**Building Risk Assessment – COVID-19**

*NB: This is a template designed to provide support in completing the building risk assessments. This is not exhaustive and will not cover the hazards and risks associated with your environments. Staff must consider the specific hazards and controls appropriate to their areas of work and operations. Managers and staff may be required to amend further local risk assessments and operational procedures.*

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| **Name of Assessor** | | | **Stephanie Hopkin, Facilities Manager** | | **Date** | | | | | | **24/09/20** | | | | |
| **Time** | | | **1pm** | | **Work area** | | | | | | **Magdalen House** | | | | |
| **Task being assessed** | | | **Building RA** | | **Work activity** | | | | | | **Phased Re-opening** | | | | |
| **Review date** | | |  | | **Assessment No** | | | | | | **Rev2** | | | | |
| **Signature** | | | **Stephanie Hopkin** | |  | | | | | | | | | | |
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| **What is the hazard?** | **Who might be harmed?** | **How might people be harmed?** | | **Existing risk control measures?** | | **Existing risk rating** | | | **Additional controls, if required?** | **Target risk rating** | | | | **Action/ monitored by whom?** | **Action / Monitored by when?** |
| **L** | **C** | **R** | **L** | | **C** | **R** |
| *Review hazards and controls*  *NB: All accidents, incidents and near misses must be reported on the Sefton Council online reporting system:* [*http://ext.smbc.loc/incidentreporting/*](http://ext.smbc.loc/incidentreporting/)  *People - https://www.nhs.uk/conditions/coronavirus-covid-19/people-at-higher-risk/whos-at-higher-risk-from-coronavirus/* | | | | | | *Complete risk ratings and where further action is required. The aim is to reduce the likelihood / consequence of harm or loss. Monitoring will be carried out by cyclist and may involve line manager (as with other travel during work time).* | | | | | | | | | |
| Exposure to hazardous substances, bacteria or contact with faulty equipment.  Exposure to Legionella.  Fire hazards such as poorly maintained equipment, protection, and prevention systems. | Staff, agency staff, contractors, suppliers and delivery drivers, visitors, clients, public.  Clinically extremely vulnerable, clinically vulnerable and other those with other vulnerable characteristics (ref further information). | Ill health, fatality, or other loss such as property damage due to exposure to legionella bacteria, asbestos release, unsafe services. | | Statutory and mandatory compliance inspections, testing and maintenance is carried out during periods of reduced occupancy. Recordsare kept.  This includes:   * Lifts and lifting equipment, * Fire protection and prevention measures, * Panic alarms, * Asbestos disturbance or deterioration, * Gas supply, * Fixed wiring, * Ventilation (mechanical and natural), * Pest control.   Legionnaires’ risk assessment and water management plan (hot and cold-water systems) is in place.  Fire risk assessment is updated to reflect:   * **Capacity – currently at less than 100 staff (at full capacity the building has 800 desks for 1000 staff)** * changes to normal access, egress and travel routes through premises, * increased levels of cleaning substances and sanitiser (highly flam substances), * Changes at reception areas or entrances, * Where final exit doors have additional security arrangements in place to control access / egress.   Fire doors remain closed (unless fitted with devise linked to fire alarm) and emergency access routes are maintained.  CoSHH assessments are in place for sanitisers and cleaning products used by all staff.  Lidded bins are installed throughout and a 72-hour waste holding area is available.  A cleaning programme is in place, with additional arrangements in the event of a suspected or confirmed case of COVID-19. | | 4 | 5 | 20 | The front doors are currently locked with a thumb turn on the inside to aid escape in the event of an emergency. | 1 | | 5 | 5 | Facilities Manager | Weekly discussions, monthly record checks / reports |
| Transmission of Coronavirus from contact with infected individuals or contaminated Council premises. | Staff, agency staff, contractors, suppliers and delivery drivers, visitors, clients, public.  Clinically extremely vulnerable, clinically vulnerable and other those with other vulnerable characteristics (ref further information). | COVID-19 resulting in ill health or fatality due to exposure to harmful bacteria and viruses.  Anxiety due to fear of exposure or new procedures and behaviours. | | **Staff continue to work from home where possible.**  Remote working / meetings tools are used where possible.  Requests for working on council premises are authorised in advance.  Access to the premises is restricted.  Access control systems are in place and attendants patrol the premises.  Visits from staff from other departments / sites, visitors, contractors and suppliers are pre-agreed. Site rules and expectations are communicated in advance. Building and other relevant risk assessments are shared.  Public access is restricted and is by appointment only. Any non-member of staff must wear a mask when moving around the building.  For track and trace purposes, names and contact numbers of anyone attending the premises is held for 21 days.  H&S incidents, accidents, near misses and cases of non-compliance are reported to line managers and on the H&S reporting system.  Policies, procedures, practices and arrangements are reviewed and amended. Any changes are communicated to staff. | | 2 | 5 | 10 |  | 2 | | 5 | 10 | Facilities Manager / Team Managers | Observations, safety walks through operational areas,  weekly discussions with staff. |
| Transmission of Coronavirus from contact with infected individuals or contaminated communal areas and circulation spaces. | Staff, agency staff, contractors, suppliers and delivery drivers, visitors, clients, public.  Clinically extremely vulnerable, clinically vulnerable and other those with other vulnerable characteristics (ref further information). | COVID-19 resulting in ill health or fatality due to exposure to harmful bacteria and viruses.  Anxiety due to fear of exposure or new procedures and behaviours. | | Arrivals, finish times and breaks are staggered, considering modes of transport to and from work.  Staff avoid the use of public transport and peak time travel where possible.  Additional parking and bicycle storage is available.  Maximum occupancy levels are agreed for offices, meeting rooms, communal and circulation spaces and are kept to a minimum.  2 metre social distancing is maintained where possible.  Screens, restricted seating, desk use and other mitigation is in place where social distancing may be compromised.  Face coverings are not currently required in offices, but may be required for meetings and where other mitigation is not practicable.  Staff do not make non-essential trips around building and are discouraged from having face to face meetings. TEAMS facility, emails and telephones are used.  Staff are not to congregate in communal areas or stop to talk to colleagues.  Lifts are restricted to 1 person (unless with a carer / parent / guardian / another person from the same household).  There are restrictions in showers, toilet cubicles, urinals, sinks, in kitchen areas and around equipment, at water fountains and shared equipment such as photocopiers.  Staff may be required to queue 2 metres apart.  Hand sanitising stations are positioned throughout the premises.  Staff are reminded to operate good hand and respiratory hygiene i.e. washing of hands (20 seconds), use of sanitiser and tissues.  Signs and workplace information is in place. | | 1 | 5 | 5 |  | 1 | | 5 | 5 | Team Managers | Observation of their teams and regular reinforcement of the guidelines |
| Transmission of Coronavirus from contact with infected individuals or contaminated operational spaces. | Staff, agency staff, contractors, suppliers and delivery drivers, visitors, clients, public.  Clinically extremely vulnerable, clinically vulnerable and other those with other vulnerable characteristics (ref further information). | COVID-19 resulting in ill health or fatality due to exposure to harmful bacteria and viruses.  Anxiety due to fear of exposure or new procedures and behaviours. | | Work layouts consider social distancing and ensure staff are not working less than 2 metres from each other, or face to face.  All soft furnishings and unnecessary furniture is removed.  Staff sit at the same desk and observe a clear desk policy. Staff have their own keyboards and mouse.  All work items and personal belongings are stored in the lockers, where available.  Staff clean and sanitise their work surfaces, screens and other shared equipment at the end of each day. | | 2 | 5 | 10 |  | 2 | | 5 | 10 | Team Managers | Observation of their teams and regular reinforcement of the guidelines |
| Transmission of Coronavirus from contact with infected individuals or contaminated meeting rooms.  Fire or smoke spread.  Falls from height. | Staff, agency staff, contractors, suppliers and delivery drivers, visitors, clients, public.  Clinically extremely vulnerable, clinically vulnerable and other those with other vulnerable characteristics (ref further information). | COVID-19 resulting in ill health or fatality due to exposure to harmful bacteria and viruses.  Anxiety due to fear of exposure or new procedures and behaviours.  Ill health, fatality due to burns or smoke inhalation.  Property damage from smoke or fire.  Ill health or fatality due to falls from height. | | Staff and visitor face to face meetings are discouraged. Where meetings must be held, social distancing is maintained and appropriate controls are implemented.    Meeting room occupancy levels have been agreed, numbers are kept to a minimum to maintain 2 metre distances.  Meeting room doors and windows may be opened to ventilate space where safe i.e. risk of smoke and fire travel or falls from open windows has been assessed.  Paperwork is sent via electronic means either before or after the visit. Agenda and minutes are distributed electronically.  Staff use their own stationary. | | 2 | 5 | 10 |  | 2 | | 5 | 10 | Team Managers | Observation of their teams and regular reinforcement of the guidelines |
| Transmission of Coronavirus from infected persons | Staff, agency staff, contractors, suppliers and delivery drivers, visitors, clients, public.  Clinically extremely vulnerable, clinically vulnerable and other those with other vulnerable characteristics (ref further information). | Contamination from direct contact leading to ill health or fatality due to exposure to harmful bacteria and viruses.  Anxiety due to fear of exposure or new procedures and behaviours. | | No-one will attend the workplace if they are displaying symptoms of COVID-19.  They will be sent home and will be required to self-isolate. Testing arrangements will be made.  Staff must inform their line manager if they have been in the company or environment of anyone displaying symptoms.  Managers will report accordingly – public health, health and safety.  Fatalities from COVID-19 are reportable under RIDDOR.  A trained fire warden will always be on site.  First aiders use appropriate PPE and follow guidance. Casualties may also be required to wear face masks.  Managers will monitor the mental and physical health and wellbeing of staff and respond accordingly, with support from the Health Unit, Health and Safety, and Personnel teams. | | 3 | 5 | 15 |  | 3 | | 5 | 15 | Facilities Manager / Team Managers | Weekly discussions with staff.  Incident reporting and investigation. |

