

Laboratory Risk Assessment for Return to On-Site Working

| 1. DEPARTMENT DETAILS | | |
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| Building: John Radcliffe Hospital (JRH) | Rooms or area: <ul style="list-style-type: none"> • Two offices: Room 4824 & 4805, • OCHRe storage room: Room 4820 (Level 4 NDCLS Laboratories) • JR Block store room and slide store room (Level 1 Cellular Pathology Room 1A451) • ORB Lab Room 4822 • ORB Wet lab Room 4826 bays 1 & 2 • Liquid nitrogen storage room: Room 4A10B | Risk assessment Version/Date v3.0 29/06/2021 |
| Head of Department | Professor Deborah Gill | |
| Department: | Nuffield Division of Clinical Laboratory Sciences | |
| Academic/Line Manager | Clare Verrill/Stephanie Jones/David Maldonado-Perez | |
| People returning to working on site (status/names) | Staff * OUH Staff & NDS staff | NAME(S) * Jamila Najar – OCHRe team, Data and Research coordinator (research) * Robert Moore – OCHRe team, Data and research coordinator (clinical trials) * Kelsey Huang – OCHRe team, Associated practitioner clinical trials * Elizabeth Latham – OCHRe team, Data manager & Emma Bowes – biobanker & Callum Board – biobanker & Renuka Teague – biobanker new member of staff starting July 2021 & Krishna Manoharan – biobanker & Liss Hayes – tissue handling technician (histology) (replacement being recruited June 2021) & Hayleigh Colling – tissue handling technician (histology) & Ying Cui – tissue handling technician (histology) (going on sabbatical mid July for 10 months) & Adam Appelbee – tissue handling technician (histology) (cover for Ying Cui) & Lucy Cerundolo – IHC specialist (histology) & Amy Cross – IHC specialist (histology) & Helen Stark – IHC specialist (histology) & Miriam O’Hanlon – biobanker & tissue handling technician (histology) & Nick Gibb - consent checker PathLAKE (Innovate UK from end June 2021) & Nick Gibb – consent checker OCHRe (replacement to be recruited) & Shivani Bhola – consent checker (TSS temporary staff) & Neil Latham - IT manager & David Maldonado-Perez – Biobank coordinator |

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| | § NDM | & Stephanie Jones – ORB Collections Governance Manager & OCHRe team § Esther Bridges – tissue handling technician (histology) § Luke Marlow – study coordinator (ICARUS) |
| <p>Activity Summary (Types of activities expected & authorised to take place – brief description of the experiments and equipment used)</p> <p>The members of staff are being grouped based on activities which have now returned to near-normal patterns:</p> <ul style="list-style-type: none"> - Sample labelling and registration: mostly biobankers (Room 4822 and Lab 4826 Bay 1) - Preparation of materials and support the technical work that is going to be undertaken by microtomy: OCHRe team (Room 4824 and Room 4820, level 1 Cellular Pathology slide and block archive rooms) - Histology: Microtomy and embedding: mostly tissue handling technician (Lab 4826 Bay 2, occasionally level 1 Cellular Pathology slide and block archive rooms if OCHRe team unable to help) - Cryotomy: mostly tissue handling technician (Lab 4826 Bay 1) - Consent checking: mostly the consent checkers (Room 4805) - General support from managers for all above (Room 4805 SJ; Room 4824 DMP) <p>The “OCHRe team” (see role description in top section) will prepare tissue blocks and slides, for activities such as review by pathologists, checking of condition of blocks, preparing batches of blocks to be cut by technicians in the NDCLS lab, preparing slides to be scanned in Level 1 (Cellular pathology). Under normal circumstances, the OCHRe team are based in two offices in NDCLS Level 4, and go into cellular pathology for short periods, spending most of their time on Level 4. Office number 4824: up to three occupants for any length of time, 4805: up to three occupants for any length of time.</p> <p>The biobankers will attend the Level 4 spaces (Lab 4826 Bay 1 and Room 4822) to complete sample labelling and parts of the sample registration that cannot be done remotely due to IT limitations. For the rest of their activities, they will use the ORB office on Level 1, Room 1A451; occupancy will go up to three, but only if using Emma’s, Callum’s and Ying’s desks (avoiding using any computer that is not their own without prior arrangement with the PC “owner”).</p> <p>The Histology technicians will attend the Level 4 Lab 4826 Bay 2 for mostly microtomy, embedding and cryotomy for OCHRe projects. They are likely to work at these stations set days of the week to help with scheduling.</p> <p>Equipment used: microtome, water bath, associated consumables such as a microtome blades and microscope slides, ice blocks, pencils, forceps, sharps disposal bin etc.</p> <p>Under normal circumstances, technicians work at two microtomes in the ORB bays of the shared NDCLS laboratories on Level 4 of the JRH, facing each other. The two microtomes have been moved to Bay 2 back-to-back with a screen between the ORB bay and the Gene Medicine Bay. Two technicians may carry out microtomy / embedding at the same time, working back to back. They will retrieve the FFPE blocks and paperwork from the OCHRe store room 4820 but carry out the sectioning in “ORB Wet lab” in room 4826. We have also negotiated access to a separate room within Cell path that has spare microtomes and is not used by their staff most of the time, allowing further microtomy capacity for two technicians at once in two separate spaces.</p> <p>They will also occupy the ORB office on level 1, Room 1A451 for certain activities such as cleaning and labelling slides for scanning, and for database updates if it is more convenient to do this on site than at home; occupancy will go up to three, but only if using Emma’s, Callum’s and Ying’s desks (avoiding using any computer that is not their own without prior arrangement with the PC “owner” and then applying the cleaning regimen as described on page 5 in the section on Hot desking).</p> | | |

