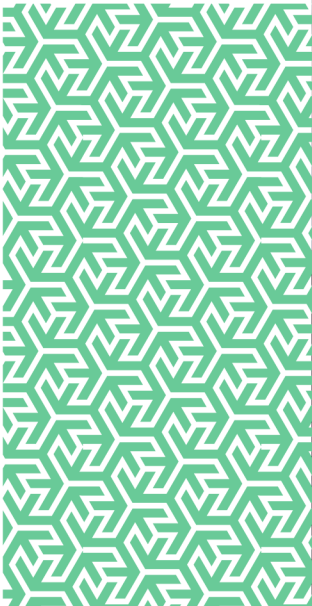




Risk control

COVID-19 Risk Assessment Guidance – Offices



In partnership with



Risk Control

COVID-19 Risk Assessment Guidance – Offices

Introduction

This document has been produced in order to assist our clients in undertaking a COVID-19 risk assessment.

COVID-19 risk assessments have been made the cornerstone of the UK Government's guidance to employers to ensure safety during the current pandemic¹.

It is worth noting that employers are required by law to protect their employees, and others, from harm.

Details of this requirement can be found in the Management of Health and Safety at Work Regulations 1999². These regulations place a duty on employers to assess the risks to the health and safety of their employees to which they are exposed whilst they are at work and to put in place appropriate and effective preventative and protective measures to control significant risks.

The primary focus of this guidance document is office environments, however, it could be reasonably applied to other similar environments such as call / contact centres.

The reader must recognise that, whilst every effort has been made to ensure that the guidance was correct at the time of publication, it may become out-dated as new research and guidance is issued by authoritative sources.

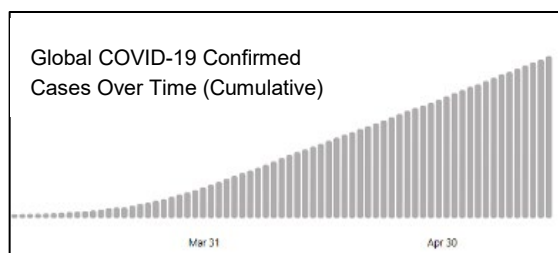
SARS-CoV-2 and COVID-19

The virus is referred to as SARS-CoV-2, and the associated disease as COVID-19. SARS-CoV-2 is a coronavirus - a family of viruses that cause disease in animals. To date, seven, including the SARS-CoV-2 virus, have so far made the transition to humans, but most just result in cold-like symptoms³.

Discovery and Spread

On 31 December 2019, the World Health Organization (WHO) were informed of a cluster of cases of pneumonia of unknown cause detected in Wuhan City, Hubei Province, China⁴. By 12 January 2020 it had been announced that a novel coronavirus (SARS-CoV-2) had been identified in samples obtained from cases and that the initial analysis of virus genetic sequences suggested that this was the cause of the outbreak⁴.

By mid-March 2020, the alarming levels at which the virus had spread around the world had led the Director General of the World Health Organisation to express deep concern and declare the situation as a global pandemic⁵.



Source: World Health Organisation. WHO Coronavirus Disease (COVID-19) Dashboard⁶.

As of 19th May 2020, WHO had received data from national authorities to suggest that the number of global cases of infection was approaching five million⁶.

It is worth noting that due to limitations associated with national testing programmes, the actual numbers of infections will be higher than those stated. Mild or moderate cases in which hospital treatment was not required are often not recorded and so do not feature in official statistics.

Transmission

According to current evidence, the virus is primarily transmitted between people through respiratory droplets and contact routes. Human-to-human transmission is occurring extensively on a global scale meaning that precautions to prevent human-to-human transmission are appropriate for both suspected and confirmed cases⁴.

Respiratory droplets carrying the virus can transmit infection when they travel directly from the respiratory tract of an infectious individual to susceptible mucosal surfaces of a recipient, generally over short distances. This can be in the form of sneezing, coughing or speaking⁷.

It is worthwhile noting that airborne transmission may be possible in specific circumstances and settings in which procedures or support treatments that generate aerosols are performed⁴.

The virus can also spread from contact with infected surfaces or objects. For example, a person can become infected by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes⁸.

Estimated timescales in which the virus can survive either within airborne droplets or on surfaces must be treated with caution as there is still much to be learned. Factors such as sunlight, heat and cold may play an influential role. Some research has suggested that the virus could remain within airborne droplets for up to three hours, although most will fall more quickly⁸. The same researchers found that the length of time the virus survives on surfaces changes in

accordance with the surface materials: up to four hours on copper; up to twenty-four hours on cardboard, and up to two or three days on plastic and stainless steel⁸. In another study, research confirmed that the virus was still viable seventy-two hours after application on plastic and stainless steel surfaces⁹.

