

## EXECUTIVE SUMMARY

Massey is continuing to respond to the evolving public health crisis including implementing Government mandates and best practice advice to ensure a high level of care for our people.

We have worked through a comprehensive risk assessment process that took into consideration both the public health risk of COVID-19 (including the Delta variant) 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 Massey operates means that significant numbers of staff, students, contractors and visitors have frequent interactions within, across and beyond our campus boundaries. Part of Massey's distinctiveness is its deep connections with partners and communities external to the university. Our working, learning and research environments are, for the most part, borderless and flexible, which means that the risk of infection and transmission within this setting and while participating in these activities is very high.

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 and harm.

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 that are vaccinated are far less likely to get very sick and less likely to transmit COVID-19 onto other people. Vaccination is one of the most important risk management tools we have to start to move back to a more normal way of life.

Pursuant to the Health and Safety at Work Act 2015, adopting a vaccination requirement for students, staff, contractors and visitors who access our campuses and sites will ensure the elimination (or 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 can increase uncontrolled transmission of the COVID-19 virus throughout the university community.

**Therefore, 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 and visitors who access our campuses and sites.**

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## Context of the Public Health issue we are responding to

The novel human coronavirus disease 2019 (COVID-19) was first reported in Wuhan, China, in 2019, and subsequently spread globally to become the fifth documented pandemic since the 1918 flu pandemic.

As of 1 November 2021, almost two years after COVID-19 was first identified, there have been more than 246 million confirmed cases and over 4.9 million lives lost to the disease.

The following information on COVID-19, the Delta variant and the COVID-19 vaccine have been sourced from the Ministry of Health<sup>1</sup>.

### COVID-19 Health information and background

COVID-19 is caused by a coronavirus named SARS-CoV-2 that can affect a person's lungs, airways and other organs.

The SARS-CoV-2 virus that causes COVID-19 has undergone genetic mutations over time as it adapts to humans. Some of these mutations, such as the Delta variant, can spread more easily than the original virus, may cause more severe disease, and may evade vaccine-derived immunity.

### COVID-19 symptoms

Common symptoms of COVID-19 are like those found with illnesses such as a cold or influenza and may result in one or more of the following:

- new or worsening cough
- sneezing and runny nose
- fever

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<sup>1</sup> Ministry of Health, <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-health-advice-public/about-covid-19>. 27 October 2020.

- temporary loss of smell or altered sense of taste
- sore throat
- shortness of breath
- Less common symptoms of COVID-19 may include diarrhoea, headache, muscle aches, nausea, vomiting, malaise, chest pain, abdominal pain, joint pain or confusion/irritability. These almost always occur with one or more of the common symptoms.

Symptoms tend to arise around two to five days after a person has been infected but can take up to 14 days to show. The virus can be passed onto others before they know they have it – from up to two days before symptoms develop.

### **How Covid-19 spreads**

The virus that causes COVID-19 is mostly spread in particles that escape from an infected person's mouth or nose when they breathe, speak, cough, sneeze or sing. These particles range in size. Larger and heavier particles (droplets) quickly fall to the ground or other surfaces within seconds or minutes. Smaller particles (aerosols) can remain airborne for minutes to hours.

Infection occurs in three main ways:

- breathing in air that contains infectious particles
- infectious particles landing on your mouth, nose or eyes through being coughed or sneezed on, for example)
- touching your mouth, nose or eyes when your hands have been contaminated by the virus. (This is either through direct contamination, or indirectly by touching surfaces contaminated with the virus).

Current evidence suggests that catching COVID-19 from surfaces is the least common, but it is still important to clean surfaces to reduce the risk.

The length of time the virus can survive on surfaces depends on many factors including temperature, humidity and UV or sunlight.

### **Conditions that affect COVID-19 spread**

A person is most infectious and more likely to spread the virus in the few days around the time that symptoms develop. This means that some individuals can be contagious before they develop symptoms.

The risk of becoming infected increases the closer you are to a person and the longer you are close to that person, especially if this contact occurs in poorly ventilated indoor spaces.

Most large droplets will fall to the ground within 2 metres. However, in some situations the virus has been transmitted to people more than 2 metres away, or to people who passed through a space soon after the infectious person left.

Things that increase the risk of this 'long-range' infection include:

- being in enclosed spaces with poor ventilation within which fine particles containing virus can build-up
- being near an infected person breathing heavily (for example, due to exercise, singing or shouting)
- being exposed to these conditions for a longer period of time.

The 'Three Cs' are situations where spread of the virus is most likely. These are:

- closed spaces with poor ventilation
- crowded places with many people nearby

- close-contact settings, especially where people have close-range conversations, singing or shouting.

The risk is highest when these factors overlap: for example, in small, poorly ventilated spaces with lots of people talking loudly or shouting. The risk is lower outside, with fewer people, if they are widely spread.

### **About the Delta variant**

All viruses, including SARS-CoV-2, the virus that causes COVID-19, change over time. Most changes have little to no impact on the virus' properties. However, some changes may affect the virus's properties, such as how easily it spreads, the associated disease severity, or the performance of vaccines, therapeutic medicines, diagnostic tools, or other public health and social measures.

The Delta variant has spread rapidly worldwide and is now the main variant in most countries. It is the most transmissible variant, spreading a lot more easily than the original version of the COVID-19 virus and other variants.

### **How Delta is different from earlier variants**

Science is telling us the Delta variant has a number of differences compared to earlier variants of the virus. These differences mean that the Delta variant may be a greater threat to the health of individuals who contract the infection and a greater challenge to contain the spread of the virus in an outbreak. For example:

- Delta may cause people to develop more serious COVID-19 illness than other variants of the virus
- people with a Delta infection may be at higher risk of needing hospital care
- the chance of infecting others such as within your household or other contacts is very high because Delta is so transmissible. It is estimated that on average, without vaccination, one person infected with Delta may infect 5 or 6 other people. This is how Delta outbreaks in places overseas have grown so rapidly
- 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 that have developed thus far
- the time from exposure to the virus until the first positive test is shorter for the Delta variant. On average, a person may be infectious for 1–2 days before they develop symptoms and some people who are infected never develop symptoms (asymptomatic). Asymptomatic people may still be infectious, early on in their infection.