The consent checkers will collect consent forms in agreed departments of OUH and attend the office Room 4805 for filing **mostly**. All other activities can be done remotely, from home. This is likely to be on a set pattern for days or half-days in the office vs days at home.

We have set up a booking system for all these spaces, so that maximum room / space occupancy can be maintained at safe levels to minimise the risk of spreading infection should one of the team members contract COVID19. Summary sheets explaining the maximum occupancy in each area will be prepared, based on a model developed by Cellular Pathology, and displayed at the entrance of each area to remind all team members (including the LN2 cryostore room 4A10B). Good communication and adherence to the booking system will be required to minimise the risk of over-occupancy.

Amy Cross and Lucy Cerundolo had separately applied to use the Leica Bond machine in Room 4822: their attendance is booked in the same sheet as for the biobankers using that room, to allow only 1 biobanker and 1 Bond-technician working side by side but at >2m distance from each other. Machine will be checked and flushed of any stagnant liquids prior to use. Software alerts when liquids need to be changed and any hazardous waste from the machine is disposed of according to University procedures. They are now included in this RA and we have also included Esther Bridges who occasionally needs access to equipment in the wet lab bay.

Monitoring and maintenance of Liquid nitrogen storage (Room 4A10B): team members will continue to rotate to ensure the cryobank is topped up with liquid nitrogen – this will typically be done by whoever is already on shift, or if no one is on site for a full shift, a team member will attend specifically for the liquid nitrogen activities, with a buddy if it is necessary to dispense liquid nitrogen (WhatsApp group for this purpose). For swapping tanks, you will need to let someone present in the building know that you are carrying out the task and let them know when you finish. If you need help to swap tanks, you and your buddy will need to wear a surgical mask in addition to the PPE required for the task, ask your buddy to wait outside the room until you prepare the tank to be moved.

Occupancy continues to average between 3 and 6 on Level 4 (lab and office spaces), and 1 or 2 on Level 1 (previously estimate 4-5 on average overall per office (3 offices in total, staff moving between their office and relevant lab spaces for technical activities)).

Shared use?

Is the space shared with individuals from other departments? If yes, please list the departments concerned

Yes- NDCLS staff work in the Level 4 Laboratories that the OCHRe team’s offices are based in, although NDCLS staff mostly use a different area of the lab. OUH Staff work in Cellular Pathology and may be present in the same rooms that the OCHRe team would need to access – ORB/OCHRe staff will follow the rules set out by Cellular Pathology with regards to room occupancy.

The liquid nitrogen storage room is shared with other members of NDCLS: as safety precautions require that two persons are present when liquid nitrogen is dispensed, there will be times when this space is shared although a 2m distance can and will be maintained for this purpose.

| Extent of on-site activity (Indicate all that apply) | Yes or No? |
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| Continually with a single individual occupying the space | No |
| Continually with different individuals occupying the space one at a time | Yes |
| Continually with different individuals occupying the space simultaneously with appropriate physical distancing measures | Yes |
| Occasionally (e.g., a few short visits per day or week to check equipment) | No |

