



Risk Assessment Prompt Sheet



Ref: PS:046:00	Re: Biological Agents Risk Assessment for Health and Social Care Services during COVID- 19				
Issue date:	August 2022	Revised date:		Version No:	
Author(s):	National Health & Safety Function				
Note: Legislation:	<p>Under Section 19 of the <i>Safety, Health and Welfare at Work Act, 2005</i> and associated Regulations, it is the duty of the employer to identify the hazards and assess the associated risks in the workplace.</p> <p>In addition to this requirement, the Biological Agents Regulations require that the employer assesses any risk to the safety and health of employees resulting from any activity at that employer's place of work likely to involve a risk of exposure of any employee to a biological agent. It is the employer's duty to determine the nature, degree and duration of any employee's exposure to a biological agent and to lay down the measures to be taken to ensure the safety and health of such employees.</p> <p>All risk assessments must be in writing and the necessary control measures to eliminate or minimise the risks documented and implemented.</p>				
Scope:	<p>Prevention of exposure to a biological agent is an underlying principle of the Regulations. To ensure this preventative principle is followed a documented biological agents risk assessment must be undertaken to determine if existing workplace controls are adequate.</p> <p>The Biological Agents Risk Assessment form is available to download here</p> <p>The following non-exhaustive list of prompts based on the HPSC/HSE COVID-19 Infection Prevention and Control Guidance for Health and Social Care Workers who visit homes to deliver healthcare has been developed to support managers in consultation with their employees to review and update their Biological Agents COVID-19 Risk Assessments.</p> <p>Note 1: This prompt sheet is not a risk assessment form. The completed prompt sheet can be referenced and appended to the Risk Assessment Form to provide evidence of existing control measures in place.</p>				

No.		Yes	No	N/A	Comments
Section 1- General Measures for planning for delivery of healthcare/personal care in the home					
1	All Healthcare Workers (HCWs) have received Standard Precautions training to include: hand hygiene, respiratory hygiene and cough etiquette and training in transmission based precautions (Contact, Droplet & Airborne) including the appropriate use of Personal Protective Equipment (PPE)				
2	All HCWs have been offered vaccination (including boosters) against COVID-19				
3	HCWs are aware of the signs and symptoms of COVID-19; know to stay at home, self-isolate, test in line with current guidance and contact their Line Manager				
4	HCWs are aware who to contact if they are concerned about a service users' condition				
5	There is adequate availability of supplies including tissues, alcohol based hand rub (ABHR), hand wipes, cleaning products (including disinfectants and wipes) and personal protective equipment (PPE)				
6	All HCWs have reviewed HSE video resources / completed the HSELaND Modules on donning and doffing PPE				
7	In so far as possible the number of different HCWs caring for each service user is minimised and the number of different service users cared for by each HCW is also minimised				
8	There is a system in place to check in with service users in advance of a visit to confirm household members do not have symptoms of COVID-19 or awaiting testing				
9	The service is notified as soon as possible if the service user has a new cough, temperature or shortness of breath, is awaiting testing. Upon notification the service user is advised to contact their doctor right away				

No.		Yes	No	N/A	Comments
10	Sufficient time is allocated to adhere to any necessary Infection Prevention and Control (IPC) precautions, in particular to adhere to hand hygiene and safe donning, doffing and disposal of any personal protective equipment (PPE) required during the visit				
11	HCWs have received instruction on how to deal with the situation if they arrive at a service users' home and find that the service users' condition has deteriorated or other symptoms that suggest COVID-19				
12	<p>HCWs have been advised how to safely launder uniforms at home. Note: Key Principles</p> <ul style="list-style-type: none"> • A ten-minute wash at 60°C is sufficient to remove most micro-organisms • Using detergents mean that many organisms can be removed from fabrics at lower temperatures however, it is recommended that clothes are washed at the hottest temperature suitable for the fabric <p>Uniforms should be laundered separately from other household linen in a load not more than half the machine capacity at the maximum temperature the fabric can tolerate.</p>				
13	Local procedures are in place to manage service users' laundry, cooking utensils, and decontamination of equipment during COVID-19 in line with the recommendation outlined in HPSC/HSE COVID-19 Infection Prevention and Control Guidance for Health and Social Care Workers who visit homes to deliver healthcare				