### **Vaccine effectiveness and protection**

COVID-19 vaccines are the most well-studied vaccines ever made. Nearly 50% of the world's population have had a COVID-19 vaccine, and more than 3 million people in Aotearoa have had their first Pfizer vaccine.<sup>2</sup>

As with any vaccine, the Pfizer vaccine (Comirnaty) may not fully protect everyone who gets it. However, where a person does become infected with COVID-19, they are far less likely to fall seriously ill and less likely to transmit the virus to others if they have had both doses of the Pfizer vaccine (Comirnaty).

Clinical trials found that the Pfizer vaccine gave 95% protection against the symptoms of COVID-19.

The COVID-19 vaccine stimulates a person's immune system to produce antibodies and other proteins that will fight the virus if they are exposed to it. This reduces the risk of getting infected, and if infection does occur means the person could have no symptoms or will have much fewer, milder symptoms and recover faster.

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<sup>2</sup> New Zealand Government. <https://covid19.govt.nz/covid-19-vaccines/get-the-facts-about-covid-19-vaccination/covid-19-vaccination-your-questions-answered/> 6 November 2021.

## MASSEY UNIVERSITY OPERATING CONTEXT

Each Massey University campus sits upon land that comes under the Kaitiakitanga, or custodianship of the following iwi:

- Auckland – Ngāti Whātua ki Kaipara
- Manawatū – Rangitāne o Manawatū
- Wellington – Ngāti Whātua

Our COVID-19 response will be discussed and clearly communicated with each iwi to ensure recognition of and alignment with Mana Whenua responses.

### Work and study environment

Massey has in excess of 30,000 students (headcount), and over 3,200 full-time equivalent (FTE) staff.

6285 staff (including contracted staff) are spread across the campus locations as follows (Headcount):

- Auckland 1520
- Manawatū 3816
- Wellington 949

Our student profile is also unique. As a result of our distance offering, we have students based across the country (and the world). Those studying internally are split across our campuses as follows (headcount):

- Auckland 4,900
- Manawatū 4,600
- Wellington 2,800

16,000 students (of which 1,400 are offshore permanently) study with Massey by distance, and we deliver in-person teaching to 700 students internationally (offshore). Although these students are registered as distance, many of them also access our campuses when they are physically able, especially those studying by block delivery.

3,558 students studying at Massey are Māori, and 2583 of those are studying by distance.

Massey has a considerable real estate portfolio, comprising over 500 buildings. The buildings range in age and condition with most of the stock being 30-70 years old. In addition to the on-campus environment, staff and students also operate from satellite locations including the Aviation School, based at the airport in Palmerston North, and from leased spaces within broader Auckland (Corinthian Drive, Albany Village) Wellington and Nelson.

Massey has staff working from the following locations outside main campus sites:

- Symonds Street, Auckland
- Albany Village, Auckland
- East Precinct, Auckland
- Oteha Rohe Precinct, Auckland
- Corinthian Drive, Auckland
- Hokowhitu, Manawatū
- Palmerston North Airport, Manawatū
- EIT, Napier

- Canterbury University, Christchurch
- Office, Nelson
- AgResearch, Hamilton

Massey operates student residential accommodation at each of the following locations:

- Wellington student accommodation across the Mt Cook and Te Aro suburbs, providing accommodation for up to 680 resident students with 33 residential accommodation staff.
- Manawatū student accommodation is based on or near the Turitea Campus, providing accommodation for up to 1020 residents with 30 residential accommodation staff.
- Auckland student accommodation is based on the East Precinct, providing accommodation for up to 292 residents with 7 residential accommodation staff.

Each campus has a number of amenities that cater to the university community and are also open to the public, including gyms, cafes, prayer spaces, libraries and spaces designed for social and recreational use. Many of our spaces are utilised by members of the public, including lecture theatres and workshops and sporting facilities. We also host a number of major events throughout the year such as award ceremonies, graduation events and celebrations, in addition to regular and frequent hosting of visitors, guests, alumni and schools.

Massey offers a diverse range of programmes and courses. Many of our programmes are delivered in a blended mode, utilising a combination of in-person and online teaching and learning activities. Massey is also characterised by its practical and applied nature of programmes many of which include options for work integrated learning.

For those students undertaking work-integrated learning (WIL) placements (e.g. internships, practicum, field education) as part of their degree courses, there may be a current or future requirement from the workplace organisation that they be fully vaccinated. In some disciplines, this mandate may mean that the WIL experience and course cannot be completed without the student being fully vaccinated.

Our research spans discovery, commercialisation, scholarship and the production of creative works and is inclusive of both professional and clinical practice. This depth and breadth mean that Massey researchers are frequently partnering with industry, communities (including vulnerable and at-risk communities and research participants), and with organisations in a variety of modes and settings.

### **Massey's response to date to the pandemic**

From the outset of the emergence of the COVID-19 pandemic in early 2020, Massey has been guided by the public health advice provided by the Government in terms of what restrictions have been necessary to manage and suppress the virus.

In the past almost two years, there have been extraordinary measures introduced to protect public health, the health system and the most vulnerable in our society. These were challenging to implement initially, given the fast-moving nature of the situation and complexities in applying Government restrictions to the operations of the university.

In managing this situation, the university took a principles-based approach to decision making that put the wellbeing of its people at the forefront of its considerations.

Central to this approach is the overarching commitment and responsibilities that Massey University upholds in honouring Te Tiriti o Waitangi. Our response aims to prioritise Māori health needs by ensuring that Māori health inequities are accounted for in our provision of COVID-19 safety for Māori students and staff.

We endeavour to align our information, advice and guidance for Māori students and staff with that of the Ministry of Health, Ministry of Education, Te Rōpu Whakakaupapa Mate Urutā (National Māori Pandemic Advisory Group), Māori, as well as Iwi and Māori Organisations leading the COVID-19 response for Māori.

The Office of the Deputy Vice-Chancellor Māori continues to seek daily updated advice specific to COVID-19 safety for Māori – this includes at iwi, regional and community levels. Additional to the latest Government advice and guidance, current legislative frameworks and HSWA guidelines, we will endeavour to ensure that COVID-19 safety for Māori is prioritised and consistent with current Māori health advice and guidance.