| 2. REDUCING THE SPREAD OF COVID-19 | |
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| Travelling To/From Work: | |
| Outline any foreseeable and significant risks | Outline risk reduction measures to be taken |
| <p>Although most of the lab members live within Oxford and walk/drive to work, at least one lab member typically takes public transport to work.</p> <p>Lack of recognition of typical symptoms of COVID-19</p> | <p>Staff will be reminded of the need to adhere to current guidelines if using public transport to travel to/from work, and offered flexibility to book shifts where they will be travelling outside of rush hour periods.</p> <p>Members of the lab who live within walking distance or have access to a car or a bicycle will avoid public transport.</p> <p>Good hand washing technique of the staff first thing when arriving to work, throughout the day and last thing before leaving home</p> <p>All staff are reminded that the recognised symptoms of COVID-19 that should trigger a request for a PCR test are:</p> <ul style="list-style-type: none"> • a high temperature, • a new continuous cough, • or loss/change to sense of taste or smell. <p>Many people with the Delta variant may experience symptoms similar to those of a bad cold, which should be treated in the same way as the above:</p> <ul style="list-style-type: none"> • sore throat, • headache • runny nose <p>with a mild fever.</p> <p>If staff experience these symptoms, they (and their household) must immediately self-isolate and assume they have the virus, pending the result of a confirmatory PCR test (not an LFD test), which they should book as soon as possible through the Early Alert Service, the results of which are usually available well within 24 hours (shorter than the usual wait through NHS testing services).</p> |
| Safe Distancing in the Building | |
| Outline any foreseeable and significant risks | Outline risk reduction measures to be taken |
| <p>Overcrowding at entry and exit areas, connecting corridors and walkways making social distancing difficult or impossible.</p> | <p>A safe system of entry and exit areas from the hospital is in place. This allows OCHRe team staff to enter and exit the labs (Level 4 and 1) and associated facilities via the Academic Block and North lifts/stairs, minimising any contact with clinical staff or members of the public using the main hospital.</p> <p>A maximum of 2 individuals are permitted to use the North lifts at any time allowing social distancing of 2m, use of lift P is limited to one individual at a time and staff have been encouraged to use the stairs wherever possible.</p> <p>Unfortunately, it is not feasible to implement a one-way system, but hospital corridors are wide enough to observe the 2m social distancing guidelines. Staff will be encouraged to adhere to the 'Keep left' policy in</p> |

Increase in number of OCHRe team staff attending their physical place of work leading to difficulty in maintaining social distancing guidelines and increased risk of spread of infection.

place in hospital corridors and stairwells, and any lift occupancy limits set by OUH Trust.

Attendance at the workplace amongst the ORB/OCHRe team will be limited according to the location at any one time, and rules for each space will be displayed at the entrance, using a model from Cellular Pathology. Surgical masks to be worn at all times when it is not possible to maintain 2 m distance between working stations. In line with recent guidance from the University, we would like to increase occupancy of the spaces below to improve service delivery and the effectiveness of team working, maintaining at least 1m distance with additional mitigations as detailed, and wearing masks at all times except for those using the microtomes:
Room 4824 maximum occupancy: 3 (back to back or at 90-degree angle).
Room 4805 maximum occupancy: 3 (back to back or at 90-degree angle)
Room 4820 maximum occupancy: 1
Lab 4822 maximum occupancy: 3 (Gene Medicine group no longer using this space for experiments, only storage, so maximum occupancy will be for use of the laptop and the Leica Immunostainer).
Lab 4826 Bay 1 maximum occupancy: 2
Lab 4826 Bay 2 maximum occupancy: 3 (back to back at the window end, with a screen between Bay 2 and Bay 3 (occupied by Gene Medicine) and side-by-side on the embedder bench, at least 1m from anyone else)
Room 1A451 maximum occupancy: 3 (using Ying's, Emma's and Callum's desks only, and always alternating occupancy on side-by-side desks (one occupied, one free)
Wherever we need to work at less than 2m, we will ensure back-to-back or 90-degree angle positions, and attendance in specific offices in particular will be by the same group of people; there will be extra cleaning of desks that may be shared, and wearing of masks.

Increased chance of transmission due to staff sharing common interaction areas.

Attendance will be booked via Excel spreadsheets on Teams, set up to flag maximum occupancy for each location.

Liquid nitrogen storage room: Social distancing and the wearing of face masks as well as all the standard PPE (in particular face shield) will be in place at all times.

Staff will be sharing access to a **single printer**, and will wear masks if entering that office when they are booked to work in a different space. A note reminds all users to clean the touch points on the printer at least once a day.

Staff, who all have access to their own desk space, are encouraged to bring their own food and water bottle and avoid the use of the JRH canteen and cafes. If weather permits, they will take breaks outside where risk of transmission is lower.

Office-based tasks, such as FileMaker data entry, that arise from the hands-on activities on site will gradually return to being done on site, in line with University guidance, to avoid paperwork getting dispersed, but can also be done from home.

