	M	ode	el Risk	Asse	ssmen	t		Ref no.	COVID-19	TI NEO		
Activ	rity				er medical			Status		This is an NFCC generic national risk assessment provided in respect of		
Loca	tion							Initial assess.		Delivery of PPE and other		
Secti	ion			Reviewed						medical supplies to NHS		
Assessed by						Specific	;	Next review	Monthly or following changes, including to relevant guidance, which may alter residual risk rating.	TOPHONOLOGICALINITY		
Role	/No/Dept.					Generic	X	Version no.	1.5	and safety structures.		
					Likelihood			1				
	Severity		1. Very	2. Unlikely	3. Possible	4. Likely	5. Almost		Risk Ra	ting		
			Unlikely	Officery	1 0331510	Likely	Certain	Low Risk	Proceed			
1	No Injury		1	2	3	4	5	1-5	1100000			
2	First Aid		2	4	6	8	10	Medium Risk	Review control	measures - proceed		
3	7 Day Injury		3	6	9	12	15	6-12	Neview control measures proceed			
4	Major Injury		4	8	12	16	20	High risk	Do Not Proceed	d		
5 Fatality			5	10	15	20	25	15-25	DO NOT FLOCEED			

	MEASURES OF LIKELIHOOD (PROBABILITY)										
LEVEL	DESCRIPTOR	CHANCE	DESCRIPTION								
1	Very unlikely	0 to 4%	The injury/event may occur only in exceptional circumstances.								
2	Unlikely	5 to 24% The injury/event could occur at some time.									
3	Possible	25 to 64%	The injury/event should occur at some time.								
4	Likely	65 to 94%	The injury/event is expected to occur in most circumstances.								
5	Almost Certain	95 to 100%	The injury/event will occur in most circumstances.								

	MEASURES OF SEVERITY (CONSEQUENCE)										
LEVEL	DESCRIPTOR	DESCRIPTION									
1	Negligible	Minor local first aid treatment (e.g. minor cuts/abrasions) causing minimal work interruption									
2	Slight	Injury requiring formal first aider treatment causing interruption of work for 7 days or less. Moderate financial loss									
3	Moderate	RIDDOR lost-time injuries. Medical treatment required. Moderate environmental implications. High financial loss. Moderate loss of reputation. Moderate business interruption.									
4	Major	Major disabling injuries. High environmental implications. Major financial loss. Major loss of reputation.  Major business interruption.									
5	Catastrophic	Single or multiple deaths involving any persons.									

			Person at Risk		Ris	sk Ra	ing			lew Risk Rating
Activity	Hazard	Potential consequences	1-FRS 2-Public 3-Other blue light 4-Other e.g. specialist	Agreed Existing Control Measures	L	X S =	RR	Additional Control Measures	L	XS=RR
Selection of correct staff	Inappropriate selection of staff.	Minor injury     Physiological stress     Inappropriate planning leading to inappropriate actions being taken     Inability to carry out required activities     Reputational damage to the Service	1, 4	Early engagement of safety representatives via joint H&S committee meetings to assist in highlighting selection in correct staff     Personnel to be fit and able to undertake the activity e.g. not from an identified vulnerable group     Volunteers to be instructed that those who during this activity have had close contact (as defined in official guidance) with a confirmed COVID-19 patient should inform their appropriate manager     Driving licence checks prior to activity commencing     Fire cover should not be reduced or crewing levels altered to undertake the activity     Volunteers to be suitably trained to conduct identified work for the agreed activity.     Activity to be monitored and reviewed by enabling FRS	1	2	2			
Preparation for activity prior to attending mobilising venues	Fatigue prior to commencement of activity which will impact on performance	<ul> <li>Inappropriate preparation leading to inappropriate actions being taken</li> <li>Minor injury</li> <li>Physiological stress</li> <li>Reputational damage to the Service</li> </ul>	1, 4	Early engagement of safety representatives via joint H&S committee meetings to assist in highlighting safe systems of work     Sufficient rest before attending work to undertake activity.     Staff to be aware of the need to be sufficiently nourished and hydrated prior to attendance at workplace     Staff to be instructed that those who during this activity have had close contact (as defined in official guidance) with a confirmed COVID-19 patient should inform their appropriate manager	1	1	1			

