

COVID-19 Risk Assessment

23 November 2021

Executive summary

Lincoln University continues to respond to the COVID-19 pandemic including implementing where required Government mandates and utilising best practice advice to ensure a high level of care for our Lincoln whānau.

We have completed a COVID-19 risk assessment process that follows the guidance provided by WorkSafe. The process took into consideration both the public health risk of COVID-19 and the impacts of this risk as an occupational health threat – specifically, we have considered the health, safety and wellbeing of our people while working, learning and providing services to or on behalf of the university.

The context in which Lincoln University operates means that significant numbers of staff, students, contractors and visitors have frequent interactions within, across and beyond our campus boundaries.

Add to this the fact that our working, learning and research environments are, for the most part, borderless and flexible, meaning increased risk of infection and transmission within this setting and while participating in these activities.

The emergence of the Delta variant of COVID-19 poses a greater threat to the health and wellbeing of our university community, and a greater challenge in containing the spread of the virus in an outbreak. Existing control measures are not adequate to prevent the risk of serious illness.

Vaccination offers the best health protection against COVID-19.

Studies show that 95% of people who have received two doses of the vaccine are protected against getting COVID-19 symptoms. Those who are vaccinated are far less likely to get very sick and less likely to transmit COVID-19 onto other people. Vaccination is one of our most important risk management tools in moving back to a near-normal University experience.

With regards to the Health and Safety at Work Act 2015, adopting a vaccination requirement for students, staff, contractors and visitors who access our campus and other sites will ensure the minimisation of harm to workers and other persons. This is an occupational health risk management intervention to mitigate the risks of low immunisation levels in the workplace that could contribute to an increase in uncontrolled transmission of the COVID-19 virus throughout the university community.

Recommendation:

As part of our ongoing response to the pandemic, to minimise the risk of harm to our community, the university proposes to make COVID-19 vaccination a requirement for those students, staff, contractors, tenants and visitors who access our campus, effective from 14 February 2022.

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The global pandemic public health issue

On 30 January 2020, the WHO declared that the SARS-CoV-2 outbreak constituted a Public Health Emergency of International Concern. This was followed by the confirmation on 11 March 2020 of the COVID-19 outbreak as a global pandemic. Since then and in a very short period, health care systems and society worldwide have been severely challenged by yet another emerging variant of the virus.

Early in 2021 new data emerged that the Delta variant was more infectious and was leading to increased transmissibility when compared with other variants. Delta is currently the predominant variant of the virus worldwide, including Aotearoa New Zealand.

Implications of the Delta variant

The Delta variant has a number of differences compared to earlier versions of the virus. These differences mean that the Delta variant is a greater threat to the health of people who contract the infection.

It is also a greater challenge to contain the spread of the virus in an outbreak. ([Health Navigator New Zealand](#))

- Delta can cause people to develop more serious COVID-19 illness than other variants of the virus
- People with a Delta infection are at higher risk of needing to be in hospital
- The chance of infecting others, such as people within your household or other contacts, is very high because Delta is so transmissible
- It is estimated that on average, one person infected with Delta may infect 5 or 6 other people. This is how Delta outbreaks have grown so rapidly overseas and in Aotearoa New Zealand
- People with Delta infections seem to carry much more virus (have a higher viral load) and for a longer period of time than those infected with the original virus or other variants
- The time from exposure to the virus until first symptoms is shorter for the Delta variant
- Some people may have no symptoms (asymptomatic) when infectious.

Stopping the spread of the virus

The highly transmissible nature of the Delta variant highlights the importance of stamping out any community outbreaks as quickly as possible by following government advice on how to stop the spread through early detection, swift contact tracing and isolation of cases and contacts.

Following recommended health practices as listed below is also important in stopping the transmission of the virus:

- Keeping indoor rooms well ventilated (e.g. by opening windows and doors) where possible
- Wearing masks and face coverings is one way of keeping yourself safe and protecting others from COVID-19, especially when physical distancing is not possible. Wear masks in confined or crowded environments, such as public transport or supermarkets
- Physical distancing of 2m where possible
- Staying home if you feel unwell or show any symptoms. Call Healthline and get a COVID-19 test

- Keep a record of where you've been or scan in wherever you go using the COVID Tracer app and turn Bluetooth on your phone so you can be contacted if you have been near a case.

Vaccination increases effectiveness and protection

Vaccination helps reduce the transmission of the virus. Vaccines train our immune system to recognise the targeted virus and create antibodies to fight off the disease without getting the disease itself. After vaccination, the body is ready to fight the virus if it is later exposed to it, thereby preventing illness.

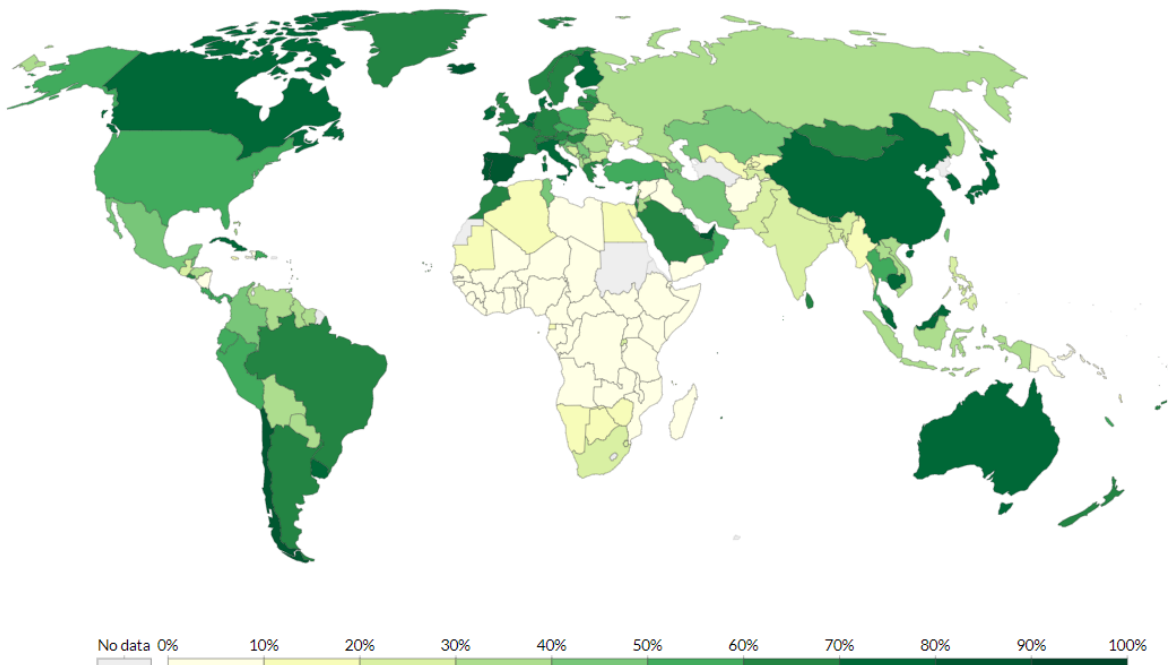
Being fully vaccinated gives protection against the Delta infection and a very high degree of protection against severe illness, hospitalisation and death.