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| | <p>A hand sanitizer station will be placed at the entrance to ORB/OCHRe office in Level 4. Other stations are available throughout the Cellular Pathology department.</p> <p>Each OCHRe team member will only use their own workstations (PCs or home laptop if necessary) and clean them with wipes and detergent (sourced through the University’s safety office), on a regular basis.</p> <p>Hot-desking (by which we mean sharing of computers mostly, as these are being accessed by most staff via remote desktop) will mostly not be allowed. The only shared IT unit will be the data entry laptop in Room 4822, only unit that can run Windows7 compatible LabVantage Sapphire database. Where desk areas (for the Sapphire laptop and in the level 1 office in particular) are shared, users should ensure they thoroughly clean all the surfaces and where applicable the IT unit and associated peripherals (mouse, screen, keyboard) with disinfectant wipes, and allow 15 minute gaps between different users.</p> <p>Staff will be asked that when using multi-user toilets, they should ensure that they keep safe distance by not using a urinal if someone is already using the ones next to it and not to wait inside the toilet for an available cubicle / urinal. Signs are in place to remind users of these arrangements.</p> <p>Visitors will not be allowed into the offices but will conduct any interactions from the corridor / doorway (typically couriers or researchers picking up or dropping off specimens or paperwork). Wherever possible, staff will pre-arrange visitors and will endeavour to ensure that any area occupancy limits are not breached by allowing visitors on site, and that time spent onsite by visitors is kept to a minimum.</p> |
| Safe Distancing in the Lab | |
| Outline any foreseeable and significant risks | Outline risk reduction measures to be taken |
| <p>Increased number of OUH, NDS and NDCLS staff working in labs, leading to difficulties in maintaining social distancing guidelines and increased risk of the spread of infection.</p> | <p>Hand washing should be done on arrival in the Level 4 labs, as well as every time staff move between Level 4 and Level 1, and in particular before leaving Level 1 having retrieved or returned blocks / slides.</p> <p>OCHRe team staff will only book a shift on site if there are specific hands-on tasks that can’t be done remotely. Work on different projects will be grouped into batches, so that a shift on site is used to full effect for hands-on tasks and not mostly for administrative tasks that can be completed from home.</p> <p>The ORB Managers will liaise with the OUH Trust for safe access to the Cellular Pathology diagnostic archive of FFPE blocks, which is necessary for the OCHRe team to retrieve material for projects. There is a supply of surgical masks at the entrance to Cellular Pathology for use by staff.</p> <p>When retrieving or returning blocks / slides from the Level 1 Cellular pathology archive, the OCHRe team will give priority to OUH staff who</p> |

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| | <p>need access for clinical purposes, and return when the OUH staff have completed their work.</p> <p>Staff in multiple occupancy rooms must wear face masks whenever there is more than one person in the room, but this will not be compulsory when they are alone in one of those locations. Staff arriving on the premises will not remove their face masks until they have established whether anyone else is there and likely to be working in the same space. Office windows will be opened to increase ventilation wherever possible, especially in shared offices.</p> <p>Liquid nitrogen storage room: Social distancing and the wearing of face masks as well as all the standard PPE (in particular face shield) will be in place at all times.</p> |
| Cleaning Regimes | |
| Outline any foreseeable and significant risks | Outline risk reduction measures to be taken e.g. availability of hand washing facilities and hand sanitizers |
| <p>Door handles and communal equipment (e.g. printer, filing cabinet handles, block and slide drawers in OCHRe store room) will be touched by several team members which could pose a transmission risk.</p> | <p>OCHRe team will keep pencils and biros on their desks, labelled with their name, rather than sharing these. Where some items have to be shared (e.g. tape dispenser), these will be cleaned immediately before and after use.</p> <p>OCHRe team will wash their hands before and after retrieving or filing slides and blocks even if they wear disposable gloves during the process (level 4 and level 1); drawer handles will be wiped with disinfectant wipes provided in the OCHRe store room, on each day that this is accessed. Cleaning of touch points in Cellular Pathology is arranged by the lab manager and OCHRe Team are not expected to contribute to this.</p> <p>Histology team: Communal equipment (microtome, water bath, freezers etc.) will only be handled when wearing gloves. Staff are accustomed to wearing gloves and disposing of them in clinical waste bins before leaving the laboratory. Gloves will be changed throughout the day, with a clear sign at the microtomy station to prompt staff to do this.</p> <p>Technicians will keep forceps, pencils and biros in their lab coat pockets, labelled with their name, rather than sharing these.</p> <p>Staff will wipe handles, lab surfaces and communal equipment at the start and end of every shift period.</p> <p>Biobankers: Communal equipment (freezers) will only be handled when wearing gloves. Staff are accustomed to wearing gloves and disposing of them in clinical waste bins before leaving the laboratory. Gloves will be changed throughout the day, with a clear sign on the freezers to prompt staff to do this.</p> <p>Biobankers will keep pens in their lab coat pockets, labelled with their name, rather than sharing these.</p> <p>Staff will wipe freezer handles, lab surfaces and communal equipment (especially the data entry laptop and mouse, and including touch points in the liquid nitrogen storage room) at the start and end of every shift</p> |

