CORONA VIRUS SAFETY ASSESSMENT
RETURN TO WORK

Description of workplace:

Main hazards:

Significant risks:

Persons at risk:

See Section 2 for detailed analysis.

OVERALL ASSESSMENT OF THE RISK OF INJURY?   ☐ Low   ☐ Medium   ☐ High

Recommendations:	Priority	Action by	Completed:

Date of assessment: _____   **Date for re-assessment**: _____

Assessors name: _____   **Signature**: _____

SECTION 2

This listing does not include all potential hazards. It includes the main ones – each workplace location and environment has differing hazards. Not all these categories will apply or are of equal importance. This document is based on government guidance "Working Safely during COVID 19 Factories Plants and Warehouses" and "Working safely during COVID-19 in offices and contact centres" dated 11th May 2020

RR = Risk rating of low, medium or high.

Suitability	Yes	No	N/A	RR	Comment/Controls
Procedures and Training					
Are staff aware of the symptoms of Corona Virus? The following symptoms may develop in the 14 days after exposure to someone who has COVID-19 infection: • cough • difficulty in breathing • fever					
Have staff been told to self-isolate if they have any of the above symptoms? Current guidance for people with symptoms can be found at https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection					
Have staff been trained in the following: • cover your mouth and nose with a tissue or your sleeve (not your hands) when you cough or sneeze. See Catch it, Bin it, Kill it • put used tissues in the bin straight away • wash your hands with soap and hot water often – use hand sanitiser gel if soap and water are not available. See hand washing guidance • try to avoid close contact with people who are unwell • clean and disinfect frequently touched objects and surfaces • do not touch your eyes, nose or mouth if your hands are not clean					

Is there a procedure in place if a member of staff thinks they are starting with Corona Virus? If someone becomes unwell in the workplace and the unwell person should be removed to an area which is at least 2 metres away from other people. If possible find a room or area where they can be isolated behind a closed door, such as a staff office. If it is possible to open a window, do so for ventilation. The individual who is unwell should call NHS 111 from their mobile, or 999 if an emergency (if they are seriously ill or injured or their life is at risk) and explain which country they have returned from in the last 14 days and outline their current symptoms. Whilst they wait for advice from NHS 111 or an ambulance to arrive, they should remain at least 2 metres from other people. They should avoid touching people, surfaces and objects and be advised to cover their mouth and nose with a disposable tissue when they cough or sneeze and put the tissue in a bag or pocket then throw the tissue in the bin. If they don't have any tissues available, they should cough and sneeze into the crook of their elbow. If they need to go to the bathroom whilst waiting for medical assistance, they should use a separate bathroom if available.					
Do you Provide clear, consistent and regular communication employees to improve understanding and consistency of ways of working?					
Have you developed communication and training materials for workers prior to returning to site, especially around new procedures for arrival at work?					
Are you aware and do you focus on the importance of mental health at these times of uncertainty? The government has published guidance on the mental health and wellbeing aspects of coronavirus (COVID-19). https://www.gov.uk/government/publications/covid-19-guidance-for-the-public-on-mental-health-and-wellbeing/guidance-for-the-public-on-the-mental-health-and-wellbeing-aspects-of-coronavirus-covid-19					
Do you Keep in touch with off-site workers on their working arrangements including their welfare, mental and physical health?					
Vulnerable Employees					
Are you aware of employees who are clinically extremely vulnerable or clinically vulnerable (see appendix link for definitions)? Clinically extremely vulnerable individuals have been strongly advised not to work outside the home Clinically vulnerable individuals, who are at higher risk of severe illness (for example, people with some pre-existing conditions, see definition in Appendix), have been asked to take extra care in					

observing social distancing and should be helped to work from home, either in their current role or in an alternative role. If clinically vulnerable (but not extremely clinically vulnerable) individuals cannot work from home, they should be offered the option of the safest available on-site roles, enabling them to stay 2m away from others. If they have to spend time within 2m of others, you should carefully assess whether this involves an acceptable level of risk. As for any workplace risk you must take into account specific duties to those with protected characteristics, including, for example, expectant mothers who are, as always, entitled to suspension on full pay if suitable roles cannot be found. Particular attention should also be paid to people who live with clinically extremely vulnerable individuals					
Employees on site					
Has Consideration been made for who is essential to be on site? Everyone should work from home, unless they cannot work from home for example, office staff should work from home if at all possible					
Has a Plan been devised for the minimum number of people needed on site to operate safely and effectively?					
Social Distancing					
You must maintain social distancing in the workplace wherever possible.					
Is it possible to maintain 2m social distancing wherever possible (including while arriving at and departing from work, while in work, and when travelling between sites)? Where the social distancing guidelines cannot be followed in full in relation to a particular activity, the businesses should consider whether that activity needs to continue for the business to operate, and, if so, take all the mitigating actions possible to reduce the risk of transmission between their staff. Mitigating actions include: • Further increasing the frequency of hand washing and surface cleaning. • Keeping the activity time involved as short as possible. • Using screens or barriers to separate people from each other. • Using back-to-back or side-to-side working (rather than face to-face) whenever possible. • Reducing the number of people each person has contact with by using 'fixed teams or partnering' (so each person works with only a few others).					
Have social distancing measures been applied to all parts of a business, not just the place where people spend most of their time, but also entrances and exits, break rooms and canteens and similar settings?					