As time has gone on and Alert Levels have continued to fluctuate, anecdotal feedback from those on campus during Alert Levels 2 and 3 indicate that compliance with existing COVID-19 mitigations is waning. It is extremely difficult for staff to enforce mask wearing and ensure that physical distance is maintained by persons on campus generally, within workspaces and within teaching and learning spaces. This will only become more difficult to manage and maintain as the numbers on campus increase. It is expected that with the further passage of time, complacency will creep in, and the effectiveness of these existing control measures will reduce.

## LATEST GOVERNMENT ADVICE AND GUIDANCE

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

On 11 October 2021, the Government announced workers in the health and disability sector workers and school and early learning staff and support people who have contact with children and students would be included in the COVID-19 Public Health Response (Vaccinations) Order (3) 2021 requiring mandatory COVID-19 vaccinations, by 1 December and 1 January 2022 respectively.

This requirement affects both Massey students enrolled or planning to enrol in courses which require placements at these workplaces as part of the programme or course, and staff who may provide services or support to workplaces within these categories.

### **COVID-19 Protection Framework**

On 22 October, the Government announced the COVID-19 Protection Framework as the next stage of the COVID-19 response plan to provide a pathway out of lockdown and give vaccinated New Zealanders more freedom.

The COVID-19 Protection Framework introduces the vaccination certificate, which will be optional for many locations. There will be some higher-risk settings where they will be a requirement in order to open to the public.

The Framework confirms that vaccine certificates will be required for on campus delivery at Red level, so persons required to attend tertiary facilities at this setting will need to be vaccinated.

Massey continues to await further details which will inform how the new Framework can be operationalised. Various Ministries have acknowledged the complexity of the tertiary environment. Additional advice and guidance will come eventually but institutions are also expected to consult and plan for their futures.

## OVERVIEW OF LEGISLATIVE FRAMEWORK

The following legislative obligations guide and inform Massey's approach to managing the occupational health issues that arise out of workplace exposures to COVID-19:

## Health and Safety at Work Act 2015

- There are three duty holders under HSWA:
  - i. Officers who have a due diligence duty of care and ought to reasonable know how the Person Conducting a Business or Undertaking (PCBU, and those PCBU they share a duty of care with) meets its occupational health and safety obligations
  - ii. PCBU have a duty of care to take all reasonably practicable steps to eliminate (or minimise) harm to workers and other persons at workplaces)
  - iii. Workers (and Other Persons at workplaces) have of duty of care to take all reasonable care to comply as far as they are reasonably able, with Massey's reasonable occupational health and safety instructions that are given so that Massey can comply with the HSWA and regulations
- A PCBU's primary duty is to ensure so far as is reasonably practicable the occupational health and safety of its workers whose activities in carrying out work are influenced or directed by the PCBU while carrying out the work.
- 'Worker' includes employee, contractors, sub-contractors, outworkers, apprentices, volunteers and other persons
- PCBUs have a duty to consult, co-ordinate and co-operate with other PCBU they share a duty related to the same matter under the HSWA with
- PCBUs who share a duty in the same matter must decide who has influence and control over the occupational health and safety matter
- PCBU have a duty to engage and involve workers in workplace occupational health and safety
- Duties to other persons at workplaces include:
  - i. Workplace visitors: people who tour the university, people who visit the university or attend meetings, people attending university or organised gathering, library users, or people seeking information or paying accounts
  - ii. People who pay the university to do something on campus or related site, such as hire facilities or hold public events
  - iii. Casual volunteers
  - iv. Any member of the public who could come into contact with a university activity.

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

The Code exists to support education objectives for domestic and international learners, recognising that the community expects providers to support wellbeing, and providers need 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.

- 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 which 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.

## OUR APPROACH TO VIEWING COVID-19 AS AN OCCUPATIONAL HEALTH ISSUE

Applying an occupational health lens to COVID-19 means Massey will consider the five elements, including prioritisation of our Te Tiriti o Waitangi responsibilities. All five elements are interrelated and often present as a significant control if applied to the maximum degree:

- Immunisation
- Early detection of Covid-19
- Reducing the likelihood of transmission
- Minimising the impact of wide-spread infection.
- Prioritising Māori Health imperatives

### Immunisation

Immunisation is both a risk and a control. Low immunization levels equal high risk. High immunisation levels equal low risk. Immunisation is a key risk management intervention in the detection, transmission and infection of COVID-19.

### 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.

### Transmission

Controlling the risk of transmission requires significantly reducing the ability of the pathogen to pass from one person to another. There are several risk controls 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 not clear public health mandates of pragmatically sufficient occupational health controls.

### Infection

In the case of someone who is infected the person must be removed from the workplace and public health requirements followed.

How the university then manages the consequential risk must be worked through including business continuity, detection of other exposures and adherence to public health requirements. The extent to which the university can take bespoke measures needs to be fully explored and aligned to government requirement requirements as they may become known.

## COVID-19 AND STAFF

### (WORKERS IN TERMS OF HSWA 2015)

Guidance has been sought from Government sources such as WorkSafe and MBIE 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 Massey 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)**

This varies somewhat between role groups. Staff who deliver lectures and tutorials to students, or who work with staff, students and participants in laboratories, clinical settings, or other research-intensive face-to-face settings are considered as high risk. Professional Services staff who may have less direct contact with large numbers of people would seem lower – however, although these staff may not be in direct contact with large cohorts of students, they will likely be in direct and frequent contact with staff who are.

In all cases, because the risk is not of Massey's making but is a health risk applicable to the entire population, all workers are exposed at times when they are away from work and in places and locations not within the university context (supermarkets, pharmacies, shopping malls, schools etc). In addition:

- A proportion of staff work with vulnerable groups
- A proportion of staff will be considered vulnerable and at higher risk of serious illness
- A proportion of our staff are contractors who work in other workplaces
- A proportion of our staff offer services to the public
- The campus environments are highly porous and largely open access.

There is no feasible or desirable way to restrict cohorts of staff or students from interacting with each other or others on campus or in other Massey workplace settings.