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| | <p>period when these have been accessed, using the disinfectant products provided at each location.</p> <p>All staff will wipe door handles (including entrance to the general lab, between Clinical Biochemistry and opposite John Warin Ward and office door handles until notification in accordance with local guidance that may change), printer touch points and filing cabinet handles at the start and end of every shift period, on Level 4.</p> <p>Additional hand sanitizer stations are placed at the Academic Centre entrance and the exits to the North lifts/stairs. Staff are reminded to wash and sanitise their hands regularly throughout the day, through signage. There are hand washing sinks in Cellular Pathology and in the NDCLS Level 4 Laboratories, in the NDCLS Level 4 Academic block, as well as in the toilets on these floors.</p> <p>When using shared PPE equipment in the cryogenic storage room: face shields and apron must be cleaned with disinfectant wipes before and after using them. Cryogenic gloves should always be worn in combination with disposable gloves underneath.</p> |
| Personal Protective Equipment | |
| Outline any foreseeable and significant risks | Outline risk reduction measures to be taken: <i>This is Covid-19 specific PPE beyond that needed for usual lab work</i> |
| Inadequate supply or incorrect use of PPE leading to increased risk of transmission. | <p>The OUH Trust is providing staff with surgical masks on entrance to the JRH. Additional surgical masks have been sourced from central University and supplies will be kept in suitable locations on Level 1, and 4 for use by all members of the ORB/OCHRe team.</p> <p>Staff are accustomed to avoiding touching their faces while handling human tissue material. None of the team will be working with fresh tissue, blood, or large volumes of reagents which pose the main risks of contamination, until further notice.</p> <p>Guidance on the required use of face masks and/or face coverings, as issued by the OUH Trust and/or University, will be adhered to.</p> <p>Cellular Pathology and ORB management will be auditing compliance with the wearing of masks and hand sanitizing. This is not recorded in writing.</p> <p>Where necessary lab coats will be worn (not shared) – this means a change to standard practice: for the duration social distancing restrictions, named lab coats for the main lab on level 4 will be used for all lab work, including liquid nitrogen activities in room 4A10B (instead of the lab coats normally stored in the room) – this will be carried in a named scrub bag as lab coats should not be worn while walking through the Clinical biochemistry office corridor. As scrub bags will be assigned to named individuals, the risk of cross contamination of lab coats is low. Nitrile gloves will be worn whilst working in room 4A10B.</p> |

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| <p>Incorrect disposal of used PPE</p> | <p>If the cryoapron is to be used, this will be wiped down before and after use. Visors (face shields) will be wiped with disinfectant provided by ORB and NDCLS (available in the room), before and after each use. Vinyl gloves will continue to be worn underneath cryoprotective gloves as these cannot easily be disinfected between uses.</p> <p>Finally staff will wash their hands immediately after completing work in the liquid nitrogen storage room, using the sink outside the room.</p> <p>The OUH trust has circulated by email links to the website: https://www.ouh.nhs.uk/working-for-us/staff/covid-staff-faqs-masks.aspx with instructions on the correct way to put on and take off a surgical mask.</p> <p>Staff are well-trained in the hospital and lab bins system and are therefore unlikely to incorrectly dispose of used PPE.</p> |
| <p>Lone Working Additional Precautions</p> | |
| <p>Outline any foreseeable and significant risks</p> | <p>Outline risk reduction measures to be taken</p> |
| <p>Accident occurring while using microtome (sharps injury), technician unable to seek help themselves</p> <p>No lone working to be done by members of the team. However, some activities will involve working in isolated areas (working in rooms on their own). Occasional working at heights to retrieve packing materials in OCHRe store room (4820)</p> | <p>No microtomy will take place out of hours, or if there is no one within shouting distance, thus all microtomy technicians are expected to fall outside of the standard definition of Lone Working.</p> <p>All the activities to be done by the team in isolated areas will have low risk associated to them.</p> <p>All staff will be within shouting distance of other OCHRe and NDCLS staff working in the Laboratory on level 4. They will make sure to flag to one or more colleagues in the area that they will check back in when they have safely done the activity giving an estimate of how long that might take, so that someone can check on them if they don't check in. Staff members can use the WhatsApp group (ORB IT) to notify the rest of the team of any issues that arise while working alone and get support if necessary.</p> <p>For the liquid nitrogen storage room, refilling of dewars (Banham group) or protracted access to the samples in the tank (more than a few samples) will not be permitted without a competent buddy being present at the doorway or immediately outside the room.</p> |
| <p>Communication with the team</p> | |
| <p>Outline any foreseeable and significant risks</p> | <p>Outline risk reduction measures to be taken</p> |
| <p>Lack of the correct training, guidance to ensure staff are kept up to date with how safety measures are being implemented or updated.</p> | <p>There has been regular communication from the University, the department, the Trust and within the team about safety measures being put into place.</p> <p>Both NDS and ORB have developed Site Codes of Conduct for staff returning to work to adhere to.</p> <p>Every member of staff will have an induction before commencing/returning to on-site working to cover this. There is increased signage around the hospital using clear messaging to explain safety rules.</p> |