No.		Yes	No	N/A	Comments
14	There is a system in place for managing and reporting incidents of COVID-19 in line with and the HSE Incident Management Framework				
15	There are arrangements in place for a Manager to notify the Health and Safety Authority when they become aware of a confirmed case of COVID-19 or death of an employee (e.g. informed by a medical practitioner, public health or other health professional) as a result of the employee carrying out work with the coronavirus (SARS-CoV-2) https://www.hsa.ie/eng/topics/covid-19 coronavirus information and resources/covid-19 guidance and advice/guidance and advice/covid 19 %E2%80%93 93 faq s and advice for employers and employees/reporting of covid-19 cases.html				
Section 2 Visiting a service users' home where there is no suspect/confirmed cases of COVID-19					
16	On arrival, HCWs confirm that no member of the household has symptoms of COVID-19				
17	HCWs are advised to perform hand hygiene prior to and after a visit to service users' home and have access to an adequate supply of ABHR				
18	Every HCW undertakes a dynamic risk assessment* PRIOR to performing a clinical care task, to inform the level of IPC precautions needed, including the choice of appropriate PPE for those who need to be present. <i>*an informal on-the-spot undocumented risk assessment which is undertaken prior to undertaking any task</i>				
19	HCWs don PPE as per the Current recommendations for the use of Personal Protective (PPE) in the context of the COVID-19 pandemic				

No.		Yes	No.	N/A	Comments
20	The wearing of masks is in line with the requirements of Current recommendations for the use of Personal Protective (PPE) in the context of the COVID-19 pandemic				
21	HCWs are advised to implement and adhere to physical distancing requirements with other household members				
22	HCWs limit the number of items including personal items brought into each service users' home				
23	Where it is necessary to bring personal items HCWs minimise contact with the service user and avoid using mobile phones during the visit				
24	If a service user or a member of the household has symptoms that suggest COVID-19, HCWs are advised to leave the room if possible. If this is not possible HCWs are advised to maintain a distance of 1 m and adhere to all appropriate IPC guidance, notify their Line Manager and if the person is on their own notify a family member or contact person				
25	On entering the service users' home HCWs avoid unnecessary direct touching gestures including handshaking				
26	HCWs do not eat or drink in the service users' home				
27	HCWs implement physical distancing requirements when it is practicable to do so				
28	When physical distancing is not practicable, standard precautions are implemented for all service users and transmission based precautions implemented as appropriate				

No.		Yes	No	N/A	Comments
Implementing Standard Precautions					
1. Hand Hygiene					
29	<p>HCWs apply <i>WHO My 5 Moments for Hand Hygiene</i> as follows:</p> <ul style="list-style-type: none"> • Before and after use of gloves, equipment decontamination and after handling of waste and laundry • Before a clean/aseptic procedure such as assisting a service user to brush their teeth, and before preparing/ handling food or assistance with feeding or taking oral medicines • After contact with body fluids such as bathing a service user who is incontinent, handling soiled personal clothing and bed linen and clearing up spills of urine, faeces, vomit and handling waste • After touching the service user, such as after any personal care activities including washing and dressing or assisting with mobility • Immediately after removing gloves • After leaving the home when care delivery is finished 				
2. Respiratory Hygiene					
30	All HCWs adhere to respiratory hygiene and cough etiquette				
31	All service users are advised to cover their nose and mouth with a tissue when coughing and sneezing				
32	Disposable single use tissues are used to cover the nose and mouth when sneezing, coughing or wiping and blowing the nose				
33	HCWs and service users are advised to keep hands away from their eyes, mouth and nose				
On completion of the visit to the service users' home					
34	HCWs perform hand hygiene after leaving the service users' home				

No.		Yes	No	N/A	Comments
Section 3 - Additional Measures when performing a planned home visit to a service user with suspect or confirmed COVID-19					
Visiting the service users' home					
35	HCWs establish the nature of the service users current condition				
36	HCWs establish if there is a house porch, hallway or corridor near the entrance and request that a small table or chair be placed there to allow the HCW don PPE and perform hand hygiene measures before engaging with the service user				
37	HCWs establish if there is a house porch, hallway or corridor near the entrance and request that a small table or chair be placed there to allow the HCW don PPE and perform hand hygiene measures before engaging with the service user				
38	HCWs telephone the service user to request that the entrance door be left ajar or that the key is the lock to allow the HCW to enter without engaging with people who live in the residence				
39	HCWs request that all other household members remain in a separate room throughout the duration of the visit				
40	HCWs request that all animals are contained throughout the duration of the visit				
41	HCWs have access to black waste bags, plastic bag, ABHR, disinfection wipes as appropriate				
42	HCWs performs hand hygiene, dons PPE appropriate to the task and explains to the service user the limit on contact				

