Feidhmeannacht na Seirbhúse Sláinte Health Service Executive	Health & Safe	ty Risk As	sessment Form	
Ref: CF:004:01	RE: Biological Agents Risk Asse	essment Form		
Issue date:	June 2022, Sept 2023	Review date:	Sept 2024	
Author(s):	National Health and Safety Functi	ion		
Legislation:	Under the Safety, Health and Welfare at Work (Biological Agents) Regulations, 2013, the risks associated with exposure to biological agents in the workplace must be assessed. All risk assessments must be in writing and control measures necessary to eliminate or minimise the risks documented and implemented.			
Note:	It is responsibility of local manage To assist in carrying out the risk of included.	,	ny remedial actions identified. Itory note on completing a Biological Agents Risk Assessment is	

Administrative Area: Midlands Louth Meath CHO	Primary Risk Category: Infection control
Location: The Village Residence	Secondary Risk Category: Residents
Section /Ward / Dept.: The Village Residence	Tertiary Risk Category: Staff
Date of Assessment: February 2022 updated June 2022 Updated September 2023	Name of Risk Owner (BLOCKS) MICHAEL SEAMUS MCCAUL
Source of Risk: Infective Bugs	Signature of Risk Owner:
Unique ID No: 011	

HAZARD & RISK DESCRIPTION	IMPACTS/VUNERABILITIES	EXISTING CONTROL MEASURES	ADDITIONAL CONTROLS REQUIRED	PERSON RESPONSIBLE FOR ACTION	DUE DATE
Direct patient contact/patient care		 Infection Prevention and Control Guidelines HSE Community infection prevention and control 31 March 2022 are available in the Departments in hard copy Specific Education and Training on COVID 19 Infection Control Link Practitioner on site by 3 Two antimicrobial stewards on site Monthly auditing of usage of antibiotics. Orientation Course for new staff informs personnel of Infection Control Guidelines Guidelines can be accessed by all staff Support documentation available for relatives, visitors and contractors when required (MRSA Hep B & C are available Canteen facilities available for all staff There are toilet/changing facilities available Hand hygiene guidelines 2015 are implemented There is access to Hand Gels and disinfectants. 		PIC	Review: Sept2024

Training Staff receive training on induction and when a biological agent is identified in the department staff are advised to report an appropriate peson and refer to Community Infection Control manual 31 March 2022 to take recommended action and minimise the risk of cross infection Information and consultation with staff occurs on a frequent basis in relation to infection control and PPE Regular training in Hand Hygiene and Standard Precautions is give Mandatory attendance every 2 years Hygiene standards are rigorously applied as per appropriate to community settings PPE is available and used when required Staff identify incidents and are aware of procedure for reporting incidents and the prevention of incidents Acesss to up to date HPSC and HSA **DOCUMENTS ONLINE AND ARE MADE** AVAILABLE ONLINE AND HARD COPY TO ALL UNITS. **Work Clothing** Contaminated clothing can be removed before leaving the facility Staff are advised to change into uniform outside of the facility on lunch breaks etc. Contaminated clothing can be secured in plastic bag and kept separately from other clothing Shower facilities are available in changing area to wash if skin becomes contaminated **Personal Protective Equipment** PPE provided is suitable for the required tasks All PPE is located in the store room.

Over 6 weeks supply of gowns, goggles, Surgical masks and FFP 2 Masks as well as gowns all available Training provided to all new staff on donning and doffing of PPE Vaccinations Covid 19 vaccinations are available free of charge for all staff as well as new entrants • All new employees are offered appropriate vaccinations relating to their area of work Existing employees can access advice from Occupational Health if they have exposure concerns on Telephone No 041 6857811 Records of staff vaccinations are held in Occupational Health **Health Surveillance** Health Surveillance is available and supported through HSE Public Health Statutory notification to the Health Information and Quality Authority and follow up for a minimum of 28 days in relation to all notifiable diseases including Coronavirus. Records of health surveillance are kept in Occupational Health Dept. **Cross Infection** • A procedure is in place to deal with spillage of blood and body fluids. (Community Infection Prevention and Control Manual HSE 31 March 2022 page 39 3.8.3). Standard Precautions Education is given. Monitoring of compliance go guidelines is carried out by Infection Control, Staff and Managers. Community Infection Prevention and Control Manual page 40 (table 8) gives clear steps on

the procedure to follow in the event of Staff exposure to blood and body fluids. Guidelines situation in the ward office. Posters are displayed in clinical areas. Staff informed of