**Approach – 5 Steps to Risk Assessment** <https://www.hse.gov.uk/risk/controlling-risks.htm>

1. Identify the hazards
2. Decide who might be harmed and how
3. Evaluate the risks and decide on precautions

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| --- | --- | --- | --- | --- | --- |
| Likelihood: | 1  Very Unlikely | 2  Unlikely | 3  Fairly  Likely | 4  Likely | 5  Very  Likely |
| Consequences: |  | | | | |
| 5. Catastrophic | 5 | 10 | 15 | 20 | 25 |
| 4. Major | 4 | 8 | 12 | 16 | 20 |
| 3. Moderate | 3 | 6 | 9 | 12 | 15 |
| 2. Minor | 2 | 4 | 6 | 8 | 10 |
| 1. Insignificant | 1 | 2 | 3 | 4 | 5 |

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| 20-25 | **Stop** – stop activity and take immediate action |
| 15-19 | **Urgent action** – take immediate action and stop activity if necessary, maintain existing controls rigorously |
| 11-14 | **Action** – improve within specified timescale |
| 6-10 | **Monitor** – look to improve at next review or if there is a significant change |
| 1-5 | **No action** – no further action but ensure controls are maintained and reviewed |

1. Record your significant findings
2. Review your assessment and update, if necessary.