Share of the population fully vaccinated against COVID-19, Nov 19, 2021

Total number of people who received all doses prescribed by the vaccination protocol, divided by the total population of the country.

Our World in Data

World



Source: Official data collated by Our World in Data. Alternative definitions of a full vaccination, e.g. having been infected with SARS-CoV-2 and having 1 dose of a 2-dose protocol, are ignored to maximize comparability between countries.

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53.1% of the world population has received at least one dose of a COVID-19 vaccine. As of 19 November 2021, 7.66 billion doses have been administered globally, and 27.25 million are now administered each day. ([Our World Data](#))

Safe and effective vaccines are making a significant contribution to preventing severe disease and death from COVID-19.

The Pfizer vaccine (Comirnaty) has been provisionally approved (with conditions) by Medsafe for use in New Zealand. Medsafe is New Zealand's medicines safety authority. It evaluates applications for all new medicines, including vaccines, to make sure they meet international standards and local requirements.

Evidence currently shows:

- The effectiveness of two doses of the Pfizer vaccine against symptomatic illness is 64–95%
- The effectiveness of two doses of the Pfizer vaccine against hospitalisation or severe disease due to Delta infection is about 90–96%.

The Pfizer vaccine (Comirnaty) is an mRNA (messenger ribonucleic acid) vaccine that contains the genetic code for an important part of the SARS-CoV-2 (COVID-19) virus called the 'spike protein'. Spike proteins are the little projections on the surface of the virus.

The COVID-19 vaccine stimulates your body's immune system to produce antibodies and other proteins that will fight the virus if you're exposed to it. This reduces the risk of getting infected and if you do get COVID-19, it means you could have no symptoms or will have fewer, milder symptoms and recover faster.

The vaccine cannot give you COVID-19. mRNA vaccines do not contain any of the virus that causes COVID-19, or any other live, dead or deactivated viruses.

The vaccine does not affect your DNA. It does not affect or interact with your DNA or genes. mRNA vaccines never enter the nucleus of the cell which is where our DNA is kept.

While the data is clear that vaccines protect people from the effects of COVID-19, research is ongoing to determine whether a vaccinated person could still transmit the virus to someone else – so to be safe, we must assume there is still a risk of transmission ([COVID-19 – about the Delta variant](#), Ministry of Health, NZ, 2021).

Provisional approval of other vaccines

Medsafe has granted provisional approval of the Janssen (Johnson & Johnson) COVID-19 vaccine and the AstraZeneca COVID-19 vaccine for individuals aged 18 and over.

Medsafe's provisional approval is the first step, with further consideration required by Cabinet on options for the use of these vaccines ([MoH](#)).

Te Whare Wānaka o Aoraki Lincoln University's response to the global pandemic

Through hard work, determination and perseverance Te Whare Wānaka o Aoraki Lincoln University's response to the pandemic continues to be swift, consistent and effective.

Despite a period of unparalleled challenges including fluctuating between alert levels, our academic staff continue to persevere in providing teaching and research of the very highest quality and a student experience exemplifying our value of manaakitaka.

The highest priority remains the health, wellbeing and safety of all our staff and students.

A COVID-19 Critical Incident Management Team (CIMT) was stood up in January 2020, with a focus on immediate and ongoing support for all students and staff.

The University continues to closely monitor the evolving situation, guided by the constantly changing recommendations of the Ministry of Health (MoH), and following the Ministry of Education (MoE) fluctuating operating guidelines for TEOs.

Grounded by our strategy 2019-2028 the University remains focused on providing world-class education and research reinforced by our six strategic goals.

The strategy has been particularly significant following the outbreak of the pandemic and its concomitant challenges and uncertainty. It has provided a robust framework balancing the here and now with a long term view and remains a key driver for Lincoln University's growth, financial sustainability and ultimate realisation of becoming a globally-ranked, top-five land-based University.

The strategy is underpinned with our core values, aligned to the Māori Strategy, reflecting what is important to us as a University, and guiding our interactions with our staff, students and stakeholders.

Above all, we exemplify our value of *maanakitaka* by paying respect to each other and to all others in accordance with our *tikaka*.

Engagement and communication principles adopted at the very start of the pandemic including respect, integrity, openness and transparency, leader-led, consultation and collaboration continue to feature in a centralised multi-channel communication approach to ensure all staff and students are consulted, engaged and kept well informed.

Campus COVID-19 health and safety protocols

On-campus facilities such as Te Kete Ika, the Bookshop and Whare Hākinakina LU Gym continue to operate under Public Health control measures. As the Library is operating under tertiary institution guidelines, access is restricted to students and staff only.

All students, staff and visitors are required to adhere to the following current alert level COVID-19 health and safety protocols on campus:

Physical distancing: Reduce close contact with strangers. Keep a two-metre distance from people you don't know when out in social spaces. Keep a one-metre distance, where practicable, in controlled spaces such as offices, lecture rooms, labs and work areas.

Scan, scan, scan: All students, staff and visitors are required to scan the QR codes when moving about campus. This includes buildings, teaching rooms, meeting rooms and all on-campus facilities including social spaces and eating areas.

Wear a mask. All students and staff are strongly encouraged to bring and wear their own masks as they move about campus, especially where physical distancing is not practicable. For example, in confined spaces with colleagues or students such as in meetings, interviews, in lifts, stairwells, labs, teaching rooms, etc. Masks must be worn in campus facilities such as Mrs O's, the Bookshop and Canon Printshop, and the Health Centre.

Gatherings and events that are not directly education-related are limited to 100 people indoors and outdoors.

Practise good hygiene such as coughing/sneezing into the elbow, regular hand washing and using the readily available hand sanitisers.

While these protocols remain in place and are actively communicated, given the diverse geographical nature of the campus accompanied by constantly fluctuating numbers of students, contractors, tenants and visitors it is becoming more difficult to manage. This cannot be relied on as the only means of mitigating the transmission of the virus on campus.