**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)**

As above, the degree of interactions across and between different groups of staff and students or members of the public, contractors, volunteers at any Massey workplace is considered high. Identification of contacts for an individual or groups of individuals (i.e. those that accessed a particular building) in any given day would be extremely difficult. This is considered high risk, even without consideration of the exposure staff have to COVID-19 outside of the workplace which could lead to transmission and infection within the workplace.

**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)**

The majority of our staff work in enclosed offices or activity-based (open plan) workspaces, labs or room-based teaching environments. A very small proportion of staff work outdoors for significant amounts of time, but in these cases would be indoors at times and in contact with other workers who work in an internal setting. Another small proportion of staff would work in single occupancy office space, but access shared workspaces or equipment, bathrooms, kitchens and access ways in addition to any amenities on-campus such as libraries and cafes.

**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)**

It would be typical that staff work in this setting for the majority of their working day/week.

**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)**

Advice from the Ministry of Health is that people with underlying health conditions are most at risk of COVID-19 becoming a severe illness. Staff are more vulnerable if they:

- are over 70 years old with a medical condition
- have a medical condition and/or compromised immunity
- are pregnant, or
- have other risk factors include ethnicity, smoking and obesity.

The university has not had a need to collect this information from staff or students, but it is likely that a proportion of the workforce will at any time be considered at risk of becoming severely ill due to meeting one or more of these vulnerability factors. Staff could also transmit the disease to other vulnerable persons – such as students, research partners or participants.

**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)**

The Massey University operating context outlined above provides an overview of the working environment (including that the environment involves individuals in close proximity indoors, for extended periods of time, and with large volumes of changing individuals). In light of this, we consider there is a higher risk of COVID-19 infection and transmission in the workplace than outside.

**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).**

The nature of the university's operations means even at higher alert levels there are a significant number of staff and contractors that need to access any of our campuses or sites. Essential activities include (but are not limited to):

- student accommodation services
- health and counselling services
- psychology clinics
- services and functions that are in themselves essential services or are critical to ensuring workers can work remotely, such as:
  - o Campus Security
  - o Facilities Management (critical utilities maintenance, urgent grounds maintenance)
  - o Waste management (third party contract)
  - o Cleaning services (third party contract)
  - o Payroll Services
  - o ITS
- services and activities related to animal welfare such as the Veterinary Teaching Hospital (includes companion animal clinic, farm services, equine services, and Wildbase hospital), equestrian centre, small and large animal welfare
- services and activities related to primary industries
- critical utilities maintenance and repair.

## RISK ASSESSMENT BY ROLE/WORK ACTIVITY USING WORKSAFE RISK FACTORS

Role/Work Activity	Risk factors present	Notes	Risk rating
Library staff	1 – High 2 – High 3 - High 4 – High 5 - Moderate 6- High 7 - High	Large numbers of people in 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
Staff in academic roles with face-to-face teaching or research responsibilities	1 – High 2 – High 3 - High 4 – High 5 - Moderate 6- High 7 - High	Requires interactions with cohorts of students or research teams, partners or participants. Difficult to maintain physical distancing at all times. Mask wearing 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. Some staff in these roles may be at higher risk of serious illness from COVID-19.	High
Staff in clinical settings providing mental or physical health and disability services.	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.	High
Staff with public facing roles (hospitality, service provision such as gyms, cafes, Massey contact)	1 – High 2 – High 3 - High 4 – High 5 - High 6- High 7 - Low	Role interfaces with larger numbers of people, known and unknown. Some services 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
Professional Services staff – role primarily on campus, may require interactions with external persons, stakeholders or the public.	1 -High 2 - Moderate 3 - High 4 - High 5 - Moderate 6 - High 7 - Moderate	Contact generally with people known to the worker, although some contact with external persons, groups or other workplaces. Campus is 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. Workplace requires 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. Roles could involve domestic/international travel. Some staff in these roles may be at higher risk of serious illness from COVID-19.	High
Professional Services staff – role does not require interactions with external parties or large groups	1 – High 2 – Moderate 3 - High 4 – High 5 - Moderate 6 - High 7 - Low	Contact mainly with people known to the worker, with little exposure to other workplaces. Campus is primary place of work. General movement on campus to cafes and other service amenities. Workspaces and access to workspaces is typically through shared areas. Workplace requires 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. Role does not typically undertake work related travel. Some staff in these roles may be at higher risk of serious illness from COVID-19.	High

Research staff – access to research facilities or fieldwork is not required	1 – High 2 – Moderate 3 - High 4 – High 5 - Moderate 6 - High 7 - Low	Contact mainly with people known to the worker, with little exposure to workspaces such as labs, workshops. No requirement to visit other workplaces. Campus is primary place of work. General movement on campus. May work in shared workspace areas. 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. Role does not typically undertake work related travel. Some staff in these roles may be at higher risk of serious illness from COVID-19.	High
Research staff – access to research facilities or fieldwork is required	1– High 2 – High 3 - High 4 – High 5 - High 6- High 7 - Moderate	Contact with numerous persons – known and unknown (i.e. identifiable) to the worker. Vaccination status of those persons is unknown. Some contact 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
Research staff – where the research involves face-to-face engagement	1– High 2 – High 3 - High 4 – High 5 - High 6- High 7 - Moderate	Contact with numerous persons – known and unknown (i.e. identifiable) to the worker. Vaccination status of those persons is unknown. Some contact 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
Professional staff providing support services to students or other staff	1 – High 2 - High 3 – High 4 - High 5- High 6 –High 7-Moderate	Contact with numerous persons – known and unknown (i.e. identifiable) to the worker. Vaccination status of those persons is unknown. Some contact may be with vulnerable persons. Some staff in these roles may be at higher risk of serious illness from COVI-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. May undertake domestic and/or international travel.	High
Residential 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. 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 in any one day. Cannot reduce risk by remote working or working from home when there is community spread. Have caretaking responsibilities.	High
Staff with roles that require interactions with contractors, volunteers or other PCBUs/Workplaces.	1 – High 2 - High 3 – High 4 - High 5- High 6 –High 7-Moderate	Contact with numerous persons – known and unknown (i.e. identifiable) to the worker. Vaccination status of those persons is unknown. Some contact 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. May undertake domestic and/or international travel.	High
Farm staff	1 – High 2 – Moderate 3 - High	Contact mainly with people known to the worker, with little exposure to other workplaces. Farm is primary place of work. General off-farm to service providers/suppliers. Interactions with other contractors and visitors (i.e. vets). Workplace may require use of shared facilities such as	

