.bartshealth.nhs.uk/download.cfm?ver=20853), [Doffing](https://weshare.bartshealth.nhs.uk/download.cfm?ver=20852)  | ☐ | ☐ |
| If you are uncertain about your answers to the above questions and how they relate to your role please speak to your line manager |  |  |

 **Safety at Work**

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| **Potential Actions**  | **Please Tick** **Yes N/A** |
| Limit duration of close interaction with patient (e.g. prepare everything in advance away from patient) | ☐ | ☐ |
| If possible, maintain >2m distance from the patient | ☐ | ☐ |
| Provide a surgical mask for patient and staff member for close contact interactions | ☐ | ☐ |
| The staff member will wear FFP3 in the area where AGP is undertaken on suspected/ confirmed COVID patient | ☐ | ☐ |
| Redeployment to lower risk area or alternative work to be undertaken elsewhere in the Trust | ☐ | ☐ |
| Remote working if the staff member is enabled (staff member has access to equipment and Wi-Fi or access has been requested from IT and able to access all programmes prior to commencement of working at home) | ☐ | ☐ |
| Additional appropriate training has been agreed | ☐ | ☐ |
| In some cases, staff may benefit from accessing professional support to discuss their anxieties about working in or near COVID + areas. This support can be accessed by emailing this RA to bartshealth.occhealth.coronavirusadvice@nhs.net or contacting your local psychology team Visit PHE website for guidance: <https://www.gov.uk/government/collections/coronavirus-covid-19-list-of-guidance#guidance-for-health-professionals>  | ☐ | ☐ |
|  **Additional steps to be considered** even though low risk: discussion around travel to work and consideration of flexible hours, travelling out of peak times, change shift pattern, managing stress/anxiety etc.   |  |  |

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| Emotional support ,information with contact details for free wellbeing support helpline 0300 131 7000 is available from 7am to 11pm seven days a week, providing confidential listening from trained professionals; a 24/7 text alternative to the above helpline - simply text FRONTLINE to 85258 and an online portal with peer-to-peer, team and personal resilience support.Managers and staff members are to note that staff have the right to involve their union / staff side representatives in risk assessment conversations, where they feel the need to do so. |
| **\* *ALL completed self-assessment RA’s are to be sent to*** bartshealth.selfassessment@nhs.net ***immediately upon completion***  |

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| **Individual’s signature** |  | **Date signed:** |  |
| **Print Name:** |  |
| **Individual’s Contact phone number:** |  |

bartshealth.occhealth.coronavirusadvice@nhs.net – General enquires – reporting of COVID-19 symptoms

bartshealth.pregnancy.coronavirusadvice@nhs.net – COVID-19 Pregnancy related enquiries

bartshealth.healthconditions.coronavirusadvice@nhs.net – COVID-19 Health condition related enquiries