Teaching and learning

The COVID-19 Academic and Student Experience Working Group (CASEWG) was established in response to the COVID-19 pandemic in January 2020. Chaired by the Assistant

Vice-Chancellor Learning and Teaching, the pan-university composition of the group and direct reporting allowed for flexible and swift decision making.

From the start, CASEWG developed an academic management plan for all staff involved in teaching and assessment to enable and support students to participate in learning while unable to attend class on campus. The term Emergency Remote Teaching (ERT) was quickly adopted to describe the teaching and assessment delivered under these conditions and for a short period of time. The plan provided the parameters by which assessments could be adjusted before the start of semester, to ensure equity and access for all students.

While all course material continues to be made available online via Akoraka|Learn, ensuring an equitable learning experience for all students, real-world learning is fundamental in delivering work-ready graduates which is why practical work remains an integral component of our programmes. For students undertaking work-integrated learning as part of their courses, the requirement to be vaccinated becomes even more necessary.

While the pandemic has spurred a new online initiative, Lincoln Connected, focused on providing students with a technology-engaged learning ecosystem, this is still in the early stages of development.

Research

The University remains committed to supporting the academic success of all students, and a focus is placed on providing timely advice to students undertaking research as part of their PhD, MSc and other research-intensive courses such as Postgraduate Diplomas and Honours degrees.

A case-by-case approach has been adopted by the University, and research students are encouraged to remain in close contact with their supervisors to discuss the implication of the restrictions around COVID-19 in terms of their research plans, data collection, fieldwork and laboratory experimentation.

The easing of these restrictions through vaccination, especially in the event of an alert level change will be hugely beneficial to ongoing research.

Campus operations

The Lincoln University whānau includes in excess of 3000 students (headcount) and 600 staff members on a 58-hectre campus located in the Lincoln township, 20 kilometres from Christchurch.

With over 70 buildings on campus, ranging in age and condition, the campus is diverse and park-like, offering a number of amenities that cater for the Lincoln whānau and wider public community including:

- Whare Hākinakina LU Gym – sports and recreational
- Lincoln University Early Childhood Centre
- Te Kete Ika
- Musalla Prayer Room
- The Library.

Many of the lecture rooms, meeting rooms, student social spaces and sporting facilities are used to host a number of ceremonies, events, seminars, workshops and meetings throughout the year in addition to regular and frequent hosting of guests, alumni, schools and visitors.

Due to the collaborative nature of many of our research partnerships, the University has staff and students working, learning and conducting research from various locations outside of its main campus including other New Zealand universities, BHU, CRIs and industry entities.

Student accommodation

The University owns and operates seven fully catered Halls of Residence providing accommodation for up to 500 students living on campus, with three blocks of self-catering flats providing accommodation for up to 100 students. There are also a number of campus houses occupied by students with families.

Additional people activities on campus

The University also owns three farms in close proximity to campus that are actively used for research, demonstration and teaching by our staff and students as well as the wider Lincoln hub, including CRIs, industry and the wider land-based community.

In addition, the ongoing construction and upgrades on campus as part of the Campus Development Programme means an increased number of external workers/contractors on campus, increasing the risk of transmission on campus.

Also, due to the nature of our research including more effective utilisation of campus space, Lincoln University has a number of tenants on campus occupying buildings, shared office space and laboratories, and in some situations shared amenities. This increases the risk of transmission on campus.

Government advice and guidance

COVID-19 Public Health Response (Vaccinations) Order (3) 2021

On 11 October 2021, the New Zealand Government announced a new vaccination mandate for two sectors in New Zealand that are critical to preventing the spread of COVID-19. Under the new health order, all school staff who work with children and most healthcare workers must be vaccinated against COVID-19 to continue in their jobs.

This requirement affects Lincoln University staff providing services or support to workplaces in these categories.

COVID-19 Protection Framework

A new Government COVID-19 Protection Framework (traffic light system) has been announced to replace the existing Alert Level system. The framework aims to provide a pathway out of lockdown and give vaccinated New Zealanders more freedom.

On 29 November 2021 Cabinet will confirm the decision to move Auckland and the rest of New Zealand into the new traffic light system, a framework that does not rely on lockdowns as the main measure to stop the virus from spreading. On 2 December - at 11:59pm, all of New Zealand will move to the COVID-19 Protection Framework. Auckland will move to Red. Settings for the rest of New Zealand are yet to be decided on.

The COVID-19 Protection Framework introduces a new flexible three-level approach to managing COVID-19 in the community.

Based on the new COVID-19 Protection Framework vaccination certificate requirements for the University will be either :

1. Legally choose to implement a vaccination entry requirement for staff, students and visitors to come onto campus. This will mean that at all three levels we will generally be able to remain open for all fully vaccinated students and staff.

Or

2. Do not request proof of vaccine. This means we will have to operate with strict limits on capacity and space requirements.

The MoE has indicated in a Tertiary Provider and International Bulletin (dated 18 November 2021) that under the COVID-19 Protection Framework, tertiary education will be:

- Open at Green
- Open with public health measures in place at Orange
- Open with a vaccination requirement for onsite delivery at Red.

MoE has also stated that they will provide guidance on how TEOs should prepare for each level by the end of November 2021.

Beyond the formal vaccination and capacity limit requirements at Red, it will be up to TEOs to undertake their own risk assessment and decision-making in relation to their campus, in consultation with students and staff.

The New Zealand COVID-19 Protection Framework

Factors for considering a shift between levels: vaccination coverage; capacity of the health and disability system; testing, contact tracing and case management capacity; and the transmission of COVID-19 within the community, including its impact on key populations.

Localised lockdowns: will be used as part of the public health response in the new framework across all levels, and there may still be a need to use wider lockdowns (similar to the measures in Alert Level 3 or 4).

Vaccination certificates: Requiring vaccination certificates will be optional for many locations. There are some higher-risk settings where they will be a requirement in order to open to the public. Some places won't be able to introduce vaccination requirements, to ensure everyone can access basic services, including supermarkets and pharmacies.