	1	1	1	· · · · · · · · · · · · · · · · · · ·					
Attending/working from unfamiliar venues (collecting PPE/medical supplies)	Unfamiliarity with location layout and facilities.	Slip, trips and falls Minor injury Musculoskeletal injury Inability to continue with activities Potential exposure to COVID-19	1, 4	Adhere to working time directive to ensure excessive hours are not worked.     Activity to be monitored and reviewed by enabling FRS     Identify buildings/parts of buildings (designated room/s) being utilised for the activity     Induction of building including information on evacuation procedures.     Lighting provision     Pedestrian routes identified     Safety brief and premise rules.     Access fobs be issued where required.     First aid/Welfare facilities.     Location of defibrillator     Individuals to be briefed in advance not to attend if showing signs and symptoms of COVID-	1	2	2		
				<ul> <li>Social distance guidance for 2 metre social distancing to be adhered to wherever possible.</li> <li>Relevant PPE to be worn whilst undertaking this task as detailed in Section A1</li> </ul>					
Working with other agencies	Lack of understanding of agency specific terminology	Wrong procedures undertaken     Frustration     Delay in getting to work	1, 4	Training Briefing explaining glossary of terminology	1	1	1		
Vehicle checks prior to driving the vehicle	Non- roadworthy/un- familiar vehicle being utilised for deliveries	Vehicle Collison Minor Injury Major injury Adverse effect on FRS responders' mental health and wellbeing Reputational damage to the Service	1, 2	Driving licence checks prior to activity commencing     Vehicle familiarisation training     Vehicle inspection and checks completed and recorded at start of each duty period     Training on all equipment that FRS personnel will use or be exposed to prior to activity commencing.     Ensure staff have support available for advice with regards to occupational health needs.     Access to FRS Occ Health facilities	1	4	4		
Loading vehicle with PPE and medical supplies for delivery	Poor lifting technique for heavy objects and/or moving equipment	Slips, trips and falls     Minor Injury     Strains and sprains     Musculoskeletal injury     Major injury	1, 4	Health and safety briefing to reiterate points in A2     Manual Handling training     Sort loads into manageable sizes     Use mechanical lifting/carrying aids at all times when available	1	4	4		

				Team lifting/carrying Predetermined travel routes PPE for manual handling appropriate to the activity e.g. gloves, safety boots etc Avoid manual handling if possible Ensure all group manual handling activities are co- ordinated Utilise any carrying handles Adhere to safe lifting weight					
Routine driving undertaking the activity	RTC	Major Injury     Major vehicle damage     Minor Injury     Driver fatigue     Adverse effect on FRS responders' mental health and wellbeing     Loss of life     Reputational damage to the Service	1, 2	<ul> <li>signage</li> <li>Full induction, information and training session including familiarisation driving session</li> <li>FRS assessed drivers only to be considered for driving activities</li> <li>All vehicles confirmed as road worthy by start of shift, tested and recorded as such.</li> <li>Vehicle is secure (lockers and doors closed) and safe to drive</li> <li>Use of seat belts</li> <li>Awareness of road and weather conditions</li> <li>Adhere to road traffic act (No FRS exemptions)</li> <li>Driving licence checks prior to activity commencing</li> <li>Drivers to be aware of the process for the reporting of RTC's in Service vehicles and non FRS vehicles</li> <li>Ensure staff have support available for advice with regards to occupational health needs.</li> <li>Access to FRS Occ Health facilities</li> </ul>	1	4	4		
Low speed manoeuvring on arrival at site of delivery	Collisions with others/objects	Minor vehicle damage     Minor Injury     Reputational damage to the Service	1, 2	Driving licence checks prior to activity commencing     Familiarisation training     Vehicle inspection and checks completed and recorded at start of each duty period     Adherence to the road traffic act at all times     Adherence to local/on-site speed restriction     Appoint colleague to assist as banks person with manoeuvre outside of vehicle and using hand gestures where required.	1	3	3		

