# Covid-19s Individual Health Assessment Tool for Managers.

Managers are advised to ask all their direct reports whether they consider themselves to be at higher risk of suffering adversely from COVID-19 and to check-in about their general wellbeing.

If your staff member does believe themselves to be at greater risk, we recommend that you work through this health assessment tool and have a conversation with them around their possible risk factors. Help is available from your HR Business Partner to support you with this assessment if required. There is no requirement to complete this tool with all staff members.

Please consider the type of role and the level of risk the individual may have, using the return to on site working risk assessments you will have completed for your area. For example, a role that has higher face to face contact with a large number of people is likely to be at increased risk of exposure depending on the measures in place locally

Staff are advised to read the information [on getting to campus](https://www.ucl.ac.uk/coronavirus/keeping-safe-campus/getting-campus) and general advice on [checking-in with your team’s wellbeing](https://www.ucl.ac.uk/human-resources/covid-19-having-conversation-your-staff-member).

Face coverings should be worn on campus at all times when around others. Please see [Keeping our community safe](https://www.ucl.ac.uk/coronavirus/keeping-safe-campus/keeping-our-community-safe) for further information.

## Health Risk Assessment

The health risk assessment tool below aims to assess individual medical risk to identify those employees who may be at greater risk of a serious illness if they develop COVID-19. It is based on the emerging data and available evidence.

Managers are advised to listen carefully to staff concerns, provide support and consider reasonable adjustments or redeployment for any staff who are identified as being at greater risk.

* This tool is intended to supplement your department’s the general return to on site working risk assessment(s) and to help you with supporting your staff by being aware of any increased risks they have from exposure to COVID-19 and creating a plan to mitigate those risks.
* reassuring concerned staff who are not at increased risk.
* identifying those individuals who may require additional control measures to support a reduction in the risk of contracting COVID-19 when there is a higher risk of poor health outcomes.

Adjustments to mitigate any risks identified may include:

* Remote working if possible.
* Moving to a lower-risk role (for example where social distancing can be easily maintained)
* Avoiding public transport, especially at peak times.
* Altering hours and workload

Any referral to Workplace Health will be assessed in confidence by an occupational health practitioner and will involve a detailed consultation using the bio-pschyo-social model of health assessment. We will then offer an opinion on the employee’s fitness to return to campus, and make suggestions for adjustments.

The questions below are directed at your staff member. They are designed so that details about any medical condition they may have do not have to be given if the staff member would prefer not to.

If your staff member would prefer to have the conversation confidentially and not with their manager, then please contact Workplace Health for advice.

We suggest you make a note of their responses for your records, considering UCL’s Legal Service’s [Personal Data Overview](https://www.ucl.ac.uk/data-protection/guidance-staff-students-and-researchers/practical-data-protection-guidance-notices/personal-data) when doing so. Please ensure that personal data is stored securely and confidentially.