Symptoms

Until 18 May 2020 the National Health Service (NHS) were presenting the main symptoms of the virus as being a high temperature and / or a new, continuous cough¹⁰. On 18 May 2020 the loss of smell or taste was added as a potential symptom¹¹. By comparison, the Centres for Disease Control and Prevention (CDC)¹² present a much wider range of potential symptoms including:

- Cough
- Shortness of breath or difficulty breathing
- Fever
- Chills
- Muscle pain
- Sore throat
- New loss of taste or smell

Neither of the lists are suggested to be a fully exhaustive description of all potential symptoms that may be experienced through infection.

While it is suggested that symptoms may appear 2-14 days after exposure to the virus¹², the onset and duration of viral shedding and the period of infectiousness for the virus are not yet known¹³.

In addition, the prevalence of asymptomatic transmission of the virus has not been formally established, however, some researchers suggest that it may be significant. An article published by The Lancet suggested, among a number of examples cited, that 51.7% of positive tests on the Diamond Princess cruise ship were asymptomatic at the time of testing¹⁴.

Outcomes of Infection

Most people infected with the virus are likely to experience mild to moderate respiratory illness and recover without requiring special treatment.

Others, such as older people, and those with underlying medical problems such as cardiovascular disease, diabetes, chronic respiratory disease, and cancer are more likely to develop serious illness¹⁵.

Serious illness can usually develop as the virus attacks the lungs, which may fill with fluid. A fever and high temperature may develop as the body responds to the virus. The body's immune system can go into overdrive and start to damage itself as well as the virus. A 'cytokine storm' can result in the lungs filling with fluid making it increasingly difficult to

breathe. Bacterial infections and organ failure can also occur as the immune system may become compromised¹⁶. Sadly, a proportion of those who suffer serious illness will not survive.

A study published by the Lancet describes the difficulty in calculating a reliable Case Fatality Rate (CFR), but does go on to suggest that the CFR of COVID-19 "appears to be lower than that of SARS (9.5%) and Middle East Respiratory Syndrome (34.4%), but higher than that of Influenza (0.1%)." ¹⁷

For those that survive the serious illness, there is still the possibility of having to live with long term physical and psychological effects¹⁸.

Staying COVID-19 Secure in 2020

In response to the growing number of cases within the UK, the country was placed into lockdown on Monday 23 March 2020. This resulted in all but essential businesses closing with immediate effect. Members of the public were told to stay at home and only leave to shop for essentials or go out in exceptional circumstances, including for one form of daily exercise¹⁹.

The lockdown continued throughout April and into May.

However, on Sunday 10 May 2020, Boris Johnson, UK Prime Minister introduced a road map for how England's lockdown restrictions would be relaxed in the forthcoming weeks¹⁹.

On Monday 11 May 2020 the UK Government published 'Our plan to rebuild: The UK Government's COVID-19 recovery strategy' setting out a three-phased plan to rebuild the UK for a world with COVID-19, stressing that it was not a quick return to normality²⁰.

While reconfirming that, wherever possible, workers should continue to work from home rather than their normal physical workplace, it goes on to suggest that workers who cannot work from home should travel to work if their workplace is open. It also specified that workplaces should follow the new 'COVID-19 Secure' guidelines as soon as practicable.

For office and contact centre environments, the guidance puts forward five steps for managing the risk of COVID-19²¹:

- Carry out a COVID-19 risk assessment
- Develop cleaning, handwashing, and hygiene procedures
- Help people work from home
- Maintain 2 meter social distancing where possible
- Where people cannot be 2 meters apart, manage transmission risk

COVID-19 Risk Assessment

Every employer must make sure that a risk assessment is undertaken that addresses the risks of COVID-19. Specific guidance 'Working safely during COVID-19 in offices and contact centres' was published by the UK Government to assist with these endeavours²².

