**RISK ASSESSMENT TEMPLATE FOR NOTIFIABLE INFECTIOUS DISEASES\* (INCLUDING COVID-19)**

***This template can be added and integrated to your existing School/Function Safety Arrangements and Risk Assessments document. It is only to be completed as required by Public Health advice.***

***If you require any guidance or assistance with completion of this form please contact the Safety Health and Welfare Office:*** [***shw@TUDublin.ie***](mailto:shw@TUDublin.ie)

*\*The list of diseases (and their respective causative pathogens) that are notifiable is contained in the Infectious Diseases Regulations 1981 and subsequent amendments. The most recent amendment to the Regulations is the Infectious Diseases (Amendment) Regulations 2022 (S.I. No. 252 of 2022).*

***https://www.hpsc.ie/notifiablediseases/listofnotifiablediseases/***

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| **HAZARD IDENTIFICATION**  **& RECOMMENDED CONTROL MEASURES** | **YES / NO / N/A** | **PLEASE LIST OTHER CONTROL MEASURES/ADDITIONAL ACTIONS REQUIRED**  *(You may also use this column to provide any relevant information/comments)* | **RISK RATING (1-25)**  **Severity (1-5) x Likelihood (1-5)** | **PERSON RESPONSIBLE** |
| **PERSONAL HYGIENE** | **YES / NO / N/A** | **Insert Control Measures, Additional Actions & Information** | **RISK RATING** | **PERSON RESPONSIBLE** |
| Hand-washing facilities in place |  |  |  |  |
| Hand sanitiser available at key entry points |  |  |  |  |
| Alcohol-based sanitiser not used or stored near heat sources or naked flames |  |  |  |  |
| Face coverings worn where required as per latest public health guidelines |  |  |  |  |
| Follow HSE guidelines if individuals report symptoms |  |  |  |  |
| Waste collection in place i.e. appropriate lidded bins |  |  |  |  |
| Hand-washing facilities available in workshops, kitchens and laboratories |  |  |  |  |
| Building occupants have personal responsibility regarding respiratory and hand hygiene etiquette |  |  |  |  |
|  |  |  |  |  |
| **PLANS & PROTOCOLS** | **YES / NO / N/A** | **Insert Control Measures, Additional Actions & Information** | **RISK RATING** | **PERSON RESPONSIBLE** |
| TU Dublin Response Plan and Protocols in place |  |  |  |  |
| Isolation Rooms available on campus |  |  |  |  |
| Implement and follow any recommendations made by senior management and external authorities |  |  |  |  |
| Reporting procedures in place for reporting issues/concerns and suspected/confirmed cases |  |  |  |  |
|  |  |  |  |  |
| **FIRST-AID** | **YES / NO / N/A** | **Insert Control Measures, Additional Actions & Information** | **RISK RATING** | **PERSON RESPONSIBLE** |
| First-aiders follow the First-Aid Responder (FAR) training, relevant Clinical Practice Guidelines (CPGs) Training and any additional published guidance from the Pre-Hospital Emergency Care Council (PHECC). |  |  |  |  |
| First-aiders wear/use appropriate Personal Protective Equipment (PPE) before attending to a patient |  |  |  |  |
| PPE kits available for each kit (FFP2 face mask, fluid resistant apron, fluid repellent long sleeved gown, surgical facemask and eye protection, gloves). First-aiders check stocks and re-order from the Safety, Health & Welfare Office [shw@tudublin.ie](mailto:shw@tudublin.ie) |  |  |  |  |
|  |  |  |  |  |
| **CLEANING** | **YES / NO / N/A** | **Insert Control Measures, Additional Actions & Information** | **RISK RATING** | **PERSON RESPONSIBLE** |
| Cleaning and Disinfection Protocol in place |  |  |  |  |
| Toilets and high-touch points cleaned daily |  |  |  |  |
|  |  |  |  |  |
| **MEETINGS, TRAINING & EVENTS** | **YES / NO / N/A** | **Insert Control Measures, Additional Actions & Information** | **RISK RATING** | **PERSON RESPONSIBLE** |
| Follow up-to-date travel information from the Department of Foreign Affairs and Trade |  |  |  |  |
| Trip risk assessment template completed for trips |  |  |  |  |
| Event risk assessment template completed for events |  |  |  |  |
|  |  |  |  |  |
| **OFFICE SPACES** | **YES / NO / N/A** | **Insert Control Measures, Additional Actions & Information** | **RISK RATING** | **PERSON RESPONSIBLE** |
| Cleaning materials supplied to staff |  |  |  |  |
| Staff have own work equipment and materials to minimise sharing of same |  |  |  |  |
| Staff have personal responsibility to follow good hygiene etiquette |  |  |  |  |
| Cleaning and disinfection protocol in place |  |  |  |  |
| Hot desks/shared areas/equipment are cleaned between use |  |  |  |  |
| Natural or mechanical ventilation in place |  |  |  |  |
|  |  |  |  |  |
| **CONTRACTORS/VISITORS** | **YES / NO / N/A** | **Insert Control Measures, Additional Actions & Information** | **RISK RATING** | **PERSON RESPONSIBLE** |
| Contractors/visitors are asked to report if they develop symptoms while on campus |  |  |  |  |
|  | | |  |  |
| **AIR QUALITY/VENTILATION** | **YES / NO / N/A** | **Insert Control Measures, Additional Actions & Information** | **RISK RATING** | **PERSON RESPONSIBLE** |
| Rooms are naturally ventilated (openable windows and doors) |  |  |  |  |
| Rooms are mechanically ventilated |  |  |  |  |
| Carbon dioxide (CO2) monitor available |  |  |  |  |
| Ventilation managed in accordance with TU Dublin Ventilation Strategy |  |  |  |  |
| Recirculation/transfer of air from one room to another avoided |  |  |  |  |
| Ventilation and air conditioning systems inspected and maintained by Campus & Estates Office / Facilities Management Company |  |  |  |  |
|  |  |  |  |  |
| **WORK-RELATED TRAVEL** | **YES / NO / N/A** | **Insert Control Measures, Additional Actions & Information** | **RISK RATING** | **PERSON RESPONSIBLE** |
| Face coverings worn in shared vehicles |  |  |  |  |
| Vehicle cleaned after use in shared vehicles |  |  |  |  |
| International Travel: Follow up-to-date travel information from the Department of Foreign Affairs and Trade |  |  |  |  |
|  |  |  |  |  |
| **HIGH-RISK & VERY HIGH-RISK INDIVIDUALS** | **YES / NO / N/A** | **Insert Control Measures, Additional Actions & Information** | **RISK RATING** | **PERSON RESPONSIBLE** |
| Latest public health advice followed |  |  |  |  |
| Individuals follow medical advice received |  |  |  |  |
| Occupational Health Provider available for consultation and referrals |  |  |  |  |