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | **Yes**  | **No** |
| 1. | Are you male?We ask this question as men are at increased risk compared to women of a more severe disease if they develop COVID-19. This risk is increased if there are other factors present such as age, ethnicity (BAME men are at greater risk) or relevant medical conditions. |  |  |
| 2. | Are you over the age of 50?People aged 50 years old or over, especially with comorbidities, are at increased risk of a serious illness with COVID-19. Consider referral to Workplace Health if there are specific concerns. |  |  |
| 3. | The Government are advising those who are at increased risk of severe illness from COVID-19 to be particular stringent in following social distancing measures. This group includes those who are diagnosed with the following: *(tick Yes if any apply - you do not have to specify which it is to your manager)* * Chronic (long-term) respiratory diseases, such as asthma, chronic obstructive pulmonary disease (COPD), emphysema or bronchitis
* Chronic heart disease, such as heart failure
* Chronic kidney disease
* Chronic liver disease, such as hepatitis
* Chronic Neurological conditions, such as Parkinson’s disease, motor neurone disease, multiple sclerosis (MS), a learning disability or cerebral palsy
* Diabetes
* Spleen problems – for example, sickle cell disease or removed spleen
* A weakened immune system as a result of conditions such as HIV and AIDS, or medicines such as steroid tablets or chemotherapy
* Being overweight (a body mass index (BMI) of 30 or above)
 |  |  |
| 4. | Do you consider yourself to be Black, Asian or of minority ethnic origin (BAME)? Emerging evidence suggests there are three key characteristics that can affect vulnerability and risk. These are Age, Gender and Ethnicity. Older people, men, and people from BAME communities seem to be at greater risk from COVID-19. Public Health England (PHE) have now published their review of the disparities in the risk and outcomes of COVID-19. This shows that there is an association between belonging to some ethnic groups and the likelihood of testing positive and dying with COVID-19. [Read the full report](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/892376/COVID_stakeholder_engagement_synthesis_beyond_the_data.pdf). |  |  |
| 5. | Are you 28 weeks pregnant or more; do you have any underlying health issues?The advice from the Chief Medical Officerhas changed recently If you are in your first or second trimester (less than 28 weeks’ pregnant), with no underlying health conditions, you should practise [social distancing](https://www.gov.uk/government/publications/staying-alert-and-safe-social-distancing/staying-alert-and-safe-social-distancing) but can choose to continue to work even in a public-facing role, provided the necessary precautions are taken. If you are in your third trimester (more than 28 weeks’ pregnant), or have an underlying health condition – such as heart or lung disease – you should work from home where possible. |  |  |
| 6. | Have you been previously advised to shield either by letter or by your treating doctors because you are extremely clinically vulnerable?This will include individuals with cancer or recent/current cancer treatments, organ or stem cell recipients, severe heart or lung disease and conditions or medications that make them extremely vulnerable to catching infections. [View PHE guidance](https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19). |  |  |
| 7. | Are you living with or have specific caring responsibilities for someone who has been advised to shield because they are extremely clinically vulnerable?  |  |  |

## Risk assessment outcome:

**Tier 1:** If the answer is “No” to all questions or “Yes” to question 1 only: this indicates standard/low risk and routine workplace risk management measures as identified in the general COVID-19 workplace risk assessment would be sufficient.

**Tier 2:** If the answer is “Yes” to any one or more of questions 2-5: there is a potentially increased risk of significant illness with COVID-19. Please discuss this with your staff member and see what you can agree locally to manage the risks that have been identified. This could include making adjustments to where the work is undertaken, the hours worked, or the tasks they are required to undertake as part of their role. If you feel that you would like advice on mitigating risks because the medical situation is complex, or your employee would prefer to discuss their health concerns in confidence with Workplace Health, please refer them following the [management referral process](https://www.ucl.ac.uk/human-resources/health-wellbeing/workplace-health/what-we-do/manager-referrals-workplace-health).

**Tier 3**: If the answer is “Yes” to questions 6 or 7: Although government guidance is those who were previously advised to shield can now return to work, with suitable control measures, UCL’s position is that they should continue to work from home. UCL is monitoring the situation and will keep this policy under review. Therefore tier 3 employees should not be asked to come back to campus at this time.

Note – previously this tool had four tiers, tiers three and four have now been merged.

**Consideration of Exposure Factors**

Once you have established the health risk assessment outcome e.g tier 1, 2 or 3 you should then consider the level of potential exposure to the individual from their travel to/from work and from the numbers of people they come into contact with because of the type of job they do. Potential increase in exposure to the COVID 19 virus should be considered for the following factors;

* Mode of Transport
* People Contact

(Note:- All buildings are Covid secure and therefore there is no further impact on risk from the work environment. Tier 3 individuals are already deemed as high risk therefore this is the only consideration required)

**Transport Exposure**

Table 1 considers for each Tier the potential impact on risk caused by the individual’s method of transport into work. There are many alternative ways to travel to and from work but essentially it is only where public transport is used that there is a higher risk of coming intoprolonged contact (more than 15 mins)with an infected person. Other methods such as cycling, walking, motorcycling etc should not change the risk of the individual risk.