The guidance clearly stipulates that "employers have a duty to reduce workplace risk to the lowest reasonably practicable level by taking preventative measures. Employers must work with any other employers or contractors sharing the workplace so that everybody's health and safety is protected. In the context of COVID-19 this means working through these steps in order:

- In every workplace, increasing the frequency of handwashing and surface cleaning
- Businesses and workplaces should make every reasonable effort to enable working from home as a first option. Where working from home is not possible, workplaces should make every reasonable effort to comply with the social distancing guidelines set out by the government (keeping people 2m apart wherever possible)
- Where the social distancing guidelines cannot be followed in full, in relation to a particular activity, businesses should consider whether that activity needs to continue for the business to operate, and if so, take all the mitigating actions possible to reduce the risk of transmission between their staff

Further mitigating actions include:

- Increasing the frequency of hand washing and surface cleaning
- Keeping the activity time involved as short as possible
- Using screens or barriers to separate people from each other
- Using back-to-back or side-to-side working (rather than face-to-face) whenever possible
- Reducing the number of people each person has contact with by using 'fixed teams or partnering' (so each person works with only a few others)
- Finally, if people must work face-to-face for a sustained period with more than a small group of fixed partners, then you will need to assess whether the activity can safely go ahead. No one is obliged to work in an unsafe work environment
- In your assessment you should have particular regard to whether the people doing the work are especially vulnerable to COVID-19'

Employers should consult with workers as part of the risk assessment process and share the results with them.

The Government also expects employers with over fifty workers to publish the results of the risk assessment on their company website²².

Risk Assessment Methodology

Risk management is a formal process for identifying and controlling risks caused by hazards in the workplace.

Risk assessment is an essential component of an effective risk management approach.

The Health and Safety Executive (HSE) provide valuable guidance regarding the key stages of the risk assessment process²³:

- Identify the hazards
- Assess the risks
- Control the risks
- Record your findings
- Review the controls

The HSE²⁴ recommend that the risk assessment should capture essential information such as:

- Who might be harmed and how
- What is already being done to control the risks
- What further action is needed to control the risks
- Who needs to carry out the action
- When the action is needed by

Organisations can undertake the risk assessment activity themselves or appoint a competent person to provide assistance.

Employers may need to seek external help and advice if they do not maintain sufficient in-house experience or knowledge to conduct a suitable and sufficient risk assessment themselves.

In order for a risk assessment to be suitable and sufficient, the HSE²⁵ specify that it must show that:

- A proper check was made
- Those who might be affected were identified
- The obvious significant risks were dealt with, taking into account the number of people who could be involved
- The precautions are reasonable, and the remaining risk is low
- The workers or their representatives were involved in the process

Personal Protective Equipment – Face Masks and Coverings

Where personal protective equipment (PPE) is already in use to protect workers from workplace risks then it is important that this should continue.

With the exception of clinical, healthcare and a few other settings, the use of PPE such as face masks and coverings, beyond what would normally be worn in the workplace is not considered to be particularly beneficial and so employers are advised not to encourage the precautionary use of extra PPE to protect against COVID-19 outside of these environments²².

So unless the risk of COVID-19 transmission is very high, the risk assessment should reflect the very limited role of PPE in providing additional protection.

If the risk assessment does show that the risk is very high and PPE is required, then the equipment must be provided free of charge to the workers who need it, ensuring that it fits properly and is appropriate for the risk presented.

Due to the high levels of filtration provided, the HSE recommend the use of FFP2 and FFP3 grade devices in clinical and healthcare settings where there is a real risk of virus transmission²⁶. Government advice at the time of publication states that these high filtration devices should continue to be reserved for those including health and care workers who need them to protect against risks in their workplaces²⁷.

The same guidance suggests that the use of lower grade face coverings is recommended to the general public in certain enclosed spaces, such as during the use of public transport and while in some shops, where social distancing cannot be achieved. However, evidence suggests that wearing a face covering does not protect the wearer but may provide some limited protection to others if the wearer is infected but is not displaying any obvious symptoms.

Summary

Since mid-April, the rate of new infections (confirmed cases) of COVID-19 in the UK has been trending slowly downwards²⁸. Of course, this is no time for celebration and the virus is still evident within society and new cases of infection are reported every day despite the lockdown being in place since mid-March 2020.

Any reduction in social distancing measures may potentially increase the risk of new infections and so caution must be exercised by employers seeking to open up their workplaces and recall workers.

The UK Government's 'Staying COVID-19 Secure in 2020' guidance does not provide any guarantees, however, if implemented correctly and with meaning, adherence to the guidance will provide employers and employees with a level of protection against the invisible but sometimes deadly foe which is COVID-19.