	<p>4 – High</p> <p>5 - Moderate</p> <p>6- High</p> <p>7 - Low</p>	<p>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. Role does not typically undertake work related travel but could travel between farm sites. Some staff in these roles may be at higher risk of serious illness from COVID-19.</p>	
<p>Staff that have little to no face-to-face interaction with others and work in a single occupancy office.</p>	<p>1 – High</p> <p>2 – Moderate</p> <p>3 - High</p> <p>4 – High</p> <p>5 - Moderate</p> <p>6- High</p> <p>7 - Low</p>	<p>Contact mainly with people known to the worker, with little exposure to other workplaces. Campus is primary place of work. General movement on campus to cafes and other service amenities. Workspaces and access to workspaces is typically through shared areas. Workplace requires 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. Role does not typically undertake work related travel. Some staff in these roles may be at higher risk of serious illness from COVID-19.</p>	<p>High</p>
<p>Staff that go into schools, have contact with children or students when carrying out work or services for schools (incl volunteer or unpaid)</p>	<p>1 – High</p> <p>2 – High</p> <p>3 - High</p> <p>4 – High</p> <p>5 - High</p> <p>6- High</p> <p>7 - High</p>	<p>Contact with numerous persons – known and unknown (i.e. identifiable) to the worker. Some contact 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 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.</p>	<p>High</p>

## COVID-19 RISK CONTROLS FOR STAFF

Safe Place = Safe Person : Safe Person does not necessarily mean Safe Place

Hazard	Risk	Consequence	Likelihood	Risk Rating	Existing Controls	Control Effectiveness	Additional Controls	Protection Level	Residual risk rating
<b>Staff member(s) become infected with COVID-19 from within the workplace.</b>									
Transmission risk	There is a risk that a staff member could spread/transmit COVID-19 to others in the Massey workplace.	Major	Likely		Physical distancing Remote working and access to services (where possible) Use of PPE Increased cleaning protocols QR Codes for Contact Tracing Alternative ways of working (shifts, staggered breaks, alternate on-site teams) Online teaching delivery, where possible depending on the course delivery requirements (i.e., some experiential 'hands on' learning is prohibited in fully online mode) when there is community transmission Alternative ways of conducting research to minimise contact with others and exposure to high risk activities or areas 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 Reduction of capacity in teaching and research facilities to support greater physical distancing. Reduction of numbers on campus	Moderate	Vaccination requirement	Isolate (Safe Place)	Risk of infection significantly reduced
							Contractor/visitor COVID-19 screening questionnaire as part of sign in process.	Administrative (Safe Person)	Low effectiveness as persons may not be symptomatic
							Daily campus pre-start requirement to declare report of any COVID-19 symptoms	Administrative (Safe Person)	Low effectiveness as persons may not be symptomatic

Detection risk	There is a risk that we do not detect a staff member who is infectious with COVID-19 in the workplace	Major	Likely		Health advice and education – stay away if sick or have symptoms of COVID-19 QR Codes for Contact Tracing	Low	Campus based COVID-19 Testing	Engineering (Safe Place)	Risk of failure to detect may be reduced but not to acceptable level
							Daily campus pre-start requirement to declare report of any COVID-19 symptoms	Administrative (Safe Person)	Risk of failure to detect may be reduced marginally but not to acceptable level
							Strictly enforced check in and monitoring use of QR codes linking persons to campus buildings	Administrative (Safe Person)	Risk of failing to detect infection may be reduced but not to acceptable level
Infection risk	There is a risk that a staff member could become infected with COVID-19 while in the workplace.	Major	Likely		Physical distancing Remote working (where possible) Use of PPE Increased cleaning protocols QR Codes for Contact Tracing Alternative ways of working (shifts, staggered breaks, alternate on-site teams) Online teaching delivery when there is community transmission Reduction of capacity in teaching and research facilities to support greater physical distancing. Alternative ways of conducting research to minimise contact with others and exposure to high risk activities or areas Reduction of numbers of staff and contactors in university facilities to only those necessary to maintain critical infrastructure or services, or to continue research deemed critical Health advice/education on good hygiene practices	Moderate	Vaccination requirement	Isolate – (Safe Place)	Risk of infection significantly reduced
							COVID-19 screening questionnaire for all persons on campus/Massey sites	Administrative (Safe Person)	Low effectiveness as persons may not be symptomatic or compliant
							Daily campus pre-start requirement to declare report of any COVID-19 symptoms	Administrative (Safe Person)	Low effectiveness as persons may not be symptomatic or compliant.

Immunisation	Risk of low or no immunisation from COVID-19 in the workplace	Major	Likely		Government mandate for Health and Disability Sector, Early Childhood / Primary / Secondary Schools. Government Policy for 90% vaccination rates per DHB to support COVID Protection Framework	Moderate to High	Vaccination requirement	Isolate – (Safe Place)	The risk is not eliminated but is it as low as is reasonably practicable
							Further government Public Health Orders mandating Vaccination at TEOs	Isolate – (Safe Place)	The risk is not eliminated but is it as low as is reasonably practicable

## COVID-19 AND STUDENTS AND VISITORS

(NB: STUDENTS AND VISITORS ARE “OTHER PERSONS” IN TERMS OF HSWA 2015)

Guidance has been sought from Government sources such as MoE, TEC, WorkSafe and MBIE on the risk factors to consider when assessing the risk of COVID-19 to students and other visitors such as research partners or participants. This some of this information was developed with workers in mind but 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’.

‘Other Persons’ under the HSWA are required to:

1. To take reasonable care for their own health and safety,
2. To take reasonable care that others are not harmed and by something they do, or do not do,
3. Comply, as far as they are reasonably able, with Massey’s reasonable health and safety instructions that are given so that Massey can comply with the HSWA and regulations

It is important to note that Massey must ensure, so far as is reasonably practicable, as its primary duty of care, that health and safety of workers, and that ‘Other Persons’ are not put at risk by its work.

The following assessment has been made across the cohort of Massey students and visitors, in light of the university’s operating context.

