

REEDHAM VILLAGE HALL Coronavirus (COVID-19) Risk Assessment

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Hazard	Risk	Control measures	RR	Persons at risk
<p>Exposure from others due to:</p> <p>1) Living with someone with a confirmed case of COVID-19.</p> <p>2) Have come into close contact (within 2 meters for 15 minutes or more) with a confirmed case of COVID-19.</p> <p>3) Being advised by a public health agency that contact with a diagnosed case has occurred.</p>	<p>4 x 3 = 12</p>	<ul style="list-style-type: none"> Continue following government action of self-isolation. Any existing individual risk assessments (disability, young persons or new / expectant mothers) to be reviewed Maintain contact with “Community Action Norfolk” and to follow guidance. To continue following ongoing government guidance. Stay at home and only attend hospital in an emergency. Do not attend GP surgery and phone NHS line (111) if further advice is required. Management committee and group leaders to ensure extremely clinically vulnerable persons do not come to the village hall, and continue to shield themselves whilst following their specific medical advice issued to them. Follow good NHS hygiene measures at all times Do not take any antibiotics as they do not work against viruses. 	<p>4 x 1 = 4</p>	Individuals or groups
<p>Suspected case whilst at village hall</p>	<p>4 x 4 = 16</p>	<p>If someone develops a high temperature or a persistent cough while at village hall, they should:</p> <ol style="list-style-type: none"> Temporary in Bottom Isolation Storeroom in main hall. Return home immediately Avoid touching anything Cough or sneeze into a tissue and put it in a bin, or if they do not have tissues, cough and sneeze into the crook of their elbow. They must then follow the guidance on self-isolation and not to return to the village hall until their period of self-isolation has been 	<p>4 x 1 = 4</p>	Individuals or groups

		completed. 6) The village hall should receive deep cleaning and social distancing maintained		
Access / egress to village hall	4 x 4 = 16	Where possible, consider and implement the following practices: 1) Ensure all extremely clinically vulnerable persons do not attend the village hall 2) Stop all non-essential visitors 3) Log all groups or hirers to site 4) Monitor access points to enable social distancing, either increase to reduce congestion or decrease to enable monitoring 5) Increase cleaning or removal of common 'touch points' 6) Require all individuals to wash or sanitiser their hands before entering or leaving the hall. 7) Allow plenty of space (two meters) between people waiting to enter hall. 8) Regularly clean common contact surfaces in kitchen, bar, tables etc, particularly during occupation. 9) Reduce the number of people in attendance at hall. 10) Follow designate walking routes and one-way systems with signage to help maintain social distancing.	4 x 1 = 4	Individuals or groups
Poor hygiene	4 x 4 = 16	1) Wash your hands thoroughly and regularly. Use soap and water for at least 20 seconds. Use alcohol-based hand sanitiser if soap and water is not available, and hand washing technique to be adopted as directed by NHS 2) Avoid touching your face/eyes/nose/mouth with unwashed hands, and cover your cough or sneeze with a tissue then throw it in the bin. 3) Regularly clean the hand washing facilities and check soap and sanitiser levels. 4) Provide suitable and sufficient rubbish pedal bins for hand towels with regular removal and disposal. 5) Supplies of soap, hand sanitiser and paper towels etc are stored in kitchen. 6) Restricted numbers of people using toilets shall be 2 in each toilet. Wash hands before and after using the facilities Enhance cleaning regimes for toilet facilities particularly door handles, locks and the toilet flush, waste bins should be cleaned and emptied frequently. 7) Reminded to catch coughs and sneezes in tissues – Follow Catch it, Bin it, Kill it. 8) Hand sanitiser's are provided by village hall management.	4 x 1 = 4	Individuals or groups
Kitchen - exposure from large numbers of persons	4 x 4	1) Hand cleaning facilities and hand sanitiser are available in kitchen. 2) Individuals and groups should bring pre-	4 x 1	Individuals or groups