				Adhere to agreed signals from appointed banks person     Any occurrences of collision will be reported and dealt through fire service procedures and H&S team (which will include FBU H&S Rep) also informed which will inform a review of this risk assessment					
Dismounting the vehicle, gathering up of parcel/s and delivering of parcels	Hit by moving traffic	Major Injury     Minor Injury     Damage to/loss of parcels     Reputational damage to the Service	1, 2	Health and Safety brief to reiterate points in in section A2     Training and instruction     Route planning     Use of vehicle hazard lights.     Use of Hi-Viz jackets at all times.     Safe dismount from vehicle (kerb side).     Deliveries to be made during daylight hours wherever possible     Deliveries to be made to a specified location away from public areas	1	5	5		
	Parcel size/shape/load inappropriate for carrying	Uncontrolled descent of parcel Damage to parcel Musculoskeletal injuries Strains and sprains Minor injuries Failure to deliver items Reputational damage to the Service	1	Health and Safety brief to reiterate points in in section A2     Manual Handling training     Sort loads into manageable sizes     Consider use of mechanical carrying aids     Team lifting/carrying     Pre-determined travel routes     Deliveries to be made during daylight hours wherever possible	1	2	2		
Handover of PPE/medical supplies	Delivery made to person/s other than intended recipient	Psychological Distress Failure to deliver items Items ending up with inappropriate/unintend ed persons NHS/Care staff placed at additional risk Reputational damage to the Service	1, 4	Ensure the occupier/carer is aware of the time of arrival of parcel delivery whenever possible.     Deliveries to be made at a prearranged time     Deliveries to be made to a specified location     Deliveries to be made to a pre nominated person/s     Check recipients name prior to handover     Agree measures with partner agency for proof of receipt of goods received     Personnel to show occupier Service ID whilst maintaining social distancing	1	5	5		

		<ul> <li>Psychological Distress</li> <li>Failure to deliver items</li> <li>Delay in delivery to further locations</li> <li>Reputational damage to the Service</li> </ul>	1, 4	<ul> <li>Ensure the occupier/carer is aware of the time of arrival of parcel delivery whenever possible.</li> <li>Deliveries to be made to a specified location</li> <li>Deliveries to be made at a prearranged time</li> <li>Deliveries to be made to a pre nominated person/s</li> <li>Personnel to have access to mobile phone</li> <li>Items being delivered must not be left without authorisation</li> <li>Withdraw and attempt to contact intended parcel recipient by other means</li> </ul>	1	4	4		
to results identified that	elivering items recipient who bsequently is entified as ving the DVID19 virus	Impact on day to day work Increased risk of spreading the COVID 19 infection Adverse effect on FRS responders' mental health and wellbeing Loss of working time. Impact on an operational response Major illness Loss of life Adverse impact on the NHS Reputational damage to the Service	1	<ul> <li>Health and Safety brief to reiterate points in in section A2</li> <li>Training</li> <li>The Health and Safety briefing to include roles &amp; responsibilities plus first aid/welfare arrangements</li> <li>No entry to be made into health or care premises.</li> <li>All activities will be under supervision by competent person/s</li> <li>COVID 19 PPE as outlined in section A1</li> <li>Face fit testing of RPE</li> <li>Provision of clinical waste bag</li> <li>Disposable PPE must be placed in the clinical waste bag for disposal after each use</li> <li>Cordons</li> <li>Keeping a minimum distance from individuals of 2 metres wherever possible</li> <li>Personal hygiene - washing hands, use of hand sanitising gels.</li> <li>Existing injuries to be covered</li> <li>Ensure staff have access available for advice with regards to occupational health needs.</li> <li>Adhere to home care guidance referred to in Section B</li> <li>Ensure donning and doffing procedure is strictly adhered to. See Section B</li> <li>Work wear considered to be contaminated must be</li> </ul>	1	5	5		

