**General Practice Vulnerability Assessment for the deployment of staff during the Covid-19 pandemic**

As we continue to face unprecedented challenges as a result of the covid-19 global pandemic and develop our responses (which include the establishment of a ‘Hot Hub’ facility for the borough), it is vitally important that we support clinical and non-clinical staff to make informed decisions about their roles in the provision of care.

All staff are expected to see any patients based on their clinical needs, in accordance with their professional responsibility, unless precluded based on their individual risk assessment.

**This assessment is to be completed for all staff currently working or intending to return to work in general practice in Barking & Dagenham. Based on existing experience in B&D, we are keen to use the information you provide to assist in our duties to continue to provide care where and when it is needed, especially during the current pandemic.**

|  |  |
| --- | --- |
| Name |  |
| Job title |  |
| Practice |  |
| Location |  |

1. **About You**

|  |  |  |
| --- | --- | --- |
| **Criteria** | **Yes / No** | **Details (if applicable)** |
| Are you currently pregnant? |  |  |
| Are you aged 70 or older (regardless of medical conditions) |  |  |
| Are you under 70 with an underlying health condition listed below (i.e. anyone instructed to get a flu jab as an adult, chronic (long-term)?* respiratory diseases, such as asthma, chronic obstructive pulmonary disease (COPD), emphysema or bronchitis
* Chronic heart disease, such as heart failure
* Chronic kidney disease
* Chronic liver disease, such as hepatitis
* Chronic neurological conditions, such as Parkinson’s disease, motor neurone disease, multiple sclerosis (MS), a learning disability or cerebral palsy
* Diabetes
* Problems with your spleen – for example, sickle cell disease or if you have had your spleen removed
* A weakened immune system as the result of conditions such as HIV and AIDS, or medicines such as steroid tablets or chemotherapy
* Being seriously overweight (a BMI of 40 or above)
 |  |  |
| Are you at particular risk due to complex health problems such as:* Received an organ transplant and remain on ongoing immunosuppression medication
* With cancer who is undergoing active chemotherapy or radiotherapy
* With cancers of the blood or bone marrow such as leukemia who is at any stage of treatment
* With severe chest conditions such as cystic fibrosis or severe asthma (requiring hospital admissions or courses of steroid tablets)
* With severe diseases of body systems, such as severe kidney disease (dialysis)
 |  |  |

1. **Assessing your circumstances**

|  |  |  |
| --- | --- | --- |
| **Criteria** | **Yes/No** | **Details (if applicable)** |
| Do you have a vulnerable person living with you (a person aged over 70 or anyone with any of the above listed health conditions)? |  |  |
| Do you have childcare or other carer responsibilities as a result of the current ‘lockdown’ situation? |  |  |
| Have you received training to better prepare you for dealing with the Covid-19 pandemic – e.g. use of PPE, conducting remote consultations, setting up remote triage systems, etc? |  |  |
| Have you been tested for and recovered from Covid-19? Or self isolated due to a household member having symptoms - please give details.  |  |  |

1. **Assessing your role**

**Criteria** –Can the role you currently undertake be carried out remotely from home or elsewhere?

**YES** **NO**

Do you have the facilities at home to do this? (e.g. Laptops and FOBS with access to Emis WEB/SystmOne/Vision (please circle which clinical system you have access to?)

Please give details;

1. **Assessing the risk**

If you have answered **Yes to any items in Part 1 & 2 and Yes in Part 3** you will need to speak with your line manager to limit your exposure to working in a socially interactive environment and arrange remote working.

If you have answered **Yes to any items in Part 1 & 2 and No in Part 3** you will need to speak with your line manager to decide the course of action required.

*Please work cooperatively with your line manager to ensure suitable arrangements are put in place.*

1. **The Barking & Dagenham ‘Hot Hub’**

(I have reviewed and fully understand the 'Hot Hub' clinical pathways & responsibilities of a clinician working there)

Are you able to support the B&D 'Hot Hub'?

**YES** **NO**

Are you happy to work at a 'Hot Hub' site, which will involve seeing patients with Covid 19, based on your individual risk assessment above?

**YES** **NO**

If you answered **NO**, are you able to support the 'hot hub' by working remotely?

**YES** **NO**

If you answered **YES**, please tell us what support you require to work remotely?

**STAFF DECLARATION**

**Criteria –** I confirm that the information provided in sections 1, 2, 3, 4 & 5 is correct.

**YES** **NO**

|  |  |
| --- | --- |
| Name of person completing form |  |
| Signature |  |
| Job Title |  | Date |  |

**LINE/PRACTICE MANAGER’S DECLARATION**

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| --- |
| **Declaration** *(select the relevant statement)* |
| [ ]  | I confirm that I have assessed the risk as acceptable and no further risk analysis needs to be undertaken |
| [ ]  | I confirm that I have assessed the risk as **not acceptable** and alternative arrangements have been made for the staff member to support the practice, work from home or self-isolate |

|  |  |
| --- | --- |
| Named person assessing risk(line manager or above) |  |
| Signature |  |
| Job Title |  | Date |  |