 <p>GREEN</p>	<p>COVID-19 across New Zealand, including sporadic imported cases.</p> <p>Limited community transmission.</p> <p>COVID-19 hospitalisations are at a manageable level.</p> <p>Whole of health system is ready to respond – primary care, public health, and hospitals.</p>	<p>General settings</p> <ul style="list-style-type: none"> Record keeping/scanning required Face coverings mandatory on flights, encouraged indoors Public facilities – open 	<ul style="list-style-type: none"> Retail – open Workplaces – open Education (schools, ECE, tertiary) – open 	<ul style="list-style-type: none"> Specified outdoor community events – allowed
	<p>No limits if vaccination certificates are used for:</p> <ul style="list-style-type: none"> Hospitality Gatherings (e.g. weddings, places of worship, marae) 	<ul style="list-style-type: none"> Events (indoor/outdoor) Close contact businesses 	<ul style="list-style-type: none"> Gyms 	
	<p>If vaccination certificates are not used, the following restrictions apply:</p> <ul style="list-style-type: none"> Hospitality – up to 100 people, based on 1m distancing, seated and separated Gatherings (e.g. weddings, places of worship, marae) – up to 100 people, based on 1m distancing 	<ul style="list-style-type: none"> Events (indoor/outdoor) – up to 100 people based on 1m distancing, seated and separated Close contact businesses – face coverings for staff, 1m distancing between customers 	<ul style="list-style-type: none"> Gyms – up to 100 people, based on 1m distancing 	
 <p>ORANGE</p>	<p>Increasing community transmission with increasing pressure on health system.</p> <p>Whole of health system is focusing resources but can manage – primary care, public health, and hospitals.</p> <p>Increasing risk to at risk populations.</p>	<p>General settings</p> <ul style="list-style-type: none"> Record keeping/scanning required Face coverings mandatory on flights, public transport, taxis, retail, public venues, encouraged elsewhere 	<ul style="list-style-type: none"> Public facilities – open with capacity limits based on 1m distancing Retail – open with capacity limits based on 1m distancing 	<ul style="list-style-type: none"> Workplaces – open Education – open with public health measures in place Specified outdoor community events – allowed
	<p>No limits if vaccination certificates are used for:</p> <ul style="list-style-type: none"> Hospitality Gatherings (e.g. weddings, places of worship, marae) 	<ul style="list-style-type: none"> Events (indoor/outdoor) Close contact businesses 	<ul style="list-style-type: none"> Gyms 	
	<p>If vaccination certificates are not used, the following restrictions apply:</p> <ul style="list-style-type: none"> Hospitality – contactless only 	<ul style="list-style-type: none"> Gatherings (e.g. weddings, places of worship, marae) – up to 50 people, based on 1m distancing 	<ul style="list-style-type: none"> Close contact businesses, events (indoor/outdoor) and gyms are not able to operate 	
 <p>RED</p>	<p>Action needed to protect health system – system facing unsustainable number of hospitalisations.</p> <p>Action needed to protect at-risk populations.</p>	<p>General settings</p> <ul style="list-style-type: none"> Record keeping/scanning required Face coverings mandatory on flights, public transport, taxis, retail, public venues, recommended whenever leaving the house 	<ul style="list-style-type: none"> Public facilities – open with up to 100 people, based on 1m distancing Retail – open with capacity limits based on 1m distancing Workplaces – working from home encouraged 	<ul style="list-style-type: none"> Education – schools and ECE open with public health measures and controls Specified outdoor community events – allowed with capacity limits
	<p>With vaccination certificates, the following restrictions apply:</p> <ul style="list-style-type: none"> Hospitality – up to 100 people, based on 1m distancing, seated and separated Gatherings (e.g. weddings, places of worship, marae) – up to 100 people, based on 1m distancing 	<ul style="list-style-type: none"> Events (indoor/outdoor) – up to 100 people based on 1m distancing, seated and separated Close contact businesses – public health requirements in place 	<ul style="list-style-type: none"> Gyms – up to 100 people, based on 1m distancing Tertiary education – vaccinations required for onsite delivery, with capacity based on 1m distancing 	
	<p>If vaccination certificates are not used, the following restrictions apply:</p> <ul style="list-style-type: none"> Hospitality – contactless only Gatherings (e.g. weddings, places of worship, marae) – up to 10 people 	<ul style="list-style-type: none"> Close contact businesses, events (indoor/outdoor) and gyms are not able to operate Tertiary education – distance learning only 		

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Overview of guiding internal and legislative framework

At Lincoln University health and safety is about compliance and minimisation of risk with a top priority of protecting people and ensuring everyone goes home safely at the end of their workday.

The following internal and legislative obligations inform and guide Lincoln University's approach to managing occupational health issues that arise out of workplace exposures to COVID-19.

The Lincoln University COVID-19 Alert Level Health & Safety Plan

This Health and Safety Plan is intended to guide on-site activities during the shifting alert levels. The Plan outlines the University's organisation-wide procedures and protocols to make campus COVID-19 safe. The plan covers core operating measures for each Alert Level including working requirements, vulnerable workers and processes in the event of a positive COVID-19 case on campus.

Business Continuity Planning

To coordinate a response to COVID-19 and ensure careful planning and considered decision-making for the future, the University's Business Continuity Planning framework is actively managed and updated to ensure we can manage any major disruptions in the event of a community outbreak on campus, enable the continuation of teaching, research and other business operations within defined timeframes and minimise the reputational, operational and financial impact on the University.

The Health and Safety at Work Act 2015 (HSWA)

The main purpose of HSWA is to provide for a balanced framework to secure the health and safety of workers and workplaces by protecting workers and other persons against harm to their health, safety and welfare by eliminating or minimising risks arising from work.

A Person Conducting a Business Undertaking (PCBU) must conform to the requirements of HSWA in providing primary care in ensuring the health and safety of its workers.

A Person Conducting a Business Undertaking (PCBU) must:

- Ensure health and safety of their workers at the work
- Ensure the health and safety of workers who are influenced or directed by the PCBU.
- Ensure the health and safety of other people by making sure they are not put at risk from work carried out by the PCBU.

Officers hold very senior leadership positions and have significant influence over the management of the University.

The role includes:

- Knowing about worker health and safety matters and keep up to date
- Gaining an understanding of the operation of the University and its hazards and risks
- Ensuring the PCBU has appropriate resources and processes to eliminate or minimise those risks
- Exercising due diligence to ensure that the business meets its health and safety obligations under HSWA.

Workers (individuals carrying out work in any capacity for the University, this includes staff) should:

- Take reasonable care for their own health and safety
- Take reasonable care that their acts and omissions do not adversely affect the health and safety of other people
- Comply as far as reasonably able, with any reasonable instruction that is given to them to allow Lincoln University to comply with the law
- Cooperate with any reasonable policy or procedure of the University relating to health and safety at the workplace that has been notified to workers.