	= 16	<p>prepared meals and refillable drinking bottles from home.</p> <ol style="list-style-type: none"> 3) Individuals should sit 2 meters apart from each other whilst eating, and avoid all contact. 4) Worktops should be cleaned between each use. 5) All rubbish should be put straight in the bin and not left for someone else to clear up. 6) All areas used for food preparation must be thoroughly cleaned at the end of each session, including microwave, kettles, fridge etc, this will include any payment devices. 7) Consider closing kitchen if not required or restricting access. 8) Cleaning materials are available and clearly identified, located in cupboard under sink drainer. 9) Hirers to bring own tea towels. 	= 4	
Talking within 2 meters	4 x 4 = 16	<ol style="list-style-type: none"> 1) Hall hirers are to limit face to face, and should be facing away from each other when possible. 2) Provide additional supervision to monitor distancing. 3) Continue to conduct dynamic risk, speak up if there is a safer way of communicating 4) All equipment used i.e. tables, chairs, to be thoroughly cleaned prior and after using it. 5) Increased ventilation will be provided within enclosed spaces 6) Face covering to be maintained when moving about. 7) Consideration given to disposable gloves and hand towel to prevent and reduce potential contamination. 8) Single use PPE should be disposed of so that it cannot be reused and to control potential contamination is controlled (waste removed by a responsible, approved contractor). 9) Elderly deemed clinically vulnerable should never meet within 2m of persons. 	4 x 2 = 8	Individuals or groups
First aid - including mental health	4 X 4 = 16	<ol style="list-style-type: none"> 1) First aid contents to be monitored to ensure adequate supplies remain. 2) First aid and cover arrangements to be reviewed. 3) First aider certificates to be checked for validity and understand amended practices in regards to attending a casualty during COVID (such as revised CPR methodology) 4) Emergency plans to be communicated so all hirers understand what action to take in the event of a suspected or confirmed case of COVID 19. 5) Mental health first aiders to be considered. 6) Village hall management to regularly communicate to their team(s) 	4 X 1 = 4	Individuals or groups

		7) Effective reporting of any issues to the village hall management. 8) disposable towels		
Lounge	4 X 4 = 16	1) Social distancing more difficult. 2) Hirers to be asked to control numbers. 3) Recommend using main hall. 4) Social distancing guidance to be observed by hirers in arranging their activities. 5) Surfaces and equipment to be cleaned by hirers after use. 6) Avoid using window curtains. 7) Door handles, light switches, window catches, tables, chairs and other equipment used, to be cleaned by hirers with Ultra AX	4 X 1 = 4	Individuals or groups
Main Hall	4 X 4 = 16	1) Hirers to be asked to control numbers. 2) Social distancing guidance to be observed by hirers in arranging their activities. 3) Surfaces and equipment to be cleaned by hirers after use. 4) Avoid using window blinds. 5) Door handles, light switches, window catches, tables, chairs and other equipment used, to be cleaned by hirers with Ultra AX supplied. 6) Stage and changing rooms to be cleaned by hirers if used with Ultra AX supplied.	4 X 1 = 4	Individuals or groups

		Likelihood				
		Very Unlikely	Unlikely	Possible	Likely	Very Likely
		1	2	3	4	5
	Negligible	1	2	3	4	5
	Minor	2	4	6	8	10
	Moderate	3	6	9	12	15
	Major	4	8	12	16	20
Severity	Extreme	5	10	15	20	25

*Risk matrix used in risk assessment above
 RR = residual risk*

Call **NHS on 111**, where you will be assessed by an appropriate specialist.

NHS guidance is that you do not go directly to your GP surgery, community pharmacy or hospital unless an emergency occurs

Important Notes:

1. The COVID-19 Risk Assessment may need to be updated in the light of any new government advice that may be forthcoming.
2. This document should be read in conjunction with relevant legislation and guidance issued by government and local authorities.
3. This document is not intended to be comprehensive and ACRE cannot be held responsible for any errors or omissions, factual or otherwise, arising from reliance on it. It is not a substitute for independent professional and/or legal advice.