References

- 1 UK Government, 2020. *Working safely during coronavirus (COVID-19)*. [ONLINE] Available at: <https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19>. Accessed on 14th May 2020.
- 2 UK Government, 1999. *The Management of Health and Safety at Work Regulations 1999*. [ONLINE] Available at: <http://www.legislation.gov.uk/uksi/1999/3242/regulation/3/made>. Accessed on 14th May 2020.
- 3 The Telegraph, 2020. *What is coronavirus, how did it start and how big could it get?* [ONLINE] Available at: <https://www.telegraph.co.uk/news/2020/05/14/what-coronavirus-covid-global-pandemic-china/>. Accessed on 14th May 2020.
- 4 Public Health England, 2020. *COVID-19: epidemiology, virology and clinical features* (Updated 13 May 2020). [ONLINE] Available at: <https://www.gov.uk/government/publications/wuhan-novel-coronavirus-background-information/wuhan-novel-coronavirus-epidemiology-virology-and-clinical-features>. Accessed on 14th May 2020.
- 5 The Guardian, 2020. *WHO declares coronavirus pandemic?* [ONLINE] Available at: <https://www.theguardian.com/world/2020/mar/11/who-declares-coronavirus-pandemic>. Accessed on 14th May 2020.
- 6 World Health Organisation, 2020. *WHO Coronavirus disease (COVID-19) Dashboard. Confirmed Cases Over Time*. [ONLINE]. Available at: https://covid19.who.int/?gclid=Cj0KCQjwnv71BRCOARIsAlkxW9H7X2iYETmclw34db7YS4_JequwAX05oF5ZSlwzSgSziRTuxlOIV3laAIPGEALw_wcB. Accessed on 19th May 2020.
- 7 NHS England and NHS Improvement, 2020. *Coronavirus. Virus transmission*. [ONLINE] Available at: <https://www.england.nhs.uk/coronavirus/primary-care/about-covid-19/virus-transmission/>. Accessed on 14th May 2020.
- 8 Harvard Health Publishing (Harvard Medical School), 2020. *COVID-19 basics. Symptoms, spread and other essential information about the new coronavirus and COVID-19*. [ONLINE]. Available at: <https://www.health.harvard.edu/diseases-and-conditions/covid-19-basics>. Accessed on 14th May 2020.
- 9 The New England Journal of Medicine, 2020. *Aerosol and Surface Stability of SARS-CoV-2 as Compared with SARS-CoV-1*. [ONLINE]. Available at: <https://www.nejm.org/doi/full/10.1056/NEJMc2004973>. Accessed on 14th May 2020.

10 NHS, 2020. *Check if you have coronavirus symptoms*. [ONLINE]. Available at: <https://www.nhs.uk/conditions/coronavirus-covid-19/check-if-you-have-coronavirus-symptoms/>. Accessed on 14th May 2020.

11 BBC, 2020. *Coronavirus symptoms: UK adds loss of smell and taste to list*. [ONLINE]. Available at: <https://www.bbc.co.uk/news/health-52704417>. Accessed on 18th May 2020.

12 Centres for Disease Control and Prevention, 2020. *Symptoms of Coronavirus*. [ONLINE]. Available at: <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>. Accessed on 14th May 2020.

13 Centres for Disease Control and Prevention, 2020. *Clinical Questions about COVID-19: Questions and Answers*. [ONLINE]. Available at: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/faq.html>. Accessed on 14th May 2020.

14 The Lancet, 2020. *COVID-19: the case for health-care worker screening to prevent hospital transmission*. [ONLINE]. Available at: [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(20\)30917-X/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30917-X/fulltext). Accessed on 14th May 2020.

15 World Health Organisation, 2020. *Coronavirus*. [ONLINE]. Available at: https://www.who.int/health-topics/coronavirus#tab=tab_1. Accessed on 15th May 2020.

16 The Telegraph, 2020. *Coronavirus: what does Covid-19 do to the body?* [ONLINE]. Available at: <https://www.telegraph.co.uk/global-health/science-and-disease/covid-19-do-body-affect-coronavirus/>. Accessed on 15th May 2020.

17 The Lancet, 2020. *The many estimates of the COVID-19 case fatality rate*. (Rajgor, Lee, Archuleta, Bagdasarian, Quek). [ONLINE]. Available at: [https://www.thelancet.com/journals/laninf/article/PIIS1473-3099\(20\)30244-9/fulltext](https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(20)30244-9/fulltext). Accessed on 15th May 2020.

18 The Guardian, 2020. *Britons will suffer health problems from Covid-19 for years, warn doctors*. [ONLINE]. Available at: <https://www.theguardian.com/world/2020/may/02/coronavirus-britons-health-problems-covid-19>. Accessed on 15th May 2020.

