

COVID-19 transmission, risk assessment actions

This document lists typical actions identified by assessment of risks around COVID-19 transmission. It is intended to provide a high-level summary, and is to be used in conjunction with locally created (and therefore more specific) risk assessment derived actions and guidance.

Any queries, please speak to your local health and safety representative initially, then through normal line management routes, beyond that please contact your Business Development Director if you then still require assistance. For further advice contact Andy Holmes, Health and Safety Manager andy.holmes@vetpartners.co.uk

Employees:

- Avoid touching your face
- Social distancing of 2 metres
- Team members continue to self-isolate as required, following government guidance
- Home-working if the role permits
- Distance in communal areas by staggering break times, re-arrange tables to avoid sitting face-to-face, spread out into any vacant areas
- Avoid working face-to-face; work back-to-back or side-to-side with your team where possible
- 'Partner' roles, i.e. split into fixed teams and avoid mixing
- Use branch sites to reduce footfall at the main site, perhaps for certain procedures
- Stagger start times of team members, avoid use of entry keypads or include in cleaning protocol
- Clinically extremely vulnerable team members work from home or strictly social distance or self isolate
- Clinically vulnerable team members work from home or be actively involved in assessing risks, and know consequent actions, including maintaining social distancing
- Move workstations so team members can be further apart

Customers:

- Clients remain outside where necessary; queue outside / wait in cars, etc.
- Signage at the practice entrance, and other appropriate client-facing points requesting use of face coverings, hand sanitising and non-entry to persons with symptoms
- Keep client numbers in your building(s) reasonable to maintain 2m social distancing, especially busier areas such as reception
- Use floor tape or appropriate graphics to mark where to stand and 2m distances, especially so that clients stand behind 'sneeze screen' e.g. at reception and dispensary
- Limit clients to one-per-animal, and dynamically risk assess for circumstances such as euthanasia
- Wear face coverings if entering the building
- Reduce contact time to less than 15mins

Process, hygiene and PPE:

- Regular hand-washing
- Cleaning of surfaces, especially multi-touch, such as door handles and light switches
- Reduce other fomite risks, e.g. avoid sharing pens, handling cash
- Changing clothes upon arrival at work, and before leaving to go home
- Face mask when working with team members and social distancing isn't possible; see guidance sent 01/05/20
- Practice team wear masks and a visor when consulting with a client
- Post supplies or arrange no contact pick-ups, where possible

Risk Assessment - COVID-19 transmission - 12/05/20							vetPartners			
Activity	Hazard		Initial Risk		Control Measures		Residual Risk			
	Hazard Description	At Risk	Likelihood	Severity	Control Measures to reduce likelihood	Additional Control Measures to reduce likelihood	Likelihood	Severity		
Human contact	Virus transmission person to person; people can be carriers of the virus without showing symptoms	Everyone	4	5	Social distancing (marking out 2m zones where required), self isolation where appropriate, hand washing (or hand sanitizer if not), teams split up, domestic lock down with minimal movement in public spaces, clients remain outside whenever possible, video consults where possible, patients brought to practice emergency only, avoid touching your face, catch screens and coughs in tissues or flexed elbow. Use of contact screens at locations such as practice reception desks.	Following government guidance for vulnerable or extremely vulnerable people to stay at home, with "shielding" by other household members. Use of face masks, visors.	3	5	15	
Animal contact	Virus transmission animal to person; current information suggests that animals are a poor fomites for the virus, although it is theoretically possible that the virus can live for a short time on fur	Everyone	2	5	Handle patients as little as possible, hand washing (or hand sanitizer) if not before and after handling each patient, clients remain outside whenever possible, video consults where possible, patients brought to practice emergency only, hand pour of patient outside, use practice lead and collar (or similar), avoid touching your face, PPE, gloves	Change clothes upon arrival at work (into scrubs) and back out of scrubs when leaving for home, change shoes similarly, use of cover (shoes / shoe covers when in the practice, keep updated with developments, familiarise yourself with the latest WHO and NHS advice	1	5	5	
Surface and object contact	Virus transmission from surfaces; information suggests the virus can live for 72hrs on surfaces	Everyone	3	5	Remove any unnecessary fomites from reception and waiting room areas, e.g. leaflets, sales forms, display stands and chairs, avoid touching your face, disinfection protocol appropriate to range of surfaces, considering floors, worktops, door handles, toilets, phones, photocopiers, vehicles, etc.	Frequent hand washing (or use of hand sanitizer PPE), also when moving from one area to another e.g. kitchen, vehicle, bathroom, consult rooms, keep updated with developments, familiarise yourself with the latest WHO and NHS advice	2	5	10	
Developing symptoms at home	Passing infection to team	Team in practice	3	5	Self isolate, notify line manager			1	5	5
Developing symptoms at work	Passing infection to team	Team in practice	3	5	Self isolate, notify line manager			1	5	5
Return to work after having had symptoms	Returning too soon and being infectious	Team in practice	2	5	Symptomatic staff can return to work: On day 8 after the onset of symptoms if clinical improvement has occurred and they have not been feverish for 2 days; if a cough is the only persistent symptom on day 8, they can return to work (post-viral cough is known to persist for several weeks in some cases)			1	5	5
Visiting COVID-19 confirmed cases; VetPartners does not recommend or expect our teams to visit or see patients of confirmed COVID-19 cases	Virus infection	Vet / vet nurse	5	5	2m social distancing, be back out within 15mins, gloves, apron, face mask / visor, disinfect anything that comes into contact with client's environment, hand wash / sanitise upon leaving, before touching phone, car keys, etc.	Request client to wear face mask too, avoid touching face, shoe covers upon entry to practice, gloves, scrubs (or similar) that can be washed on return to practice worn over clothes, avoid the need to put anything down or set yourself up with tool belt or similar, avoid contact with any surfaces unnecessarily	3	5	15	