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| More than two OCHRe/ORB team members arrive to work at the hospital at the same time. | The team will continue to use the Monday team meetings and WhatsApp, as well as a shared booking forms on Teams, to flag their intention to attend the site at specific times, and will keep these to as short a period as is feasible, working from home the rest of the time. |
| Equipment checks | |
| Outline any foreseeable and significant risks | Outline risk reduction measures to be taken |
| Liquid nitrogen tank may develop a fault and require an engineer visit | If a repair or calibration visit is required, a member of the ORB team will arrange for the engineer to be met whilst maintaining social distancing, and if necessary a face mask and gloves will be provided to the engineer. If any of the equipment in level 4 labs / offices requires maintenance professionals to work on-site, this will be booked in the Teams rota system. Technicians will avoid working on those days if social distancing cannot be maintained. |
| First Aid Cover | |
| Are staff aware of how to summon first aid and from where? | Outline risk reduction measures to be taken |
| Yes | <p>First aid provision will be covered in staff inductions. There is a first aid box in the NDCLS Level 4 laboratories and in Cellular Pathology.</p> <p>One of the technicians is a qualified first aider, holding a certificate in Emergency First Aid at Work from the British Red Cross.</p> <p>If the immediately available first aid does not resolve an injury, or nursing assistance cannot be found in the John Warin Ward, the injured member of staff will attend A&E within the JR.</p> <p>Two members of staff (mostly based in level 1) attended First Aid training week commencing 31st May 2021.</p> <p>From August 2021, NDCLS will also have named first aiders who can be called on if needed.</p> |

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| 3. MANAGING EXISTING RISKS | |
| Have existing risk assessment been reviewed: | Yes / No |
| Are additional control measures required? | Yes / No |
| Outline any additional control measures below: | |
| <p>In the event that the fire alarm sound continuously and it is necessary to evacuate the building, procedures of evacuation remain the same as before the start of the COVID19 pandemic. The fire assembly point for staff working on Level 4 is in the square outside the Tingewick Hall and for staff working in Level 1 is staff car park L (between the blood donor centre and the trauma unit). Face masks</p> | |

will be worn where possible when waiting at fire assembly points as in case it proves difficult to maintain social distancing. However, a swift exit from the building will be the priority.

4. INTERNAL DEPARTMENTAL REVIEW

| Role | Name | Signature | Date |
|--|--------------------|---|------------|
| Manager (proposing risk assessment/work plan) | Stephanie Jones |  | 01/07/2020 |
| Buildings Manager (reviewing buildings related elements) | Dr Amanda Anderson |  | 05/08/2020 |
| DSO (reviewing risk assessment) | Dr Amanda Anderson |  | 05/08/2020 |

5. HEAD OF DEPARTMENT APPROVAL

| Head of Department: (approving risk assessment/work plan) | Name | Signature | Date |
|--|------------------------|--|------------|
| | Professor Deborah Gill |  | 2020 08 13 |
| Approval Comments | | | |
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6. FURTHER REVIEW STAGE

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| Review Date | 20/11/2020 |
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Modifications: We have added some associated staff members (P1); we have used knowledge from the last few weeks to confirm occupancy and risks (P3 & 4); one exception to lone working has been added (P8). We have clarified that masks must be worn at all times where there is more than one person in a room (P5). We increased the occupancy of Bay 1 (P4). We have updated detail of access to microtomes on level 4 and level 1 in the first section of the RA (P2).

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| Review Date | 29/06/2021 |
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Modifications:

Changes to staff list (P1-2); adjustments to increase ease of team working and service provision by increasing occupancy in some spaces (P5 & P14; mostly increasing occupancy from 2 to 3 in offices and lab bays); more detail on typical attendance where this has now settled into set patterns (P2) and average occupancy (P3), and now includes occupancy on Level 1 for biobankers and histology 2 specialists (P2); inclusion of cryotomy as an activity that has resumed (P2); new section on description of symptoms including the latest information on the Delta variant additional symptoms to look out for (P4); adjusting details of what tasks are done at home and what are done in the office (P5); a reminder about maintaining good ventilation as often as possible (P7); minor other clarifications to text, without affecting the risk assessment (throughout); addition of two new first aiders receiving training week commencing 31st May & two additional NDCLS first aiders expected from August 2021 (P10).