- 1. How many people does the student or visitor come into contact with? (very few = lower risk; many = higher risk)**

This varies somewhat between course and programmes and study modes. Students who are enrolled and studying practical in-person programmes such as veterinary science, education, health or sports related disciplines would be considered as high risk. Some programmes and courses where completed by distance in whole or in part are lower risk – however, these students although not regularly in direct contact with large cohorts of students, may have in-person learning such as contact or block teaching on campus and work placements. Visitors who are regularly on site or who are considered part of a research team for a block of time, are also considered higher risk.

In all cases, because the risk is not of Massey’s making but is a health risk applicable to the entire population, all students and visitors are exposed at times when they are away from the university environment in places and locations not within the university context (supermarkets, pharmacies, shopping malls, schools etc). In addition:

- A proportion of students or visitors will work with vulnerable groups and other workplaces on our request
- A proportion of students or visitors will be considered vulnerable and at higher risk of serious illness
- A proportion of our students (and sometimes visitors) live in residential accommodation
- The campus environments are highly porous and largely open access
- There is no feasible or desirable way to restrict cohorts of staff, students or visitors from interacting.

- 2. How easy will it be to identify the people who 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)**

As above, the degree of interactions across and between different groups of staff and students or members of the public, contractors, volunteers at any Massey workplace is considered high. Identification of contacts for an individual or groups of individuals (i.e. those that accessed a particular teaching space) in any given day would be extremely difficult. This is considered high risk, even without consideration of the exposure

students have to COVID-19 outside of the campus environment/learning space which could lead to transmission within the campus.

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)**

When on campus place students are in close physical contact in indoor environments for extended periods of time (2hrs+). In student accommodation students live in pods of rooms, often with shared facilities such as bathrooms, kitchens and recreational areas. Campus support services in-person activities often include indoor workshops or seminars. While the chances of prolonged close physical contact for visitors is likely to be less common, this may not be the case for frequent visitors or those based with us for block periods of time.

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)**

Teaching activity can occur in 1 to 4 hour blocks. Lectures are typically up to 2 hours, labs, workshops or studios can run for longer periods. Students or staff undertaking a range of other activities, such as research, computer use, studying etc, may have longer periods of contact with other people such as research participants or with common resources such as equipment, materials, samples, or studios.

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)**

Advice from the Ministry of Health is that people with underlying health conditions are most at risk of COVID-19 becoming a severe illness. Those that are more vulnerable if they:

- are over 70 years old with a medical condition
- have a medical condition and/or compromised immunity.
- are pregnant, or
- have other risk factors include ethnicity, smoking and obesity.

The university has not had a need to collect this information from students or visitors, but it is likely that a proportion of this community (staff, students, guests, contractors) will at any time be considered high 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)**

The need for tertiary environments to be restricted as part of the Government COVID-19 Protection Framework helps to highlight the elevated risk from the campus environment or owned or occupied facilities off-site when compared to others. A range of factors, including the diversity of activity and porous nature of the environment is like that of a hospitality setting e.g. close proximity, indoors, extended period of time and large volume of changing individuals.

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).**

Yes. This includes visitors to campus, prospective students, surrounding communities, non-Massey friends or colleagues.

## RISK ASSESSMENT BY ACTIVITY / STUDENT OR VISITOR COHORT USING WORKSAFE RISK FACTORS

Role/Work Activity	Risk factors present	Notes	Risk rating
On-campus taught students or visitors who participate in lectures	1 – High 2 – High 3 - High 4 – High 5 - Moderate 6- High 7 - High	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
On-campus students or visitors who participate in workshops, studio and labs.	1 – High 2 – High 3 - High 4 – High 5 - Moderate 6- High 7 - Moderate	Large number of people in indoor space, limited ventilation, extended periods of time in close proximity. Shared public facilities e.g. bathrooms, library, common areas. Shared equipment, Good contact tracing while in shared teaching or research venues. May include interactions with people at higher risk of severe illness from COVID-19.	High
Students sitting an examination or test on campus or at a Massey Exam Venue or visitors participating in the assessment process	1 – High 2 – High 3 - High 4 – High 5 - Moderate 6- High 7– Moderate	Large number of people in an indoor space, limited ventilation, extended periods of time in close proximity. Shared public facilities e.g. bathrooms, Good contact tracing while in exam venue. May include interactions with people at higher risk of severe illness from COVID-19	High
Distance or offshore only student (no on campus activity)	1 – Low 2 – Low 3 - Low 4 – Low 5 - Low 6- Low 7 -Low	Distance students design their own learning environment therefore risk of Massey's operating context low.	Low
Distance student or visitor who comes onto campus to participate in contact course or to access campus delivered services.	1 – High 2 – High 3 - High 4 – High 5 - Moderate 6- High 7 - Moderate	Frequency of exposure to risk reduced through being on campus less often than an on-campus student. Attendance at campus by a distance student for learning (contact course) or support (workshops, library use, computer lab use) creates a similar risk to those who are taught on campus. May include interactions with people at higher risk of severe illness from COVID-19	High
Guest visitor who comes onto campus to participate in the delivery of courses	1 – High 2 – High 3 - High 4 – High 5 - Moderate 6- High 7 - Moderate	Frequency of exposure to risk reduced through being on campus less often than an on-campus student. Attendance at campus by a distance student for learning (contact course) or support (workshops, library use, computer lab use) creates a similar risk to those who are taught on campus. May include interactions with people at higher risk of severe illness from COVID-19	High
Research student (full research, i.e. 100% thesis)	1 – Moderate 2 – High 3 - High 4 – High 5 - Moderate 6- High 7 - Moderate	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. Vaccination status of those persons is unknown. Some contact 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 use of shared facilities such as	High