			laundered by a professional body  • 'Ensure contaminated PPE is treated as medical waste.  • Any confirmed contamination to be treated under RIDDOR.  • Staff to be instructed that those who during this activity have had close contact (as defined in official guidance) with a confirmed COVID-19 patient should inform their appropriate manager  • Any suspected contamination from a member of the public must be recorded as a safety event and the risk assessment reviewed to consider additional control measures  • If personnel become symptomatic they will selfisolate and follow test and trace guidance					
FRS personnel transmitting disease/virus to person/s whilst delivering PPE and other medical supplies	Reputational damage to the Service Increased risk of spreading the COVID 19 infection wider Adverse effect on FRS responders' mental health and wellbeing Major illness Loss of life Adverse impact on the NHS	1, 4	representatives via joint H&S committee meetings to assist in highlighting safe systems of work  • Health and safety briefing/inductions when attending workplace prior to conducting activity, this to cover all SSOW and RA control measures  • Individuals to be briefed in advance not to attend workplace if showing signs and symptoms of COVID-19.  • Relevant PPE to be worn whilst undertaking this task as detailed in Section A1  • Provision of clinical waste bag  • Disposable PPE must be placed in the clinical waste bag for disposal after each use  • Social distance guidance for 2 metre social distancing to be adhered to at all times.  • If personnel become symptomatic they will selfisolate  • If personnel become symptomatic whilst delivering to vulnerable persons the activity is to cease immediately	1	5	5		

	Entering the premise	Adverse effect on FRS responders' mental health and wellbeing Stress Anxiety Infection. Requirement to provide first aid to an occupant. Loss of working time. Impact on an operational response. Spreading an infection and/ or bio-hazard. Increased potential exposure to COVID 19 virus Spreading an infection/bio-hazard within the FRS family Loss of life Reputational damage to the Service	1 & 2	<ul> <li>Health and Safety brief to reiterate points in in section A2</li> <li>COVID 19 PPE as outlined in section A1</li> <li>Maintain a minimum distance from individuals of 2 metres wherever possible</li> <li>Request attendance of ambulance via 999</li> <li>Provide first aid only if safe to do so in requisite PPE See Section A1</li> <li>If COVID 19 is suspected, then ensure COVID 19 PPE is worn</li> <li>Do NOT perform rescue breaths or mouth-to-mouth resuscitation</li> <li>Ensure staff have access available for advice with regards to occupational health needs.</li> <li>First aid/trauma training.</li> <li>Adhere to home care guidance. See Section B</li> <li>Face fit testing of RPE</li> <li>Ensure donning and doffing procedure is strictly adhered to. See Section B</li> <li>Provision of clinical waste bag</li> <li>Disposable PPE must be placed in the clinical waste bag for disposal after each use</li> <li>Work wear considered to be contaminated must be laundered by a professional body</li> <li>Ensure contaminated PPE is treated as medical waste</li> <li>Personal hygiene - washing hands, use of hand sanitising gels.</li> <li>Any suspected contamination from a member of the public must be recorded as a safety event and the risk assessment reviewed to consider additional control measures.</li> </ul>	2	3	6		
Post-delivery activities	FRS personnel becoming infected or showing symptoms of an infection	FRS responders' mental health and wellbeing Loss of working time. Impact on an operational response. Spreading the infection within the FRS family	1	<ul> <li>FRS personnel showing symptoms should immediately cease any further activity, follow self-isolation guidance and put themselves forward for a test</li> <li>Staff put forward for a test are to be informed they will not return to work until they have received a negative test result.</li> </ul>	1	5	5		

		Loss of life     Impact on the NHS.     Reputational damage to the Service		Staff to be instructed that those who during this activity have had close contact (as defined in official guidance) with a confirmed COVID-19 patient should inform their appropriate manager  Seek medical advice - NHS 111 or 999 if medical emergency. Inform partner agency and/or mobilising authority of suspected contamination risk Inform appropriate manager Access to professional counselling services will be communicated to all staff. If personnel become symptomatic they will selfisolate and follow test and trace guidance Any confirmed contamination to be treated under RIDDOR					
	FRS personnel becoming infected whilst cleaning FRS vehicle used for deliveries	Infection from contamination     Spreading the COVID 19 infection.     Loss of working time	1	All activities will be under supervision by appropriate manager Appropriate equipment supplies provided at place of cleaning Routine cleaning of vehicle during shift Use of PPE including gloves, gown, face covering and eye protection Avoid touching areas of your face with your hands. Handover of non FRS supplied vehicles for supplier to clean as appropriate	1	5	5		
Disrobing workwear at the end of shift	Cross-contamination	Spreading the infection Taking the contamination home with you Contaminating family members Unwarranted impact on the NHS. Reputational damage to the Service	1	Establish clean & dirty changing areas on site with warm water and soap     Showering to take place at place of work     Establish physical separation of clean and dirty areas     Ensure donning and doffing procedure is strictly adhered to. See Section B     Provision of clinical waste bag     Disposable PPE must be placed in the clinical waste bag for disposal     Use of alcohol / sterile hand gels.	1	5	5		