Template Managers' Checklist for Return to On-Site Working

This checklist is not comprehensive and has been provided as a template to adapt to local situations.

| Factors to be considered when carrying out risk assessment for Covid-19 Safeguards and Precautions | | | |
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| Individuals involved | Yes | No | N/A |
| <p>Have you consulted staff about their return to on-site working and discussed any potential concerns?</p> <p style="padding-left: 40px;">Have you discussed this with all your team?</p> <ul style="list-style-type: none"> • Have you told them if they have any concerns about coming back, they can also speak to HR? • Have you confirmed with each of them that they are able to return to restart work on-site? | | | |
| <p>All students involved in restarting work on-site must be volunteers and their return must be in line with University guidance and divisional protocol (currently students can only return if they are already based in Oxford or live within safe commuting distance).</p> <ul style="list-style-type: none"> • Have you explained this to all your team? • Have you told them if they have any concerns about coming back they should speak to the Director of Graduate Studies within the Department or their college tutor? • Have you confirmed with each of them that they are able to return to restart work on-site? | | | x |
| <p>Have you included everyone in the team who wanted to be included? If not, have you explained the reason why someone was not included? (Note that anyone who can work from home should continue to work from home.)</p> | | | |
| <p>Have you talked to each member of the team individually about how they can work safely in the (lab and) building?</p> | | | |
| Travel to and from work | Yes / No | | |
| <p>Have you ensured that team members are aware of guidance about travel to work?</p> | | | |
| Safe distancing in the building | Reviewed and implemented if appropriate | | |
| <p>What entrances and exits will your team use? Have you discussed this with the buildings manager? Are one-way traffic systems in use? Will changes accommodate any access requirements?</p> | Staff will follow the instructions from OUH re corridors and lifts, and Code of conduct | | |
| <p>Where will team members go for breaks? Is this in a different building? Will they share with others while on break? How will this be managed?</p> | Own office or outdoors if staying over lunch period | | |

| Safe distancing in the lab | | Reviewed and implemented if appropriate |
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| Have you planned the lab activities to minimise the number of people that need to be on-site at any one time? | Yes | |
| Have you considered splitting the team into smaller groups who are not on site at the same time? | Done | |
| Have you considered rotas? | Done | |
| Have you got a place where you have documented who will be in on any one day? (We may need this if we have to trace people who might have been in contact with someone who develops COVID-19.) | Excel booking sheets on Teams | |
| Can team members work in their own areas within the lab and not share equipment or tools? | Most of the work will not require access to any equipment, apart from the printer and filing cabinets which may be touched by several team members on a given day; other equipment will only be used by one person at a time and therefore subject to cleaning protocols between users (microtome and embedding centre, data entry laptop, freezers) | |
| <p>If team members have to use the same equipment in turn, does the equipment need to be cleaned between use?</p> <p>If it is used very infrequently can you ensure that the gap between use by different people is at least 72 hours?</p> <p>Do you need to implement a booking system for any equipment?</p> | Touch surfaces (printer, filing cabinets, liquid nitrogen room, door handles) will be cleaned on a regular basis by staff on site; other shared equipment will only be used by one person at a time and therefore subject to cleaning protocols between users | |
| Do you need to mark out areas on the floor within the lab to indicate different areas/safe distancing? | 1m and 2m distances will be marked on the floor around desk spaces or on desks, and in the OCHRe store room, liquid nitrogen store room and wet lab bays. Where lesser distances are required e.g. screen work, 1m marked distances will be adhered to and additional precautions will be taken e.g. side-by-side working, wearing of face masks. | |
| Have you considered erecting additional screens or similar to help people remember to stay in certain areas? | Between Bay 2 and Bay 3 at the second microtomy station | |

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| | How will you manage visitors to the lab? Will they be allowed in? Can they stay at the door? | Visitors will not be allowed into the rooms, any signing of paperwork for collection of samples will be done in the main lab where OCHRe staff and person collecting can stay >1m apart. |
| Cleaning regimes | | Reviewed and implemented if appropriate |
| | Have you agreed a cleaning schedule for your lab with the building manager? You should be cleaning regular touch points and shared area surfaces daily. | This will be reviewed as and when guidance from NDCLS changes (e.g. if OUH set up a different cleaning regime) |
| | Should you provide cleaning materials for team members to clean their areas and regular touch points during the working day? | We will provide cleaning products to the team |
| | Do you know what cleaning products are appropriate? | Dettol spray and equivalent wipes for touch points |
| | Do you know what to do if someone actually reports symptoms when working in the building? | Tell them to go home, and assess how much contact there has been with that person and consider self-isolating Tell them that they should get a test immediately and comply with the NHS test and trace system if the result is positive |
| Personal Protective Equipment | | Reviewed and implemented if appropriate |
| | Does your team normally use lab coats? If so, are these kept separate by individuals and laundered on a regular basis? | Yes |
| | What other types of PPE is normally used (e.g. hand, face or eye protection)? How will these be stored, cleaned and maintained? | This is described above. |
| | Can you envisage situations where people might have to work within less than 2m of each other? Have you considered all other options to try and avoid the need for close contact? If so and close contact is still required do individuals need to utilise PPE as an additional measure? If there are such situations, are you able to identify the appropriate PPE or do you need advice from your Departmental Safety Officer? | Jobs are being distributed across the whole team to avoid having to be present at the same time or in close proximity, except where this is absolutely required (e.g. liquid nitrogen handling). Staff will be told to continue to wear the face masks provided by the Trust on entry into the building and where necessary to replace these with face masks supplied by ORB management and placed at all the relevant locations, at all |