		laboratories; preparation, storage or handling areas; specialist equipment; studios or performance areas; 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.	
Research student (mix of research and coursework)	1 – Moderate 2 – High 3 - High 4 – High 5 - Moderate 6- High 7 - Moderate	For research students at master’s level and below, where a mixture of research and coursework is expected, where attending lectures increases the volume of people interacted. Any on-campus presence likely to mean accessing shared laboratories; preparation, storage or handling areas; specialist equipment; studios or performance areas; and accessing entry/access routes and shared facilities such as bathrooms, kitchens. Frequency of exposure to risk may be reduced through being on campus less often than an on-campus taught student. Close and extended periods of indoor activity increases risks. May include interactions with people at higher risk of severe illness from COVID-19.	High
Student in residential accommodation	1 – High 2 – High 3 - High 4 – High 5 - Moderate 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 (eg visitors). May include interactions with people at higher risk of severe illness from COVID-19.	High
Students with roles that require interactions with contractors or volunteers	1 – High 2 – High 3 - High 4 – High 5 - Moderate 6- High 7 - High	Requires interactions with other persons – known and unknown (i.e. identifiable) to the student. Vaccination status of those persons is unknown. May include interactions with people at higher risk of severe illness from COVID-19. Contractors or volunteers may visit multiple other work sites (Other PCBUs) in any one day.	High
Students in Education or Health related disciplines	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.	High
Students enrolled in courses with compulsory work placements	1 – High 2 – High 3 - High 4 – High 5 - Moderate 6- High 7 - High	Requires interactions with other persons – known and unknown (i.e. identifiable) to the student. Vaccination status of those persons is unknown. Cannot influence vaccination requirements of providers/host organisations. May include interactions with people at higher risk of severe illness from COVID-19.	High
Student athletes (HPA programme)	1 – High 2 – High 3 - High 4 – High 5 - Moderate 6- High 7 - High	Requires interactions with other persons – known and unknown (i.e. identifiable) to the student. Vaccination status of those persons is unknown.	High

Student representatives	1 – High 2 – High 3 - High 4 – High 5 - Moderate 6- High 7 - High	Requires interactions with other persons – known and unknown (i.e. identifiable) to the student. Vaccination status of those persons is unknown. May include interactions with people at higher risk of severe illness from COVID-19.	High
Visitors on campus or Massey sites not included in any of the above	1 – High 2 – High 3 – High 4 – Moderate 5 - Moderate 6- High 7 - Low	Requires interactions with other persons – known and unknown (i.e. identifiable) to the visitor. 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

Safe Place = Safe Person: Safe Person does not necessarily mean Safe Place

Hazard	Risk	Consequence	Likelihood	Risk Rating	Existing Controls	Control Effectiveness	Additional Controls	Protection Level	Residual risk rating
<b>Student(s) become infected with COVID-19 from within Massey campus/sites.</b>									
Transmission risk	There is a risk that a student or visitor could spread/transmit COVID-19 to others in the Massey workplace.	Major	Likely		Physical distancing of 1m when in-person Remote learning Use of PPE Increased cleaning protocols QR Codes for Contact Tracing Alternative ways of teaching and learning and conducting research Online delivery/activity when there is community transmission Reduction of capacity in teaching and research facilities to support greater physical distancing. Alternative ways of conducting research to minimise contact with others and exposure to high risk activities or areas 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	Moderate	Vaccination requirement	Isolate (Safe Place)	Risk of infection significantly reduced
							Regular COVID-19 screening questionnaire	Administrate (Safe Person)	Low effectiveness as persons may not be symptomatic
							Daily campus pre-start requirement to declare report of any COVID-19 symptoms	Administrate (Safe Person)	Low effectiveness as persons may not be symptomatic
Detection risk	There is a risk that we do not detect a student or visitor who is infectious	Major	Likely		Health advice and education – stay away if sick or have symptoms of COVID-19	Low	Campus based COVID-19 Testing	Engineering (Safe Place)	Risk of failure to detect may be reduced but not to acceptable level

	with COVID-19 in the workplace				QR Codes for Contact Tracing		Daily campus pre-start requirement to declare report of any COVID-19 symptoms	Administrative (Safe Person)	Risk of failure to detect may be reduced marginally but not to acceptable level
							Strictly enforced check in and monitoring use of QR codes linking persons to campus buildings	Administrative (Safe Person)	Risk of failing to detect infection may be reduced but not to acceptable level
Infection risk	There is a risk that a student or visitor could become infected with COVID-19 while on a Massey campus or site, or during off-site teaching, learning or research activities	Major	Likely		Physical distancing Remote working (where possible) Use of PPE Increased cleaning protocols QR Codes for Contact Tracing Alternative ways of working (shifts, staggered breaks, alternate on-site teams) Online teaching delivery when there is community transmission Reduction of capacity in teaching facilities to support greater physical distancing. Alternative ways of conducting research to minimise contact with others and exposure to high risk activities or areas 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 Health advice/education on good hygiene practices	Moderate	Vaccination requirement	Isolate – (Safe Place)	Risk of infection significantly reduced
							COVID-19 screening questionnaire for all persons on campus/Massey sites	Administrative (Safe Person)	Low effectiveness as persons may not be symptomatic or compliant
							Daily campus pre-start requirement to declare report of any COVID-19 symptoms	Administrative (Safe Person)	Low effectiveness as persons may not be symptomatic or compliant.
Immunisation	Risk of low or no immunisation from COVID-19 on campus or other Massey sites	Major	Likely		Government mandate for Health and Disability Sector, Early	Moderate to High	Vaccination requirement	Isolate – (Safe Place)	The risk is not eliminated but is as low as is reasonably practicable

				<p>Childhood / Primary / Secondary Schools.</p> <p>Government Policy for 90% vaccination rates per DHB to support COVID Protection Framework</p>		<p>Further government Public Health Orders mandating Vaccination at TEOs</p>	<p>Isolate – (Safe Place)</p>	<p>The risk is not eliminated but is it as low as is reasonably practicable</p>
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## COVID-19 AND CONTRACTORS

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

Contractors themselves, like Massey, are PCBU's (Person's Conducting Business or Undertakings). A contractor may or may not be a commercial entity and has specific duties in addition to the primary duty to ensure so far as reasonably practicable the health and safety of its workers while at work or while carrying out work.

The following assessment has been made for Massey contractors, in light of the university's operating context.

- 1. How many people does the contractor carrying out that work come into contact with? (very few = lower risk; many = higher risk)**

This is dependent on the nature of the engagement and work to be undertaken. Some contracted services may be able to be delivered remotely (low risk), others would require attendance on-campus or at other Massey sites and therefore interactions and potential contact with the broader university community (high).