19 The Independent, 2020. *Coronavirus: When might the UK lockdown come to an end?* [ONLINE]. Available at: <https://www.independent.co.uk/life-style/health-and-families/coronavirus-lockdown-uk-remove-end-review-schools-when-government-a9453246.html>. Accessed on 18th May 2020.

20 Cabinet Office (UK Government), 2020. *Our plan to rebuild: The UK Government's COVID-19 recovery strategy*. [ONLINE]. Available at: <https://www.gov.uk/government/publications/our-plan-to-rebuild-the-uk-governments-covid-19-recovery-strategy/our-plan-to-rebuild-the-uk-governments-covid-19-recovery-strategy>. Accessed on 18th May 2020.

21 HM Government, 2020. *Working safely during coronavirus (COVID-19)*. [ONLINE]. Available at: <https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19/5-steps-to-working-safely>. Accessed on 19th May 2020.

22 HM Government, 2020. *Working safely during COVID-19 in offices and contact centres*. [ONLINE]. Available at: <https://assets.publishing.service.gov.uk/media/5eb97e7686650c278d4496ea/working-safely-during-covid-19-offices-contact-centres-110520.pdf>. Accessed on 18th May 2020.

23 Health and Safety Executive, 2014. *Risk assessment - A brief guide to controlling risks in the workplace*. (INDG163(rev4)). [ONLINE]. Available at: <https://www.hse.gov.uk/pubns/indg163.pdf>. Accessed on 18th May 2020.

24 Health and Safety Executive, undated. *Managing risks and risk assessment at work*. [ONLINE]. Available at: <https://www.hse.gov.uk/simple-health-safety/risk/risk-assessment-template-and-examples.htm>. Accessed on 18th May 2020.

25 Health and Safety Executive, undated. *What the law says on assessing risks*. [ONLINE]. Available at: <https://www.hse.gov.uk/managing/delivering/do/profiling/the-law.htm>. Accessed on 18th May 2020.

26 Health and Safety Executive, 2020. *Rapid Evidence Review*. [ONLINE]. Available at: <https://www.hse.gov.uk/news/assets/docs/face-mask-equivalence-aprons-gown-eye-protection.pdf>. Accessed on 19th May 2020.

27 HM Government (Cabinet Office), 2020. *Staying safe outside your home*. [ONLINE]. Available at: <https://www.gov.uk/government/publications/staying-safe-outside-your-home/staying-safe-outside-your-home>. Accessed on 19th May 2020.

28 HM Government, 2020. *Coronavirus (COVID-19) in the UK*. [ONLINE]. Available at: <https://coronavirus.data.gov.uk/>. Accessed on 19th May 2020.

COVID-19 Returning to the workplace

In preparation for a return of the workforce and the public to businesses, RMP Risk Control is offering a comprehensive range of services to assist in mitigating the risk of infection to employees and visitors to your premises.

These services include:

- Risk analysis of buildings and workplaces
- COVID-19 decontamination

Further information

For access to further RMP Resources you may find helpful in reducing your organisation's cost of risk, please access the RMP Resources or RMP Articles pages on our website. To join the debate follow us on our LinkedIn page.

Get in touch

For more information, please contact your broker, RMP risk control consultant or account director.



Risk Management Partners

The Walbrook Building
25 Walbrook
London EC4N 8AW
020 7204 1800
rmpartners.co.uk

This note is not intended to give legal or financial advice, and, accordingly, it should not be relied upon for such. It should not be regarded as a comprehensive statement of the law and/or market practice in this area. In preparing this note we have relied on information sourced from third parties and we make no claims as to the completeness or accuracy of the information contained herein. It reflects our understanding as at 28 May 2020, but you will recognise that matters concerning COVID-19 are fast changing across the world. You should not act upon information in this bulletin nor determine not to act, without first seeking specific legal and/or specialist advice. No third party to whom this is passed can rely on it. We and our officers, employees or agents shall not be responsible for any loss whatsoever arising from the recipient's reliance upon any information we provide herein and exclude liability for the content to fullest extent permitted by law. Should you require advice about your specific insurance arrangements or specific claim circumstances, please get in touch with your usual RMP Risk Control consultant or account director.

Risk Management Partners Limited is authorised and regulated by the Financial Conduct Authority. Registered office: The Walbrook Building, 25 Walbrook, London EC4N 8AW. Registered in England and Wales. Company no. 2989025.