Others (students, visitors, tenants and contractors) should:

- Take reasonable care for their own health and safety
- Take reasonable care that their acts and omissions do not adversely affect the health and safety of other people
- Comply, as far as reasonably able, with any reasonable instruction that is given to them to allow Lincoln University to comply with the law.

See more information here [Health and Safety at Work Act 2015 \(HSWA\)](#)

Education (Pastoral Care of Tertiary and International Students) Code of Practice 2021

The Code exists to support educational objectives for domestic and international learners, recognising that the community expects providers to support wellbeing, and providers need the flexibility to respond to their learners' needs in different ways.

The Code acknowledges the importance of supporting learner wellbeing and safety in education, and the value New Zealanders place on wellbeing and safety.

Specific parts of the code have been considered in preparing this risk analysis.

Outcome 2: Learner Voice: Providers understand and respond to diverse learner voices and wellbeing and safety needs in a way that upholds their mana and autonomy.

Outcome 3: Safe, inclusive, supportive and accessible physical and digital learning environments: Providers must foster learning environments that are safe and designed to support positive learning experiences of diverse learner groups.

Outcome 4: Learners are safe and well: Providers must support learners to manage their physical and mental health through information and advice and identify and respond to learners who need additional support.

Outcome 5: A positive, supportive and inclusive environment in student accommodation: Providers must ensure that student accommodation promotes and fosters a supportive and inclusive community that support the wellbeing and safety of residents.

Outcome 8: Responding to the distinct wellbeing and safety needs of international tertiary learners: Signatories must ensure that practices under this code respond effectively to the distinct wellbeing and safety needs of their diverse international tertiary learners.

See more information here [Education \(Pastoral Care of Tertiary and International Students\) Code of Practice 2021](#)

Lincoln University's approach to COVID-19 as an occupational health issue

Occupational health lens

Applying an occupational health lens to COVID-19 means Lincoln University will consider the four elements. All four elements are interrelated and often present as a significant control if applied to the maximum degree.

Early detection. Detection is both a before and after risk and a control. COVID-19 testing, reporting of COVID-19 like symptoms, and other sampling methods allow various levels of early detection. The higher the level of early detection the lower the level of risk. The opposite is also true. Similarly, contact tracing allows early detection of contact cases once a positive test is confirmed.

Managing infection. In the event of a positive COVID-19 case, the individual must comply with all [public health requirements](#).

Immunisation. Immunisation is both a risk and control. Low immunisation levels equal high risk. High immunisation levels equal low risk. Immunisation is a key risk management intervention in the detection, transmission and infection of COVID19.

Transmission. Controlling the risk of transmission requires significantly reducing the ability of the virus to pass from one person to another. There are several risk control methods for doing this, many of which are embodied in the current COVID-19 Response Alert Levels. With the introduction of the COVID-19 Protection Framework, the university will need to fully allow for continued risk mitigation of transmission when there are no clear public health mandates of pragmatically sufficient occupational health controls.

Risk assessment - COVID-19 to staff

Guidance has been sought from Government sources such as WorkSafe on the risk factors to consider when assessing the risk of COVID-19 to workers.

The following assessment has been made across the cohort of LU staff, in light of the university's operating context:

1. How many people does the employee carrying out that work come into contact with? (very few = lower risk; many = higher risk)
2. How easy will it be to identify the people who the employee comes into contact with? (easy to identify, such as co-workers = lower risk; difficult to identify, such as unknown members of public = higher risk)
3. How close is the employee carrying out the tasks in proximity to other people? (2 metres or more in an outdoor space = lower risk; close physical contact in an indoor environment = higher risk)
4. How long does the work require the employee to be in that proximity to other people? (brief contact = lower risk; lengthy contact = higher risk)
5. Does the work involve regular interaction with people considered at higher risk of severe illness from COVID-19, such as people with underlying health conditions? (little to none = lower risk; whole time = higher risk)
6. What is the risk of COVID-19 infection and transmission in the work environment when compared to the risk outside work? (equal to outside work = lower risk; higher than outside work = higher risk)
7. Will the work continue to involve regular interaction with unknown people if the region is at a higher Alert Level? (no = lower risk; yes = higher risk).

Role/Work Activity	Risk factors present	Notes	Risk rating
Academic roles- face to face teaching or research	1 – High 2 – High 3 – High 4 – High 5 – Medium 6 – High 7 – Low	Requires interactions with cohorts of students or research teams, partners or participants. Difficult to maintain physical distancing at all times. Mask wearing is not practical for the purposes of communication and engagement. May include interactions with persons at higher risk of severe illness from COVID-19. Teaching spaces are mostly internal, with confined access spaces like hallways, lifts and stairs. Use of shared facilities such as laboratories; preparation, storage or handling areas specialist equipment; studios or performance areas bathrooms, kitchens and access ways. Roles could involve domestic/international travel.	High
Staff with public-facing roles	1 – High 2 – High 3 – High 4 – High 5 – Medium 6 – High 7 – Low	Role interfaces with larger numbers of people, known and unknown. Some services are open to members of the public. May include interactions with persons at higher risk of severe illness from COVID-19. Difficult to identify individuals. Typically, aged buildings and ventilation systems. Some staff in these roles may be at higher risk of serious illness from COVID-19.	High
Staff – Health Centre	1 – High 2 – High 3 – High 4 – High 5 – High 6 – High 7 – High	May include interactions with people at higher risk of severe illness from COVID-19. Covered by the Vaccination Health Order. Some staff in these roles may be at higher risk of serious illness from COVID-19. Whilst telemedicine will work in some cases, nasal swabbing still requires in-person treatment.	High
Staff - Wellbeing	1 – Medium 2 – Medium 3 – Medium 4 – High 5 – Medium 6 – Medium 7 – Low	May include interactions with people at higher risk of severe illness from COVID-19. Can move to online interaction where Alert Levels increase.	Medium
Professional staff – external contact	1 – High 2 – High 3 – High 4 – High 5 – High 6 – High 7 – High	Contact generally with people known to the worker, although some contact with external persons, groups or other workplaces. Campus is the primary place of work, general movement on campus to cafes and other service amenities. Workspaces and access to workspaces would typically be through shared areas. The workplace requires the use of shared facilities such as bathrooms, kitchens and access ways. May have co-workers or contact with persons who are at higher risk of severe illness from COVID-19.	High
Professional staff – student-focused	1 – High 2 – High 3 – High 4 – High	Contact with numerous persons – known and unknown (i.e. identifiable) to the worker. The vaccination status of those persons is unknown. Some contacts may be with vulnerable persons. Some staff in these roles may be at	High