- 2. How easy will it be to identify the people who the 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)**

Where the contractor is required to access a university campus or site it would be very difficult to identify who they may have come into contact with whilst on site (high). Although there is a contractor sign in process, this is generally focussed on trades and construction-related activity.

- 3. How close is the 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)**

This is dependent on the nature of the engagement and work to be undertaken. Some contracted services may be able to be delivered remotely (low risk), others would require attendance on-campus or at other Massey sites and therefore interactions and potential contact with the broader university community (high).

- 4. How long does the work require the contractor to be in that proximity to other people? (brief contact = lower risk; lengthy contact = higher risk)**

This is dependent on the nature of the engagement and work to be undertaken. Some contracted services may be able to be delivered remotely (low risk), others would require attendance on-campus or at other Massey sites and therefore interactions and potential contact with the broader university community (high).

- 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)**

Advice from the Ministry of Health is that people with underlying health conditions are most at risk of COVID-19 becoming a severe illness. Contractors and visitors are more vulnerable if they:

- are over 70 years old with a medical condition
- have a medical condition and/or compromised immunity.
- are pregnant, or
- have other risk factors include ethnicity, smoking and obesity.

The university has not had a need to collect this information from contractors accessing Massey campuses or sites, but it is likely that a proportion of this group will at any time be considered at risk of becoming severely ill due to meeting one or more of these vulnerability factors. Contractors could also transmit to other vulnerable persons at Massey campuses or sites – such as staff, students or visitors.

- 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)**

The Massey University operating context section outlines the working environment. Working from a campus or other Massey site may present a higher risk to a contractor than other workplaces because of the number of people on site and the open and accessible nature of the campus environment.

**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).**

The nature of the university’s operations means even at higher alert levels the university has a significant number of staff and contractors that need to access any of our campuses or sites. Essential activities include (but are not limited to):

- student accommodation services
- health and counselling services
- psychology clinics
- services and functions that are in themselves essential services or are critical to ensuring workers can work remotely, such as:
  - Campus Security
  - Facilities Management (critical utilities maintenance, urgent grounds maintenance)
  - Waste management (third party contract)
  - Cleaning services (third party contract)
  - Payroll Services
  - ITS
- services and activities related to animal welfare such as the Veterinary Teaching Hospital (includes companion animal clinic, farm services, equine services, and Wildbase hospital), equestrian centre, small and large animal welfare.
- services and activities related to primary industries
- critical utilities maintenance and repair.

## RISK ASSESSMENT BY ROLE/WORK ACTIVITY

Role/Work Activity	Risk factors present	Notes	Risk rating
Contractors accessing Massey campuses or sites to undertake work	1 – High 2 – High 3 - High 4 – Moderate 5 - Moderate 6- High 7 - High	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. 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 work sites (Other PCBUs) in any one day increasing potential threat of infection on campus.	High
Contractors providing services or good remotely. No access or attendance on campus required	1 – Low 2 – Low 3 - Low 4 – Low 5 - Low 6- Low 7 - Low	Contracted services delivered remotely, no attendance on campus or at a university site means potential for transmission and infection is low.	Low

## COVID-19 RISKS TO CONTRACTORS

Hazard	Risk	Consequence	Likelihood	Risk Rating	Existing Controls	Control Effectiveness	Additional Controls	Protection Level	Residual risk rating
<b>Contractor(s) become infected with COVID-19 from within Massey campus/sites.</b>									
Transmission risk	There is a risk that a contractor could spread/transmit COVID-19 to others in the Massey workplace.	Major	Likely		Physical distancing of 1m when in-person Use of PPE Increased cleaning protocols QR Codes for Contact Tracing Reduction of numbers of contractor in university facilities to only those necessary to maintain critical infrastructure or services, or to continue research deemed critical	Low	Vaccination requirement	Isolate (Safe Place)	Risk of infection significantly reduced
							COVID-19 screening questionnaire as part of access/induction	Administrate (Safe Person)	Low effectiveness as persons may not be symptomatic
							Daily campus pre-start requirement to declare report of any COVID-19 symptoms	Administrate (Safe Person)	Low effectiveness as persons may not be symptomatic
Detection risk	There is a risk that we do not detect a contractor who is infectious with COVID-19 in the workplace	Major	Likely		Health advice and education – stay away if sick or have symptoms of COVID-19 QR Codes for Contact Tracing	Low	Campus based COVID-19 Testing	Engineering (Safe Place)	Risk of failure to detect may be reduced but not to acceptable level
							Daily campus pre-start requirement to declare report of any COVID-19 symptoms	Administrate (Safe Person)	Risk of failure to detect may be reduced marginally but not to acceptable level
							Strictly enforced check in and monitoring use of QR codes linking persons to campus buildings	Administrate (Safe Person)	Risk of failing to detect infection may be reduced but not to acceptable level

Infection risk	There is a risk that a contractor could become infected with COVID-19 while on a Massey campus or site, or undertaking work on behalf of Massey	Major	Likely		Physical distancing Remote working (where possible) Use of PPE Increased cleaning protocols QR Codes for Contact Tracing Alternative ways of working (shifts, staggered breaks, alternate on-site teams) Reduction of numbers on of contractors in university facilities to only those necessary to maintain critical infrastructure or services, or to continue research deemed critical  Health advice/education on good hygiene practices	Moderate	Vaccination requirement	Isolate – (Safe Place)	Risk of infection significantly reduced
							Regular COVID-19 screening questionnaire for all persons accessing campus/Massey sites	Administrate (Safe Person)	Low effectiveness as persons may not be symptomatic or compliant
							Daily campus pre-start requirement to declare report of any COVID-19 symptoms	Administrate (Safe Person)	Low effectiveness as persons may not be symptomatic or compliant.
Immunisation	Risk of low or no immunisation from COVID-19 on campus or other Massey sites	Major	Likely		Government mandate for Health and Disability Sector, Early Childhood / Primary / Secondary Schools.  Government Policy for 90% vaccination rates per DHB to support COVID Protection Framework	Moderate to High	Vaccination requirement	Isolate – (Safe Place)	The risk is not eliminated but is it as low as is reasonably practicable
							Further government Public Health Orders mandating Vaccination at TEOs	Isolate – (Safe Place)	The risk is not eliminated but is it as low as is reasonably practicable