To mitigate the transport risks managers should discuss options for the individual of changing their method of transport. If this is not viable then consideration should be given to arranging for them to travel at less busy times and/or reducing the journey time on public transport for example by walking/cycling from mainline stations instead of using the underground/bus or working at home for part of the week etc.Journeys longer than 15 mins could potentially present an increasing risk which becomes proportionally greater with the length of the journey time if spent in the vicinity of an infected person. This risk is minimized, even on longer journey times, by the individual travelling at less busy times, keeping to the social distancing guidelines, wearing of face covering and frequent hand washing.

**Table 1: risk level including transport exposure**

|  |
| --- |
| ***Risk*** |
| ***Personal Health*** | ***Mode of Transport*** |
| ***Other****eg bicycle, walking* | ***Public****eg train, bus* |
| ***Tier 1*** | ***Low*** | ***No change*** | ***Potential increase*** |
| ***Tier 2*** | ***Potential increase*** | ***No change*** | ***Additional increase*** |
| ***Tier 3*** | ***High*** | ***No change*** | ***No change*** |

**People Exposure**

Table 2 considers for each Tier the potential impact on risk caused by the number of people the individual may come intocontact as a result of their work. Where the individual is in contact with low numbers there should not be any change to the individual risk. Where the individual’s work activities expose them to high numbers of people, either because of frequent prolonged contact with many individuals throughout the day, or because of prolonged contact with large groups, then there is a potential increased risk of coming into contact with an infected person. In Covid secure buildings the risk of prolonged contact is mitigated through social distancing, face coverings, reduction in building capacity and increased ventilation.

To furthermitigate the risks of people exposure managers should discuss options for the individual of remote working if possible, altering hours and workload or moving to a lower-risk role (for example where social distancing can be easily maintained).

**Table 2: risk level including people exposure**

|  |
| --- |
| ***Risk*** |
| ***Personal Health*** | ***People Contact*** |
| ***Low numbers*** | ***High numbers**** *frequent contact with individuals across the day*
* *prolonged contact with a large group*
 |
| ***Tier 1*** | ***Low*** | ***No change*** | ***Potential increase*** |
| ***Tier 2*** | ***Potential increase*** | ***No change*** | ***Additional increase*** |
| ***Tier 3*** | ***High*** | ***No change*** | ***No change*** |

The tables should assist management in considering the risk of their staff with a potential return to work by considering both their individual health risk in conjunction with their level of potential exposure. Whilst the tables are not definitive, they are a quick guide to help managers decide if more considerations are needed.

**If an individual in the Tier 3 category believes they are fit to work or wishes to work, please refer them to Workplace Health as for Tier 2.**

To make a management referral follow the UCL manager [referral to Workplace Health](https://www.ucl.ac.uk/human-resources/health-wellbeing/workplace-health/what-we-do) process. Managers may also seek support in having difficult conversations from Care First, our Employee Assistance provider or your HR Business Partner.

You may still decide to refer to Workplace Health for reasons that are not identified above. For example, if your staff member has a high level of anxiety which is having a detrimental impact on their wellbeing. Please make the reason for referral clear in your submission.

**Maintaining confidentiality and seeking permission for onward referral**

If it is apparent through your discussions that further support from UCL Workplace Health or Care First (our Employee Assistance Programme partner) you must discuss with your employee what information you wish to share and obtain their consent to do so. If the employee does not wish to be referred, please contact you HR Business Partner for further advice.

For most people, formal referral to Workplace Health (WH) will *not* be required and manager and staff member will be able to manage risks locally using information from the [NHS](https://www.nhs.uk/conditions/coronavirus-covid-19/people-at-higher-risk/whos-at-higher-risk-from-coronavirus/) on general risk factors and [Public Health England](https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19#parents-and-schools-with-clinically-extremely-vulnerable-children) guidance on vulnerable and extremely vulnerable people.