	5 – Medium 6 – Medium 7 – Low	higher risk of serious illness from COVID-19. Commonly work in shared workspaces use of shared facilities such as bathrooms, kitchens and access ways. May have co-workers who are at higher risk of severe illness from COVID-19.	
Library staff	1 – High 2 – High 3 – High 4 – High 5 – Medium 6 – High 7 – Medium	Large numbers of people in the building. Open to members of the public. May include interactions with persons at higher risk of severe illness from COVID-19. Difficult to identify individuals. Typically, aged buildings and ventilation systems. Some staff in these roles may be at higher risk of serious illness from COVID-19. Use of shared facilities such as bathrooms, kitchens and access ways.	High
Research staff	1 – High 2 – High 3 – High 4 – High 5 – Medium 6 – High 7 – Medium	Contact with numerous persons – known and unknown (i.e. identifiable) to the worker. The vaccination status of those persons is unknown. Some contacts may be with vulnerable persons. Some staff in these roles may be at higher risk of serious illness from COVID-19. Commonly work in shared workspaces use of shared facilities such as laboratories; preparation, storage or handling areas; specialist equipment; studios or performance areas; bathrooms, kitchens and access ways. May have co-workers who are at higher risk of severe illness from COVID-19. Some staff in these roles may be at higher risk of serious illness from COVID-19.	High
Accommodation staff	1 – High 2 – High 3 – High 4 – High 5 – High 6 – High 7 – High	Requires interactions with other persons – known and unknown (i.e. identifiable) to the worker. The vaccination status of those persons is unknown. May include interactions with people at higher risk of severe illness from COVID-19. Contractors or visitors may visit multiple other work sites or high-risk locations on any one day. Cannot reduce risk by remote working or working from home when there is community spread. Have caretaking responsibilities.	High
Staff – external contractors contact	1 – High 2 – High 3 – High 4 – High 5 – High 6 – High 7 – Medium	Contact with numerous persons – known and unknown (i.e. identifiable) to the worker. The vaccination status of those persons is unknown. Some contacts may be with vulnerable persons. Some staff in these roles may be at higher risk of serious illness from COVID-19. Commonly work in shared workspaces use of shared facilities such as handling, processing or delivery areas; bathrooms, kitchens and access ways. May have co-workers who are at higher risk of severe illness from COVID-19.	High
Farm staff	1 – High 2 – Medium 3 – High 4 – High 5 – Medium 6 – High 7 – Low	Contact mainly with people known to the worker, with little exposure to other workplaces. The farm is the primary place of work. General off-farm to service providers/suppliers. Interactions with other contractors and visitors (i.e. vets). The workplace may require the use of shared facilities such as handling, processing or delivery areas; bathrooms, kitchens and access ways. May have co-workers or contact with persons who are at higher risk of severe illness from COVID-19. The role does not typically undertake work-related travel but could travel between farm sites.	High

Staff - SMG	1 – High 2 – High 3 – High 4 – High 5 – Medium 6 – High 7 – Medium	Contact with many people both known and unknown. National and international travel.	High
Staff - HR	1 – High 2 – High 3 – High 4 – High 5 – High 6 – High 7 – Medium	Contact with many people across the campus. Contact with multiple external parties.	High
Staff no contact single office	1 – High 2 – Medium 3 – Medium 4 – Medium 5 – Medium 6 – High 7 – Low	Contact mainly with people known to the worker, with little exposure to other workplaces. Campus is the primary place of work. General movement on campus to cafes and other service amenities. Workspaces and access to workspaces are typically through shared areas. The workplace requires the use of shared facilities such as bathrooms, kitchens and access ways. May have co-workers or contact with persons who are at higher risk of severe illness from COVID-19. The role does not typically undertake work-related travel. Some staff in these roles may be at higher risk of serious illness from COVID-19.	Med
Staff – liaison recruitment	1 – High 2 – High 3 – High 4 – High 5 – - High 6 – High 7 – Medium	Contact with numerous persons – known and unknown (i.e. identifiable) to the worker. Some contacts may be with vulnerable persons. Commonly work in shared workspaces, use of shared facilities such as bathrooms, kitchens and access ways. May have co-workers who are at higher risk of severe illness from COVID-19. May undertake domestic and/or international travel. Covered by the Vaccination Health Order on the education front.	High

COVID-19 Risk controls for staff

Hazard	Risk	Cons	Likely	Risk Rating	Existing controls	Control effectiveness	Additional controls	Protection Level	Residual risk rating
Staff members become infected with COVID-19 from within the workplace									
Transmission risk	There is a risk that a staff member could spread/transmit COVID-19 to others in the workplace.	4	4	16	<p>Physical distancing.</p> <p>Remote working and access to services (where possible).</p> <p>Use of PPE.</p> <p>Increased cleaning protocols.</p> <p>QR Codes for Contact Tracing.</p> <p>Alternative ways of working (shifts, staggered breaks, alternate on-site teams).</p> <p>Online teaching delivery, where possible depending on the course delivery requirements.</p> <p>Alternative ways of conducting research to minimise contact with others and exposure to high-risk activities or areas.</p> <p>Reduction of numbers of staff and contractors in university facilities to only those necessary to maintain critical infrastructure or services, or continue research deemed critical.</p> <p>Reduction of capacity in teaching and research facilities to support greater physical distancing.</p>	Medium	Vaccination requirement	High (~circa 95% efficacy with two doses, higher with proposed 3)	6
Detection risk	There is a risk that we do not detect a staff member who is infectious with COVID-19 in the workplace	4	4	16	<p>Health advice and education – stay away if sick or have symptoms of COVID-19.</p> <p>QR Codes for Contact Tracing.</p>	Low to Medium	Vaccination requirement for the University	High (~circa 95% efficacy with two doses, higher with proposed 3)	6

Infection risk	There is a risk that a staff member could become infected with COVID-19 while in the workplace.	4	4	16	<p>Physical distancing.</p> <p>Remote working (where possible).</p> <p>Use of PPE.</p> <p>Increased cleaning protocols.</p> <p>QR Codes for Contact Tracing.</p> <p>Alternative ways of working (shifts, staggered breaks, alternate on-site teams).</p> <p>Online teaching delivery.</p> <p>Reduction of capacity in teaching and research facilities to support greater physical distancing.</p> <p>Alternative ways of conducting research to minimise contact with others and exposure to high-risk activities or areas.</p> <p>Reduction of numbers of staff and contractors in university facilities to only those necessary to maintain critical infrastructure or services, or to continue research deemed critical.</p> <p>Health advice/education on good hygiene practices.</p>	Medium	Vaccination requirement for the University	High (~circa 95% efficacy with two doses, higher with proposed 3)	6
Immunisation	Risk of lower immunisation from COVID-19 in the workplace	4	2	8	<p>The government mandate for Health and Disability Sector, Early Childhood / Primary / Secondary Schools.</p> <p>Government Policy for 90% vaccination rates per DHB to support COVID Protection Framework.</p>	Medium to High	Vaccination requirement for the University	High (~circa 95% efficacy with two doses, higher with proposed 3)	6

Risk assessment COVID-19 - students and visitors

Students and visitors are 'other persons' in terms of HSWA 2015. Guidance has been sought from Government sources such as MoE, TEC and WorkSafe on the risk factors to consider when assessing the risk of COVID-19 to students and visitors such as research partners or participants.