No.		Yes	No	N/A	Comments
On completion of the visit to the service users' home					
43	HCWs remove PPE in accordance with the correct sequence as per the Current recommendations for the use of Personal Protective (PPE) in the context of the COVID-19 pandemic and HSE PPE donning and doffing video resources				
44	HCWs removes gloves and performs hand hygiene with ABHR				
45	HCWs removes apron or gown and disposes in a domestic waste bag				
46	HCWs removes mask and discards into the waste bag				
Section 4 - Additional measures when completing National New Born Screening in a service users' home where household members have suspected or confirmed COVID-19 Infection					
Visiting the service users' home					
47	<ul style="list-style-type: none"> • PHN limits contact to the parent/guardian who is asymptomatic or with the mildest symptoms where possible • PHN establishes if there is a room directly off the entrance hall and arranges to meet the parent/guardian with the infant there • PHN completes as much of newborn bloodspot screening sample (NBBSS) card as possible prior to arriving at the house and mark the card as biohazard • PHN requests that the parent/guardian has their own pen to sign the consent form 				

No.		Yes	No	N/A	Comments
Entering the service users' home					
48	<ul style="list-style-type: none"> • PHN requests the parent / guardian of the infant to wear a face mask • PHN opens PPE and places the plastic sheet on a table top or chair in the entrance area to provide a clean work area • PHN leaves the drying box and sharps container for the specimen open on the clean work area provided by the sheet • PHN dons PPE as per the Current recommendations for the use of Personal Protective (PPE) in the context of the COVID-19 pandemic and enters the room where the parent and infant are waiting 				
On completion of the visit to the service users' home					
49	PHN: <ul style="list-style-type: none"> • continues wearing the PPE and returns to the clean workspace carrying the sample in gloved hand • Inserts the card into the drying box, being careful not to touch the outside of the box • Removes gloves and performs hand hygiene with ABHR • Removes PPE and disposes in the household waste bag • Performs hand hygiene with ABHR • Puts on a fresh pair of gloves • Closes the drying box • Removes gloves and discard into the waste bag • Performs hand hygiene with ABHR • Safely disposes of the lancet in a sharps bin • Asks parent to perform hand hygiene before signing consent form • Takes the drying box from the clean work area as you leave the residence 				

No.		Yes	No	N/A	Comments
After leaving the service users' home					
50	PHN packages and labels any specimens in accordance with the HSE (2019) Guidelines for the Preparation for Transport of Patient Specimens and other Biological Materials and A Practical Guide to Newborn Bloodspot Screening in Ireland,9th Edition				
Section 5 - Healthcare Risk Waste					
51	HCWs discard all used PPE and other health risk waste items into household waste bag, this bag is tied and placed in a black bin bag (double bagged) for disposal in household domestic waste stream after 72 hours				
52	HCWs engage the temporary closure on sharps bins when not in use, and fill in accordance with manufacturers fill line				
53	Sharps bins are wiped down with disinfection wipes prior to removal from service users' residence				
Section 6- PPE (General)					
Infection Prevention and Control practice supported by appropriate use of PPE is important to minimise risk to service users of healthcare associated COVID-19.					
<i>Note: The rational, correct and consistent use of PPE can help reduce the spread of COVID-19. PPE effectiveness depends strongly on adequate and regular supplies, adequate training, appropriate hand hygiene and appropriate human behaviour. The fundamental principle of the hierarchy of controls is that personal protective equipment (PPE) should only be used as a last resort after all other precautions have been implemented.</i>					

No.		Yes	No	N/A	Comment
54	The choice and selection of PPE is based on risk assessment and in line with the Current recommendations for the use of Personal Protective (PPE) in the context of the COVID-19 pandemic				
55	There is access to adequate supplies of onsite PPE at the point of care				
56	The wearing of masks is in line with the requirements of Current recommendations for the use of Personal Protective (PPE) in the context of the COVID-19 pandemic				

Use the columns below to document any local existing control measures not referenced above

No.	