



COVID-19 RISK MATRIX – Level 3:

Is this person safe to be at work?

The risk assessment matrix is an adaptation of one developed by occupational health physicians from the National Framework for the assessment of staff at work.

	GENERAL PRACTICE STAFF		OTHER ESSENTIAL SERVICES		
Health condition	Frontline clinical staff with close clinical contact (e.g. doctors/nurses in general practice clinics or EDs)	Frontline staff in a clinic/ward but without close patient contact (e.g. reception staff, cleaning staff in general practice clinics or EDs)	Member of the public working in an area with exposure to the public where unable to maintain physical distancing (e.g. aged residential care, early childhood teacher)	Member of the public working in an area with exposure to large numbers of the public but able to maintain physical distancing (e.g. bus driver, supermarket worker, school teacher)	Member of the public working in an area with exposure to small numbers of the public and able to maintain physical distancing (e.g. office worker, electrician)
Over the age of 70 years?	no	discussion needed	discussion needed	yes	yes
Unvaccinated against COVID-19?	no – for patient safety	yes*	Follow Government protocols		
Pregnant or breastfeeding?					
Pregnancy over 28 weeks	no	discussion needed – if your practice or hospital can separate between potential COVID-19 patients and non-COVID-19 patients, you can resume normal clinical duties	discussion needed	yes	yes
Pregnancy under 28 weeks with a heart or lung condition	no		discussion needed	yes	yes
Pregnancy under 28 weeks without a heart or lung condition	no		discussion needed	yes	yes
Breastfeeding	yes, with appropriate controls	yes	yes	yes	yes

* Unvaccinated staff can work in practices provided they practise social distancing and wear appropriate PPE. They should be restricted to 'green zones' in practices.

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Respiratory – asthma?					
Asthma well controlled	yes	yes	yes	yes	yes
Asthma less well controlled (frequent use of SABA/LABA but no night waking)	needs medical review	yes	yes	yes	yes
Asthma poorly controlled, e.g. long-term prednisone/prednisolone greater than 10mg daily or recent (one year) oral prednisone for acute exacerbation	no	needs medical review	needs medical review	yes	yes
Respiratory – other conditions?					
Stable chronic lung disease, e.g. Chronic Obstructive Pulmonary Disease, recurrent bronchitis	no	needs medical review	needs medical review	yes	yes
Unstable chronic lung condition	no	no	no	yes	yes
Recurrent pneumonia or bronchiectasis	no	needs medical review	needs medical review	yes	yes

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Diabetes?					
TYPE 1 DIABETES: Diagnosis for less than 10 years, and with previous good control and good current control. HbA1C blood test is below 65, and no unacceptable highs and/or lows, and no complications of diabetes.	needs careful medical review – must fulfil all criteria	yes	yes	yes	yes
TYPE 1 DIABETES: Diagnosis for more than 10 years, and/or previous or current poor control, and/or HbA1C blood test above 64, and/or unacceptable highs and/or lows, and/or any complications of diabetes.	no	needs medical review	needs medical review	yes	yes
TYPE 2 DIABETES: Well controlled, HbA1C blood test is below 65, and/or no complications of diabetes.	usually yes	yes	yes	yes	yes
TYPE 2 DIABETES: Poorly controlled, HbA1C blood test above 64 and/or any complications of diabetes.	no	needs medical review	needs medical review	yes	yes

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Heart or cardiovascular condition?					
Under 65 years, without multiple previous heart procedures and with well-controlled ischaemic heart disease = normal daily function without chest pain or shortness of breath or needing GTN	yes	yes	yes	yes	yes
65 years or over and well-controlled ischaemic heart disease = normal daily function without chest pain or shortness of breath or needing GTN	no	needs medical review	needs medical review	yes	yes
IHD with occasional symptoms and impact on daily activities	no	yes – needs medical review	yes	yes	yes
Other cardiac condition with or without chest pain/shortness of breath/limb swelling, e.g. cardiomyopathy, past valve surgery	no	probably yes – needs medical review	yes	yes	yes
Hypertension well controlled and no IHD	yes	yes	yes	yes	yes
Hypertension suboptimal control and no IHD	no	probably yes – needs medical review	probably yes – needs medical review	yes	yes

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Do you have a condition or medicine that affects your immune system?					
A number of conditions can leave a patient immunocompromised, and these include HIV infection, some cancers, specific immune deficiency diseases, and patients undergoing organ transplants. Each of these patients should be assessed on an individual basis but as a guide:	no	discussion needed	yes	yes	yes
For those taking immunomodulating and suppressing drugs, the nature of the underlying condition should be the determining factor rather than the drug. The one notable exception to this is the use of glucocorticosteroids, particularly with long-term use of prednisone or similar drugs at a dose higher than 10mg per day	no for glucocorticosteroids	for glucocorticosteroids, needs medical review	for glucocorticosteroids, needs medical review	yes	yes

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Cancer?					
Active cancer	no	no	needs medical review	if able	yes
Recovering from cancer, on chemotherapy or radiotherapy	no	no	needs medical review	if able	yes
Full recovery from leukaemia or lung cancer	no	needs medical review	yes	yes	yes
Full recovery from another cancer (not leukaemia or lung)	yes	yes	yes	yes	yes
Musculoskeletal condition?					
Any active musculoskeletal condition, e.g. osteoarthritis, inflammatory joint disease	see medications above; needs medical review	yes	yes	yes	yes
Skin condition?					
Any active skin condition not on an immunosuppressant medicine as listed above	yes	yes	yes	yes	yes

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Other health condition?					
If other condition, does not affect lungs, heart, immune system, diabetes	probably yes – needs medical review	yes	yes	yes	yes
Conditions affecting lung lining, respiratory muscles, pleura, neuromuscular conditions	probably no – needs medical review	yes – if already working there	yes	yes	yes
Other neurological conditions possibly affecting breathing	no	needs medical review	needs medical review	yes	yes
Stable psychological or psychiatric condition	probably yes – may need medical review	yes – if already working there	yes	yes	yes
Deteriorating psychological or psychiatric condition	no	needs medical review	if able	yes	yes
Morbid obesity	no	needs medical review	needs medical review	yes	yes
Chronic kidney or chronic liver disease	needs medical review	probably yes – needs medical review	yes	yes	yes