While this information was developed with workers in mind, we have adapted and are looking to apply this to students and other visitors. Under the Health and Safety at Work Act (HSWA) 2015 students (and visitors) are deemed to be 'Other Persons'.

1. How many people does the student or visitor come into contact with? (very few = lower risk; many = higher risk)
2. How easy will it be to identify the people with whom the student or visitor comes into contact with? (easy to identify, such as co-workers = lower risk; difficult to identify, such as unknown members of public = higher risk)
3. How close is the student or visitor carrying out the tasks in proximity to other people? (2 metres or more in an outdoor space = lower risk; close physical contact in an indoor environment = higher risk)
4. How long does the teaching/learning/research/other activity require the student to be in that proximity to other people? (brief contact = lower risk; lengthy contact = higher risk)
5. Does the student or visitor activity involve regular interaction with people considered at higher risk of severe illness from COVID-19, such as people with underlying health conditions? (little to none = lower risk; whole time = higher risk)
6. What is the risk of COVID-19 infection and transmission in the campus/teaching/learning/residential accommodation environment when compared to the risk outside this environment? (equal to outside settings = lower risk; higher than outside settings = higher risk)
7. Will the activity continue to involve regular interaction with unknown people if the region is at a higher alert level? (no = lower risk; yes = higher risk).

Role/Work Activity	Risk factors present	Notes	Risk rating
On campus taught students	1 – High 2 – High 3 – High 4 – High 5 – Medium 6 – High 7 – Medium	Large numbers of people in indoor space. Limited ventilation. Open to members of the public. Difficult to identify individuals. Shared public facilities e.g., bathrooms, library, common areas. May include interactions with people at higher risk of severe illness from COVID-19.	High
Students undertaking in-person examinations	1 – High 2 – High 3 – High 4 – High 5 – Medium 6 – High 7 – Medium	A large number of people in an indoor space, limited ventilation, extended periods in close proximity. Shared public facilities e.g. bathrooms, Good contact tracing while in an exam venue. May include interactions with people at	High

		higher risk of severe illness from COVID-19	
LUSA professional staff	1 – High 2 – High 3 – High 4 – High 5 – Medium 6 – High 7 – Medium	A large number of daily visitors including the public who may not be identifiable. Space contiguous to a large social area.	High
Visitors contributing to teaching activities	1 – High 2 – High 3 – High 4 – High 5 – Medium 6 – High 7 – Medium	The frequency of visits reduces the probability of exposure. However potential exposure to many students and staff will likely not be easy to identify.	High
Research students	1 – Medium 2 – High 3 – High 4 – High 5 – Medium 6 – High 7 – Medium	Research students engaged in full-time research projects (e.g. PhD candidates) can be considered in the same way as a research staff member in terms of requirements: Contact with numerous persons – known and unknown (i.e. identifiable) to the student. The vaccination status of those persons is unknown. Some contacts may be with vulnerable persons. Some students in this category may be at higher risk of serious illness from COVID-19. Commonly work in shared workspaces such as laboratories; preparation, storage or handling areas; specialist equipment; bathrooms, kitchens and access ways. Fieldwork; sample collection, handling, processing or storage at third-party locations; and face-to-face interviews likely to increase risk.	High
Students in accommodation	1 – High 2 – High 3 – High 4 – High 5 – Medium 6 – High 7 – High	Large numbers of people in an indoor space, limited ventilation, shared facilities (bathrooms, kitchens, common areas). Extended periods of contact. Somewhat difficult to identify all contacts (e.g. visitors). May include interactions with people at higher risk of	High

		severe illness from COVID-19.	
Visitors	1 – High 2 – High 3 – High 4 – Medium 5 – Medium 6 – High 7 – Medium	Requires interactions with other persons – known and unknown (i.e. identifiable) to the visitor. The vaccination status of these persons is unknown. May include interactions with people at higher risk of severe illness from COVID-19.	High

COVID-19 Risk controls for students and visitors

Hazard	Risk	Cons	Likely	Risk Rating	Existing controls	Control effectiveness	Additional controls	Protection Level	Residual risk rating
Student/s or visitors become infected with COVID-19 from within the workplace									
Transmission risk	There is a risk that a student or visitor could spread/transmit COVID-19 to others in the workplace.	4	4	16	<p>Physical distancing.</p> <p>Remote working and access to services (where possible).</p> <p>Use of PPE.</p> <p>Increased cleaning protocols.</p> <p>QR Codes for Contact Tracing.</p> <p>Alternative ways of working (shifts, staggered breaks, alternate on-site teams).</p> <p>Online teaching delivery, where possible depending on the course delivery requirements.</p> <p>Alternative ways of conducting research to minimise contact with others and exposure to high-risk activities or areas.</p> <p>Reduction of numbers of staff and contractors in university facilities to only those necessary to maintain critical infrastructure or services, or continue research deemed critical.</p> <p>Reduction of capacity in teaching and research facilities to support greater physical distancing.</p>	Medium	Vaccination requirement	High (~circa 95% efficacy with two doses, higher with proposed 3)	6
Detection risk	There is a risk that we do not detect a student or visitor who is infectious with COVID-19 in the workplace	4	4	16	<p>Health advice and education – stay away if sick or have symptoms of COVID-19.</p> <p>QR Codes for Contact Tracing.</p>	Low to Medium	Vaccination requirement for the University	High (~circa 95% efficacy with two doses, higher with proposed 3)	6
Infection risk	There is a risk that a student or visitor could become infected with COVID-19	4	4	16	<p>Physical distancing.</p> <p>Remote working (where possible).</p> <p>Use of PPE.</p>	Medium	Vaccination requirement for the University	High (~circa 95% efficacy with two doses, higher with proposed 3)	6