	Contamination of personnel's work wear/personal clothing	Spreading the infection Taking the contamination home with you Contaminating family members Unwarranted impact on the NHS.	1	<ul> <li>appropriate storage facilities for personal clothing</li> <li>Requirement for disposal point for contaminated PPE/ uniform etc.</li> <li>Health and Safety brief to reiterate points in in section A2</li> <li>Work wear considered to be contaminated must be laundered by a professional body</li> <li>Establish clean &amp; dirty changing areas on site with warm water and soap wherever possible</li> <li>Ensure donning and doffing procedure is strictly adhered to. See Section B</li> <li>Appropriate storage facilities for personal clothing</li> <li>Change of clothes prior to travelling home</li> <li>Requirement for disposal point for contaminated PPE/ work wear etc.</li> <li>FRS to utilise Staff for this</li> </ul>	1	5	5		
Consideration and provision of welfare facilities	Inappropriate persons undertaking activities	Adverse effect on FRS responders' mental health and wellbeing     Stress     Anxiety     Infection of FRS responders     Loss of working time.     Unwarranted impact on the NHS.     Reputational damage to the Service	1	activity  Health and Safety brief to reiterate points in in section A2  Information to be shared to all potential Staff re what the activity will entail  Training to be given prior to activity commencing  Minimal persons exposed for the minimum duration  Ensure staff have support available for advice with regards to occupational health need  Access to FRS Occ. Health facilities  Staff put forward for a test are to be informed they will not return to work until they have received a negative test result.  Staff to be instructed that those who during this activity have had close contact (as defined in official guidance) with a confirmed COVID-19 patient should inform their appropriate manager	1	3	3		
	Inadequate welfare and	Stress     Anxiety	1	Early engagement of safety representatives via joint H&S	2	2	4		

	hygiene facilities provided	Infection of FRS responders from biohazards Adverse effect on FRS responders' mental health and wellbeing Loss of working time. Potential exposure to COVID-19 Unwarranted impact on the NHS. Reputational damage to the Service		committee meetings to assist in debriefing the work activity  Health and Safety brief to reiterate signs and symptoms of COVID-19  Training/guidance to be given prior to activity commencing  Suitable facilities for adequate hand hygiene to be adopted and adhered to  Suitable facilities for practitioners to change clothing  Showering & washing facilities to be provided  Ensure staff have support available for advice with regards to occupational health needs.  Staff to be instructed that those who during this activity have had close contact (as defined in official guidance) with a confirmed COVID-19 patient should inform their appropriate manager  Seek medical advice - NHS 111 or 999 if medical emergency.  Ensure staff have support available for advice with regards to occupational health needs.  Access to professional counselling services to be communicated to staff.  Employee Assistance programme or service equivalent to be flagged and highlighted to all staff  Review the risk assessment to ensure suitable and sufficient control measures are in place					
Post activity considerations	FRS personnel becoming infected or showing symptoms of an infection.	<ul> <li>Stress</li> <li>Anxiety</li> <li>Psychological stress</li> <li>Adverse effect on FRS personnel mental health and well being</li> <li>Further transmission of COVID-19 within the workplace</li> <li>Spreading the transmission to home premise</li> <li>Loss of working time.</li> <li>Impact on an operational response.</li> </ul>	1	<ul> <li>Early engagement of safety representatives via joint H&amp;S committee meetings to assist in debriefing the work activity</li> <li>Health and Safety brief to reiterate signs and symptoms of COVID-19</li> <li>Personal and workplace hygiene - e.g. provision of hand sanitiser, workplace hygiene rules etc.</li> <li>Staff to be instructed that those who during this activity have had close contact (as defined in official guidance) with a confirmed COVID-19 patient</li> </ul>	1	5	5		

