

Risk Assessment for staff who have attained a medical or other exemption from being vaccinated for COVID-19

Introduction

This risk assessment must be completed in circumstances where an employee (permanent and casual) is unable to receive a vaccine for COVID-19 or has any other exemption from COVID -19 vaccination.

Purpose

COVID-19 is a highly infectious respiratory disease transmitted through droplets, smaller particles (aerosols), direct physical contact with an infected individual and directly through contaminated objects and surfaces. Airborne transmission is most risky in indoor, crowded and inadequately ventilated workplaces. Given this, the purpose of the risk assessment is:

1. To review and assess the level of risk associated with a specific role and employee who performs the role
2. To detail and assess specific controls which could be reasonably and practically implemented to mitigate these risks
3. A further assessment of the level of risk and consideration of whether or not the risks have been sufficiently reduced.

Instructions for Manager completing this risk assessment

Step 1: Review your facility and determine the risk rating appropriate for your facility based on COVID status

Step 2: Review and determine the potential transmission risk(s) for the unvaccinated worker

Step 3: Consider controls and assess if they will adequately mitigate the identified risks

Step 4: Provide Risk Assessment document to P&C.Inbox@healthscope.com.au to be reviewed by the review panel.

Step 5: Meet with review panel (member of Health & Safety Team, Workplace Relations & Chief Nursing Officer) to discuss the completed risk assessment and determine if safe for the employee to attend work

Step 6: If safe for employee to remain in their role, set review date

Review

The risk assessment must be reviewed on an ongoing basis (6 months minimum) and be updated as risks or controls change. Any change to existing processes, resources, facilities, systems and/or assets that has the potential to change the level of Healthscope's workers' risk exposure should be considered in the context of this risk assessment.

A new risk assessment must be completed for each review.

Details of assessment			
Name of person being assessed:			
Is the medical exemption on the required state based form?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
*If no to the above, employee must obtain exemption on correct state based form			
Date of assessment:			
Name of assessor(s):			
Site:			

Step 1: Determine the site risk		
COVID status	Risk level	Select one
No known COVID-19 positive patients in facility and no community transmission (Low)	Safe to work, however risk assessment to be reviewed if risk level changes	<input type="checkbox"/>
No known COVID-19 positive patients in facility and active community transmission (Moderate)	May be safe to work, subject to risk assessment and controls	<input type="checkbox"/>
No known COVID-19 positive patients in facility and high community transmission (High)	Subject to risk assessment and controls. Worker not to care for (or enter room of) COVID-19 positive patient.	<input type="checkbox"/>
Suspected COVID-19 patient in facility or high rate of community transmission (High)	Subject to risk assessment and controls. Worker not to care for (or enter room of) COVID-19 positive patient.	<input type="checkbox"/>
COVID-19 positive patient in facility (Extreme)	Cannot continue in current role at this facility.	<input type="checkbox"/>
If facility becomes a COVID-19 facility (Extreme)	Cannot continue in current role at this facility.	<input type="checkbox"/>
If all facilities become COVID-19 facilities in "reasonable" travel distance (Extreme)	Cannot continue in current role at this facility.	<input type="checkbox"/>
No working from home arrangements can be made and all facilities become COVID-19 facilities in "reasonable" travel distance (Extreme)	Cannot continue in current role at this facility.	<input type="checkbox"/>

Site risk level	<input type="checkbox"/> Proceed to Step 2	<input type="checkbox"/> Proceed to Step 2	<input type="checkbox"/> Proceed to Step 2	<input type="checkbox"/> Do not proceed*
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*Escalate immediately to Review Panel for advice on next steps

Step 2: Determine the potential source of COVID-19 Transmission

1	Does the worker work across multiple sites or multiple employers?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2	Could the worker be required to have face to face interaction or close contact with other workers in communal spaces? (e.g. shared kitchen, cafeteria or tea room, shared toilets, group meetings, open plan office)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3	Could the worker be required to have face to face interaction or close contact with patients, customers/clients or other members of the community whilst at work?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4	Could the worker interact with any workers in the workplace who fall within a high risk category:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	a. People who are 70 years of age or over;		
	b. People 65 years or older with a chronic medical condition		
	c. Aboriginal or Torres Strait Islander aged 50 or older with a chronic medical condition		
	d. People who are under 12 years of age;		
	e. People who have had organ transplant and are on immune suppressive therapy;		
	f. People who have had a bone marrow transplant in the last 24 months;		
	g. Pregnant people;		
	h. People who are on immune suppressive therapy for graft versus host disease; and		
	i. People who are having chemotherapy or radiotherapy?		
5	Could the worker interact with persons (eg patients/customers/clients or other members of the community) who fall into a high risk category set out above, or require contact with surfaces used by person who falls within a high risk category?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
6	Could the worker interact with people who are at an increased risk of being infected by COVID-19 (e.g. due to proximity with COVID-19 hotspots, such as a hospital)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Total Yes response			

# Yes Responses	Code	Risk rating	Controls
0	Green	Low Risk	None required
1	Yellow	Medium Risk	Required
2 – 3	Orange	High Risk	Required – can possibly continue to work at the facility
3 +	Red	Extreme Risk	Required – cannot work at the facility

Overall risk rating	<input type="checkbox"/> Proceed to Step 3	<input type="checkbox"/> Proceed to Step 3	<input type="checkbox"/> Proceed to Step 3	<input type="checkbox"/> Do not proceed*
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*Escalate immediately to Review Panel for advice on next steps

Hierarchy of Control Ranking	Examples of control measures to prevent transmission
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Elimination Reduce the opportunities for the virus to be introduced	<ul style="list-style-type: none"> • Can the work be done differently? • Can the worker work remotely or in another location including offsite?
Substitution Find alternative ways of undertaking their role (ie patient care, admin) that reduces the potential for transmission.	Not relevant
Engineering Controls Use physical barriers and other forms of hazard reduction for example: ventilation controls, patient separation	<ul style="list-style-type: none"> • Adequate/additional hand hygiene stations are available throughout all facilities. • Cleaning and disinfection – cleaning schedule is reviewed and amended to reflect increased requirements, including high touch surfaces to more frequently
Administrative controls Effective and consistent implementation of policies & protocols	<ul style="list-style-type: none"> • Signs and posters, are located throughout the hospital as reminders on physical distancing including in the tea/lunch rooms. • Training and education of staff on PPE donning/ doffing and hand hygiene
Personal Protective Equipment Last line of defence	<ul style="list-style-type: none"> • Worker is required to wear a P2/N95 mask have passed a fit check / fit test. • As per state or territory directives all healthcare workers are required to wear a surgical masks and protective eyewear (prescription glasses are not sufficient) • Standard contact and droplet precautions are implemented in all circumstances
Step 3: Detail specific controls that will be implemented & how they will address the identified risks	
Step 4: Detail actions agreed at review panel	
Step 5: Set review date	