	while in the workplace.				<p>Increased cleaning protocols.</p> <p>QR Codes for Contact Tracing.</p> <p>Alternative ways of working (shifts, staggered breaks, alternate on-site teams).</p> <p>Online teaching delivery</p> <p>Reduction of capacity in teaching and research facilities to support greater physical distancing.</p> <p>Alternative ways of conducting research to minimise contact with others and exposure to high-risk activities or areas</p> <p>Reduction of numbers of staff and contractors in university facilities to only those necessary to maintain critical infrastructure or services, or to continue research deemed critical</p> <p>Health advice/education on good hygiene practices</p>				
Immunisation	Risk of lower immunisation from COVID-19 on the campus	4	2	8	<p>The government mandate for Health and Disability Sector, Early Childhood / Primary / Secondary Schools.</p> <p>Government Policy for 90% vaccination rates per DHB to support COVID Protection Framework.</p>	Medium to High	Vaccination requirement for the University	High (~circa 95% efficacy with two doses, higher with proposed 3)	6

Risk Assessment COVID-19 - tenants and contractors

Guidance has been sought from Government sources such as MoE and WorkSafe on the risk factors to consider when assessing the risk of COVID-19 to tenants and contractors. Under the Health and Safety at Work Act (HSWA) 2015 tenants and contractors are deemed to be 'Other Persons'.

1. How many people does the tenant or contractor come into contact with? (very few = lower risk; many = higher risk)
2. How easy will it be to identify the people who the tenant or contractor comes into contact with? (easy to identify, such as co-workers = lower risk; difficult to identify, such as unknown members of public = higher risk)
- 3 How close is the tenant or contractor carrying out the tasks in proximity to other people? (2 metres or more in an outdoor space = lower risk; close physical contact in an indoor environment = higher risk)
4. How long does the teaching/learning/research/other activity require the tenant or contractor to be in that proximity to other people? (brief contact = lower risk; lengthy contact = higher risk)
5. Does the tenant or contractor activity involve regular interaction with people considered at higher risk of severe illness from COVID-19, such as people with underlying health conditions? (little to none = lower risk; whole time = higher risk)
6. What is the risk of COVID-19 infection and transmission in the campus/teaching/learning/residential accommodation environment when compared to the risk outside this environment? (equal to outside settings = lower risk; higher than outside settings = higher risk)
7. Will the activity continue to involve regular interaction with unknown people if the region is at a higher alert level? (no = lower risk; yes = higher risk).

Role/Work Activity	Risk factors present	Notes	Risk rating
Tenants present on the Lincoln University campus	1 – High 2 – High 3 – High 4 – High 5 – Medium 6 – High 7 – Medium	Tenants are potentially exposed to high numbers of people who may not be identifiable. Some ability to limit access to own premises but still potential exposure in shared spaces.	High
Contractors working on the university campus	1 – High 2 – High 3 – High 4 – High 5 – Medium 6 – High 7 – Medium	Requires interactions with other persons – known and unknown (i.e. identifiable) to the contractor. May potentially be exposed to large numbers of staff and/or students on campus. The vaccination status contractor is unknown. Work may include interactions with people at higher risk of severe illness from COVID-19. Contractors may visit multiple other worksites (Other PCBUs) in any one day increasing the potential threat of infection on campus.	High

Contractors delivering goods to campus	1 – Medium 2 – High 3 – Low 4 – Low 5 – Medium 6 – Medium 7 – Medium	Contracted goods are delivered to a specific delivery point. Still potential for exposure and unknown vaccination status of the recipient.	Medium
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COVID-19 Risk controls – tenants and contractors

Hazard	Risk	Cons	Likely	Risk Rating	Existing controls	Control effectiveness	Additional controls	Protection Level	Residual risk rating
Tenant/Contractor is infected with COVID-19 from on campus									
Transmission risk	There is a risk that a tenant or contractor could spread/transmit COVID-19 to others in the workplace.	4	4	16	<p>Physical distancing.</p> <p>Remote working and access to services (where possible).</p> <p>Use of PPE.</p> <p>Increased cleaning protocols.</p> <p>QR Codes for Contact Tracing.</p> <p>Alternative ways of working (shifts, staggered breaks, alternate on-site teams).</p> <p>Online teaching delivery, where possible depending on the course delivery requirements.</p> <p>Alternative ways of researching to minimise contact with others and exposure to high-risk activities or areas.</p> <p>Reduction of numbers of staff and contractors in university facilities to only those necessary to maintain critical infrastructure or services, or continue research deemed critical.</p> <p>Reduction of capacity in teaching and research facilities to support greater physical distancing.</p>	Medium	Vaccination requirement for tenants or contractors	High (~circa 95% efficacy with two doses, higher with proposed 3)	6
Detection risk	There is a risk that we do not detect a tenant or contractor who is infectious with COVID-19 in the workplace	4	4	16	<p>Health advice and education – stay away if sick or have symptoms of COVID-19.</p> <p>QR Codes for Contact Tracing.</p>	Low to Medium	Vaccination requirement for tenant or contractor	High (~circa 95% efficacy with two doses, higher with proposed 3)	6

Infection risk	There is a risk that a tenant or contractor could become infected with COVID-19 while in the workplace.	4	4	16	<p>Physical distancing.</p> <p>Remote working (where possible).</p> <p>Use of PPE.</p> <p>Increased cleaning protocols.</p> <p>QR Codes for Contact Tracing.</p> <p>Alternative ways of working (shifts, staggered breaks, alternate on-site teams).</p> <p>Online teaching delivery.</p> <p>Reduction of capacity in teaching and research facilities to support greater physical distancing.</p> <p>Alternative ways of conducting research to minimise contact with others and exposure to high-risk activities or areas.</p> <p>Reduction of numbers of staff and contractors in university facilities to only those necessary to maintain critical infrastructure or services, or to continue research deemed critical.</p> <p>Health advice/education on good hygiene practices.</p>	Medium	Vaccination requirement for the tenants or contractors at the University	High (~circa 95% efficacy with two doses, higher with proposed 3)	6
Immunisation	Risk of lower immunisation from COVID-19 on the campus	4	2	8	<p>The government mandate for Health and Disability Sector, Early Childhood / Primary / Secondary Schools.</p> <p>Government Policy for 90% vaccination rates per DHB to support COVID Protection Framework.</p>	Medium to High	Vaccination requirement for the University	High (~circa 95% efficacy with two doses, higher with proposed 3)	6

