



## NHS Blood and Transplant - Safety, Health and Environment Risk and Inspections

Actions and documents sections will show after saving. For assistance with completing this form, please email [DATIX Administrator](#).

### Location

Centre	Barnsley Centre
Directorate	Clinical Services
Dept/Area	Therapeutic Apheresis Services (TAS)
On/Off Site	On-site NHSBT Property
Location	Clinic

### Type of Form Required and its Purpose

Form Required	COSHH Risk Assessment
<p>Select the correct form for your needs.  <b>For risk assessments this should be in accordance with your training.</b></p>	
Title	COVID -19 Secure Workplace
Reference Number	NAT/TAS/RA/COSHH/008 - LEEDS
E.g. BD/RA/Gen/001 or D-HR-01	

### Identifier

This should summarise what you are assessing e.g. activity, process, workplace.  
 If there are reference documents such as MPDs and SOPs then include the titles and numbers here.

Identifier	NHSBT has implemented general controls detailed in HSW/COVID-19/001
What might occur?	<p>This risk assessment looks at additional requirements necessary in Therapeutic Apheresis units which provide direct patient care and should be used in addition to HSW/COVID-19/001</p> <p>This risk assessment is for the Leeds TAS unit which is located on the 3rd floor of the Bexley Wing of St James' University Hospital, Leeds.</p> <p>The unit within the hospital has 5 treatment beds.</p> <p>This risk assessment replaces the national Model Risk Assessment ID 26506 which was in use between March 2020 - Jan 2021</p>

### Hazardous substance involved

Number of hazardous substances involved	1
Please identify all the substances involved in the process that you are assessing.	

### Hazardous Substance 1

Substance 1 - form/amount/concentration (Hazardous Substance 1)	COVID-19
Provide as much information on the substance used and try and identify the main hazard here (but list all below).	
Substance 1 - Hazard (Hazardous Substance 1)	Blood Borne/Infection/Biohazard Harmful
Select all the hazards associated with this substance.	
Substance 1 - route of entry (Hazardous Substance 1)	Inhalation Mucus Membranes
Select all the viable ways the substance can cause harm to those involved.	

### Documents

No documents.

### Description of the process

Description of the process	All work place activities within TAS units
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### Frequency/duration of exposure and who is affected?

Frequency/duration of exposure and who is affected? (Frequency/duration of exposure and who is affected?)	<p>daily</p> <p>All staff can be affected</p> <p>Believed to be transmitted through:</p> <ul style="list-style-type: none"> <li>Contact with respiratory droplets generated by coughing and sneezing</li> <li>Contact with contaminated surfaces</li> <li>Aerosol generating procedures as wells as contact with contaminated surfaces</li> </ul>
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### Inherent Risk Grading

Inherent risk is an evaluation of the damage that could occur assuming there are no controls are in place or there is catastrophic failure of the controls. It is completed for the activity / assessment as a whole.

**Inherent Risk**

Red-Extreme  
Orange-High  
Yellow-Moderate  
Green-Low

Likelihood	Impact				
	Negligible	Minor	Moderate	Major	Catastrophic
Almost Certain	●	●	●	●	●
Likely	●	●	●	●	●
Possible	●	●	●	●	●
Unlikely	●	●	●	●	●
Rare	●	●	●	●	●

Rating (initial): 15 Risk level (initial): Extreme

**Controls in place**

Best practice is to directly link the controls to the hazards they are reducing and to list them in order of preference according to the hierarchy of control i.e. eliminate, substitute, engineering controls, information, instruction (such as SOPs and SSW), training, supervision, health surveillance and Personal Protective Equipment (PPE).

**Controls in place**

NHSBT COVID -19 COSHH risk assessment general controls as listed in HSW/COVID-19/0001

E.G. "Gloves available to wear- YES"  
For COSHH assessments please consider other controls e.g. Health Surveillance.

Staff wear:  
> Fluid resistant Surgical masks  
> Gloves  
> Aprons  
> Face shields  
while performing patient treatment and care and wear face masks at all times

> 2 metre social distancing outside the clinical area inc: breaks and when in communal areas.  
> 2 metre social distancing where possible and when not wearing PPE

Unit:

- > Advice notices at entrances for patients/donors/visitors giving information on entry restrictions and contact details for access if required
- > No visitors allowed to access unit with Patients
- > Check of patient for signs and symptom of COVID -19 prior to admission to unit
- > Face masks for patients
- > Identified area for assessment and isolation for patients/donors displaying/reporting symptoms of COVID-19
- > Process for management of patients/donors and referral to clinical teams within trust.
- > Use of barriers/curtains
- > Equipment and environmental cleaning as per National IPC guidance
- > Infection status information provided on referral forms for new patients/donors
- > Check of patient/donor health status the day prior to attendance for treatment/collection and attendance confirmed only if reporting as asymptomatic
- > Capacity limits in break room and managers office to maintain social distancing

2 metre distancing in general work spaces  
Additional frequency of cleaning of frequently touched surfaces

Access to testing for Covid twice a week via host Trust.

**Emergency Preparedness**

Storage and disposal / accidental release and fire fighting requirements N/A

**First Aid Measures**

If staff display symptoms of COVID-19 as listed in HSW/COVID-19/001. Inform line manager, staff member to be go home and follow government guidance including testing

**Final risk Grading**

Residual risk is an evaluation of the damage that could occur after taking into account the effectiveness of current controls. It is completed for the activity / assessment as a whole.

**Residual Risk**

Red-Extreme  
Orange-High  
Yellow-Moderate  
Green-Low

Likelihood	Impact				
	Negligible	Minor	Moderate	Major	Catastrophic
Almost Certain	●	●	●	●	●
Likely	●	●	●	●	●
Possible	●	●	●	●	●
Unlikely	●	●	●	●	●
Rare	●	●	●	●	●

Rating (current): 3 Risk level (current): Low

**Additional control measures to reduce risk**

When adding actions they should be targeting the highest risk areas to help reduce the residual risk from the activity. Please note that you will have to save this record before the Actions section is enabled.

**Actions**

**Next Review due by**

Frequency for review must be in line with MPD1090 - H&S Risk Management

Confirm review date (dd/MM/yyyy) 30/06/2022

**Performed by**

**Approval status**

Current approval status Final approval

ID 27412

**Manager Details**

**E-mail communication**

Use this section to e-mail between the risk assessor, manager and other interested parties regarding the risk assessment. This then provides an audit trail against the assessment.

**Contacts**

<b>Linked Records</b> <span style="float: right;">+</span>			
<b>Notifications</b> <span style="float: right;">+</span>			
<b>Recipient Name</b>	<b>Recipient E-mail</b>	<b>Date/Time</b>	<b>Contact ID</b>
No notification e-mails sent			