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| | | times. While they are working at their desk alone in a room, they may be exempted from wearing the mask. |
| | If your team will need PPE have you considered what sizes etc. you will need to ensure that this fits properly? Does any PPE need to be adapted for anyone? What is the anticipated frequency of use? | No adaptations required. |
| Individual needs | | Reviewed and implemented if appropriate |
| | Do you have anyone who is on health surveillance or seeing Occupational Health for other reasons? Are there others who may need to be registered for health surveillance or other purposes? Have you checked what provision is available? | Yes all staff in the team are under health surveillance through OH, as this is required for handling human tissue. |
| | Do you have any team members with special needs such as reduced mobility? If they have reasonable adjustments in place, do these need to be reviewed? Does anyone need a personal emergency evacuation plan (PEEP)? | Reviewed, not required |
| | Do you have sufficient first aiders or fire wardens available to assist individuals in an emergency? | Only one first aiders in NDCLS level 4 (not in attendance every day); will try to find some volunteers to undertake training as soon as possible. First aiders in Level 1 Cellular pathology will be identified to the team |
| Lone working – additional precautions | | Reviewed and implemented if appropriate |
| | Will the new arrangements involve any additional lone working? If so, have you put in place additional checks? Is Department and University policy being applied? | No lone working |
| Communication with the team | | Reviewed and implemented if appropriate |
| | Have you discussed the plan for how you will work, and the risk assessment, with your team together? | Yes |
| | Have you been through the plan for how you will work, and the risk assessment, with each member of the team? | To be done once document is approved. |
| | Have you put up signs within the lab? | Yes |
| | Do all members of the team know what to do if they start having any symptoms of COVID-19, or if a member of their family does or if they are told that they have come into contact with someone who has been diagnosed with COVID-19? <ul style="list-style-type: none"> Individuals must <u>not</u> be experiencing COVID-19 symptoms when working on-site. Individuals must <u>not</u> work on-site if they or anyone else in their household is self-isolating. | Yes |

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| Do all team members know what to do in case of an emergency while on site? | Yes, the team are normally based in this building and are aware of emergency procedures |
| Have you arranged for a regular team meeting (remotely) to monitor how the return to on-site working is going? | Weekly meetings on Mondays will continue |
| Do you have arrangements in place to ensure that you also keep in regular contact with those team members who cannot return to work on-site, and that they are included in group discussions? | All members of team are included in weekly meeting |
| Equipment checks | Reviewed and implemented if appropriate |
| Have LEV and fume cupboards received statutory flow-rate checks in the last 12 months? | n/a |
| Have pressure systems been checked in accordance with the frequency specified in their Written Schemes of Examination? | n/a |
| Have microbiological safety cabinets been checked and serviced within the previous 12 months? | n/a |
| Are waste disposal streams available including access to appropriate maintained discard waste autoclaves for biological hazardous materials? | n/a |
| Has best practice on lab-based ventilation and air handling been discussed with the Buildings Manager/DSO? | Yes |

Appendix B – Useful contacts

NDCLS Facilities Manager and Safety Officer

Amanda Anderson Tel: 01865 220993 (Office)
01865 222197 (Lab)
07960 745536 (Mobile)

NDCLS Senior Administrator

Mark Evans Tel: 01865 220355

Medical Sciences Division Safety Officer

Graham Ross Tel: 01865 289543 (Office) 07748963145 (Mobile)

OUH Trust Security (John Radcliffe site) 01865 223043

Alternatively, Contact switchboard (dial 0 from any hospital phone) and ask for John Radcliffe Hospital Security.

NDCLS First Aiders (JRH – L4)

Miriam O’Hanlon (not present full time)

First Aiders (JRH – L1)

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| Melisa Clark | Histology |
| Rachel Firth | Histology |
| Elina Sharhani | Histology |
| Jennie Stonard | Histology |
| Doris Ahmed | Secretary |
| Ruth Griffiths | Secretary |
| Emma Bowes | ORB biobanker |
| Hayleigh Colling | Tissue handling technician |