	Prev Prev Outh Resp Facil Infec Resis COV infec P Cross Infec P	duidelines on induction and encouraged to efer to them when appropriate. For implementation February 8th 2022: COVID-19 Normalising Access in Long Term desidential Care Facilities (LTRCFs) Fublication Date: 31 January 2022 Implementation Public Health & Infection ention & Control Guidelines on the ention and Management of Cases and preaks of COVID-19, Influenza & other privatory Infections in Residential Care ities V1.6 02.06.2022 Interception and Control Checklist for dential Care Facilities in the Context of ID-19, Influenza and other respiratory ections Fublication Date: 30 November 2021 Interception (Control is for exposure to sharps) Community Infection Prevention and Control manual HSE 31 March 2022 outlines safe handling and disposal of sharps. Page 24 3.5 Staff informed of guidelines on induction and encouraged to refer when appropriate. In the events of a sharps injury staff follow the Infection Prevention and Control Manual HSE 31 March 2022 3.5.11 https://www.hpsc.ie/a-z/EMIToolkit/				
	INITIAL RISK			RESIDUAL RISK	1	STATUS
Likelihood	Impact	Initial Risk Rating	Likelihood	Impact	Residual Risk Rating	
possible	High	15	possible	moderate	9	

Administrative Area: Midlands Louth Meath CHO	Primary Risk Category: Infection control
Location: The Village Residence	Secondary Risk Category: Residents
Section /Ward / Dept: All Five Households	Tertiary Risk Category: Staff
Date of Assessment: February 2022 Sept 2023	Name of Risk Owner (BLOCKS) Michael SEAMUS MCCAUL
Source of Risk:	Signature of Risk Owner:
Unique ID No: 012	

HAZARD & RISK DESCRIPTION	IMPACTS/VUNERABILITIES	EXISTING CONTROL MEASURES	ADDITIONAL CONTROLS REQUIRED	PERSON RESPONSIBLE FOR ACTION	DUE DATE
Handling of Soiled Linen Potential exposure to group 2 and 3 biological agents. Exposure to blood and Body Fluids. Exposure to Sharps		Cross Infection Community Infection Prevention and Control Manual 31 March 2022 page 41 part 3.10 procedure for management of linen. For Implementation Public Health & Infection Prevention & Control Guidelines on the Prevention and Management of Cases and Outbreaks of COVID-19, Influenza & other Respiratory Infections in Residential Care Facilities V1.6 02.06.2022 Staff are familiar with these procedures Guidelines are implemented by all staff In the event of a sharps injury staff follow the community Prevention and Control manual HSE 31 March 2022 part 3.5.11 and Local Policy "Policy in the Event of a Needle Stick Injury" https://www.hpsc.ie/az/EMIToolkit/appendices/app3.pdf			Review: January 2024

Likelihood	INITIAL RISK Impact	Initial Risk Rating	Likelihood	RESIDUAL RISK	Residual Risk Rating	STATUS
	All r vacce Exis Occi commence Conce Commence Conce Trainer Staff risk: Reg Prece Hyg PPE Staff for a incide Wood Conce	rew employees are offered appropriate cinations relating to their area of work. Iting employees can access advice from upational health if they have exposure cerns. Fords of staff vaccinations are held in upational Health. Fining If receive training and information on potential is to health when handling soiled linen ular training in Hand Hygiene and Standard cautions is given. Fining iene standards are rigorously applied is available and used when required if identify incidents and are aware of procedure reporting incidents and the prevention of dents. Fork Clothing taminated clothing can be removed before ring the facility. Itaminated clothing can be secured in plastic and kept separately from other clothing wer facilities are available in staff if changing room to wash if skin becomes taminated. For provided is suitable for the required tasks oves & Aprons) PEE is stored in the store room propriate PPEs placed in all clinical areas. (on ders)				

Administrative Area: Midlands Louth Meath CHO	Primary Risk Category: Infection control
Location: The Village Residence	Secondary Risk Category: Residents
Section /Ward / Dept: The Village Residence	Tertiary Risk Category: Staff
Date of Assessment: February 2022	Name of Risk Owner (BLOCKS) SEAMUS MCCAUL
Source of Risk:	Signature of Risk Owner:
Unique ID No: 013	

HAZARD & RISK DESCRIPTION	IMPACTS/ VUNERABILITIES	EXISTING CONTROL MEASURES	ADDITIONAL CONTROLS REQUIRED	PERSON RESPONSIBLE FOR ACTION	DUE DATE
Handling and Disposal of Healthcare Risk Waste. Including, dressings and sharps. Potential exposure to group 2 and 3 biological agents. Exposure to sharps and exposure to body fluids.		Cross infection (Handling and Disposal of Healthcare Risk Waste) Waste Management is managed in accordance with the Waste Management Awareness Handbook 2014 Infection Prevention and Control Guidelines includes Segregation packaging storing and transport of waste. Vaccination All new employees are offered appropriate vaccinations relating to their area of work. Existing employees can access advise from Occupational Health if they have exposure concerns Records of staff vaccinations are held in Occupational Health.			Review: January 2024
		Training			

Staff receive training and information on potential

possible	High	15	possible	moderate	9	
Likelihood	Impact	Initial Risk Rating	Likelihood	Impact	Residual Risk Rating	
INITIAL RISK				RESIDUAL RIS	K	STATUS
	head Trail Pree Hygicapp Staff for inci Woo Con leave Con bag Sho ava become PPE PPE (boo All I App	is to health of handling and disposal of althcare risk waste ining in Hand Hygiene and Standard cautions is given. giene standards and Waste Guidelines are olied and monitored by audit? If identify incidents and are aware of procedure reporting incidents and the prevention of idents. In the Clothing interest in the prevention of idents. In the Hospital interest in plastic grand kept separately from other clothing ower facilities have been upgraded and are illable in Staff Changing rooms to wash if skin comes contaminated. Expression provided is suitable for the required tasks ots, gloves, jackets) PPE is stored in the maintenance dept. or opriate PPEs placed in all clinical areas.				