Access to professional counselling services to be communicated to staff.     Employee Assistance programme or service equivalent to be flagged and highlighted to all staff     If personnel become symptomatic they will selfisolate and follow test and trace guidance     Review the risk assessment to	Impact on the NHS.     Reputational damage to the Service	should inform their appropriate manager  Seek medical advice - NHS 111 or 999 if medical emergency. Inform appropriate manager. Ensure staff have support available for advice with regards to occupational health needs.			
		Access to professional counselling services to be communicated to staff.     Employee Assistance programme or service equivalent to be flagged and highlighted to all staff     If personnel become symptomatic they will selfisolate and follow test and trace guidance			

## **Appendix A**

The following guidance relates to the delivery (including entering a premise) of PPE and other medical supplies to NHS and care facilities.

## **Section A - General Assumptions:**

- 1. COVID -19 PPE mentioned within this risk assessment is based upon standard infection control precautions below a-e
  - a. FFP3 respirators must be worn whenever 'aerosol generating procedures' (AGP) are taking place. AGP's include
    - i. intubation, extubation and related procedures
    - ii. manual ventilation and open suctioning of the respiratory tract (including the upper respiratory tract)
    - iii. induction of sputum (cough)

FFP3 masks must be compliant with BS EN149:200.1 **NOTE**: If wearing a FFP3 that is not fluid resistant, a full face shield/visor **must** be worn in these cases.

- b. FFP2 or Fluid resistant type IIR mask non 'aerosol generating procedures'
- c. Long sleeved disposable apron/gown
- d. Disposable gloves
- e. Eye protection -full face shield/visor or polycarbonate safety spectacles or equivalent

Items of PPE b & d will be donned at all times from the time the activity commences until the activity is concluded when they will then be safely and hygienically disposed of. Items of PPE a, c & e will be provided and will be available for immediate use to each individual staff undertaking the activity. These items to be donned when an event occurs or a situation arises whereby FRS assistance may be required and/or the activity presents any anticipated/likely risk of contamination with splashes, aerosol, exhaled breath, droplets of blood or other body fluids.

- 2. FRS personnel involved in the activity of delivery (including entering a premise) of PPE and other medical supplies to NHS and care facilities (during period of COVID 19) activity will have received relevant and appropriate information, instruction & training.
- 3. FRS personnel will wear the correct Service provided work wear (See Section B) and as a minimum RPE/PPE appropriate to the task of delivery PPE and other medical supplies to NHS and care facilities (during period of COVID 19) activity see Section A1.
- 4. FRS personnel involved in the activity of delivery of PPE and other medical supplies to NHS and care facilities (during period of COVID 19) activity must have received information, instruction & training in the safe use of any associated equipment.
- 5. Any equipment used for the activity of delivery of PPE and other medical supplies to NHS and care facilities (during period of COVID 19) activity must have first been the subject of an appropriate inspection, maintenance and servicing regime.
- 6. All additional activities must be under supervision by a competent person

- 7. Partner agencies must receive information, instruction, training and supervision where appropriate to work safely within the FRS identified safe systems of work.
- 8. FRS personnel involved in the activity of delivery of PPE and other medical supplies to NHS and care facilities (during period of COVID 19) activity must have first received relevant manual handling information/training and any follow up refresher training as required. (See Section B)
- 9. All FRS personnel are all fit and well (See Section B)
- 10. A safety briefing/induction must be given to all personnel.
- 11. A debrief of the additional activity will be undertaken at routine intervals whilst the additional activity is being undertaken.
- 12. Safe systems of work identified in this and any subsequent risk assessments will be adhered to with all applicable HSE guidance and ACoPs applied as a minimum standard

## Section B - relevant documents/guidance as of the date of initial assessment:

- 1. Tri-partite/NJC agreements
- 2. Guide to donning and doffing standard PPE
- 3. Social distance guidance
- 4. Insert service work wear policy
- 5. Insert service fitness policy
- 6. Insert service manual handling policy
- 7. HSE RR1052 The effect of wearer stubble on the protection given by Filtering Face pieces Class 3 (FFP3) and Half Masks