Administrative Area: Midlands Louth Meath CHO	Primary Risk Category: Infection control
Location: The Village Residence	Secondary Risk Category: Residents
Section /Ward / Dept: All Households	Tertiary Risk Category: Staff
Date of Assessment: February 2022 Sept 2023	Name of Risk Owner (BLOCKS) Michael SEAMUS MCCAUL
Source of Risk: Infection due to unhygienic environment	Signature of Risk Owner:
Unique ID No: 014	

HAZARD & RISK DESCRIPTION	IMPACTS/ VUNERABILITIES	EXISTING CONTROL MEASURES	ADDITIONAL CONTROLS REQUIRED	PERSON RESPONSIBLE FOR ACTION	DUE DATE
Cleaning environment/ decontamination of equipment after use. Potential exposure to group 2 and 3 biological agents.		Cleaning environment / decontamination of equipment after use Community Infection Prevention and Control manual HSE NE 2016 – 2019 onwards Procedure for decontaminating equipment is available to all staff. Staff are familiar with these procedures and can access Community Infection Control manual when required and are available in each ward area Guidelines are implemented by all staff. Vaccination All new employees are offered appropriate vaccinations relating to their area of work. Existing employees can access advice from Occupational Health if they have exposure concerns. Records of staff vaccinations are held in Occupational Health. Health Surveillance Limited Health Surveillance is available.			Review: January 2024

possible	High	15	possible	moderate	9	
Likelihood	Impact	Initial Risk Rating	Likelihood	Impact	Residual Risk Rating	
INITIAL RISK			RESIDUAL RISK			STATUS
	Trai Staf risks and Reg Prec Hyg PPE requ Staf for r incid Won Con leav Con and Shor avai skin PPE PPE (glo All F App PPE	cords of health surveillance are kept in cupational Health Dept. Inining If receive training and information on potential as to health of handling contaminated equipment of contaminated environment gular training in Hand Hygiene and Standard ecautions is given. Igiene standards are rigorously applied is available in clinical areas and used when quired if identify incidents and are aware of procedure reporting incidents and the prevention of idents. Intaminated clothing can be removed before ving the Hospital. Intaminated clothing can be secured in plastic bag of kept separately from other clothing ower facilities have been upgraded and are uilable in Staff changing room to wash/shower, if in becomes contaminated. Expression is suitable for the required tasks oves, aprons, rubber boots, masks and visors) PPE is stored in the store room or				STATIS

Explanatory Notes on completion of a Biological Agents Risk Assessment.

Employers are required to identify the biological agent to which employees are, or maybe, exposed. They must assess the risk, making use of the list of biological agents, their classification, containment levels and measures provided for in the 2013 Code of Practice for Safety, Health and Welfare at Work (Biological Agents) Regulations, 2013 and proceed in accordance with the remaining Regulations where appropriate.

HAZARD & RISK DESCRIPTION		IMPACT	EXISTING CONTROL MEASURES	ADDITIONAL CONTROLS REQUIRED	PERSON RESPONSIBLE FOR ACTION	DUE DATE	
Describe the activity being undertaken and the frequency of exposure. Identify the hazard i.e. Biological Agent(s), their Classification and the route of exposure. Refer to the 2013 Code of Practice for the Safety, Health & Welfare at Work (Biological Agents) Regulations 2013 Identify number & category of employees who might be affected. Describe the associated risk . E.g. Risk of infection from potential exposure to Hep B, Hep C or HIV to nursing staff through inoculation when giving injections on a daily basis.			Refer to Impact Table as per the HSE Risk Assessment Tool, and enter the impacts & vulnerabilities that the risk has on employees, Service users & the Organisation	Detail the existing control measures taking account of Schedule 2, 3, 4 & 5 of the Safety, Health and Welfare (Biological Agents) Regulations 2013, and Schedule 2, 3 & 4 of the Code of Practice 2013. When examining the existing control measures, consider their adequacy, method of implementation and level of effectiveness in eliminating or minimising risk to the lowest reasonably practicable level.	Detail the measures necessary to eliminate or further reduce the level of risk. Consider the hierarchy of controls: elimination/substitution/engineering/administrative/PPE. Consider the interim and long term measures.	Enter the name of the person responsible for implementation of each additional control measure.	Enter the date by which implementation of the additional controls to mitigate the risk are due.
INITIAL RISK			RESIDUAL RISK			Status	
Likelihood	Impact	Initial Risk Rating		Likelihood	Impact	Residual Risk Rating	
Possible	High	15		possible	moderate	9	