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Arriving and Leaving Work					
Is a system needed to Stagger arrival and departure times at work to reduce crowding into and out of the workplace?					
Is it possible or needed to provide additional parking or facilities such as bike racks to help people walk, run, or cycle to work where possible?					
Is it possible to reduce congestion, for example, by having more entry points to the workplace?					
Can you use markings and introducing one-way flow at entry and exit points?					
Do you provide handwashing facilities, or hand sanitiser where not possible, at entry and exit points?					
Where applicable can you provide alternatives to touch-based security devices such as keypads?					
Where applicable can you change process alternatives for entry/exit points where appropriate, for example, deactivating pass readers at turnstiles in favour of showing a pass to security personnel at a distance?					
Moving around the worksite					
Can you reduce movement by discouraging non-essential trips within buildings and sites, (for example, restricting access to some areas, encouraging use of radios or telephones, where permitted, and cleaning them between use)?					
Can you reduce job and equipment rotation?					
Can you Introduce more one-way flow through buildings?					
Have you reduced the maximum occupancy for lifts and provide hand sanitiser for the operation of lifts. Encourage the use of stairs wherever possible					
Are you regulating the use of high traffic areas including corridors, lifts, turnstiles and walkways to maintain social distancing?					
Work Stations (including places of work such as benches, machinery operating points etc)					
Can workstations be assigned to an individual as much as possible? If they need to be shared it should be by the smallest possible number of people					
Have you reviewed layouts, line set-ups or processes to allow people to work further apart from each other?					
Is there floor tape or paint to mark areas to help workers keep to a 2m distance?					
Where it is not possible to move workstations further apart, have you arranged people to work side by side or facing away from each other rather than face-to-face?					
Only where it is not possible to move workstations further apart, have you considered installing screens to separate people from one another?					
Do you use a consistent pairing system if people have to work in close proximity, (for example, during two person working, lifting or maintenance activities that cannot be redesigned)?					

Meetings					
Can you use remote working tools to avoid in-person meetings?					
If a physical meeting has to take place are procedures in place so only absolutely necessary participants should attend meetings and should maintain 2m separation throughout?					
Have meeting attendees been told to avoid transmission during meetings, for example, from sharing pens and other objects?					
Is hand sanitiser in provided in meeting rooms?					
Is it possible to hold meetings outdoors or in well-ventilated rooms whenever possible?					
Common Areas					
Are you staggering break times to reduce pressure on break rooms or places to eat?					
Can you Using safe outside areas for breaks?					
Can you create additional space by using other parts of the worksite or building that have been freed up by remote working?					
Is there protective screening for staff in receptions or similar areas?					
For staff canteens are you providing packaged meals or similar to avoid opening staff canteens, where possible?					
Have you reconfigured seating and tables to maintain spacing and reduce face-to-face interactions?					
Have you installed social distance marking for other common areas such as toilets, showers, lockers and changing rooms and in any other areas where queues typically form?					
Have staff been told that in the event of a an emergency such as a fire employees do not have to social distance when evacuation procedures are taking place?					
Contactors and Visitors					
Is it possible to have visits via remote connection or remote working for visitors?					
Do you Limit the number of visitors at any one time?					
Can you determine if schedules for essential services and contractor visits can be revised to reduce interaction and overlap between people, for example, carrying out services at night?					
Can you maintain a list of all visitors?					
Do you provide clear guidance on social distancing and hygiene to people, for example, inbound delivery drivers or safety critical visitors, on arrival, for example, signage, visual aids, and before arrival, for example, by phone, on the website, by email?					
Are visitors hosts aware of their duties regarding COVID 19?					
Have you reviewed entry and exit routes for visitors and contractors to minimise contact with other people?					
Has Coordination and cooperation taken place with other occupiers for those working in facilities shared with other businesses including with landlords and					

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other tenants?					
Cleaning					
Is there frequent cleaning of work areas and equipment between uses, using your usual cleaning products?					
Is there frequent cleaning of objects and surfaces that are touched regularly, such as door handles, pump handles and printers, and making sure there are adequate disposal arrangements?					
Is there a system to clear workspaces and removing waste and belongings from the work area at the end of a shift?					
Is there a system for cleaning after a known or suspected case of COVID-19? Refer to the https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings					
Hygiene – handwashing, sanitation facilities and toilets					
Are signs and posters displayed to build awareness of good handwashing technique, the need to increase handwashing frequency, avoid touching your face and the need to cough or sneeze into a tissue which is binned safely, or into your arm if a tissue is not available?					
Do you provide regular reminders and signage to maintain hygiene standards?					
Is hand sanitiser provided at strategical locations throughout the building?					
Is there clear use and cleaning guidance for toilets to ensure they are kept clean and social distancing is achieved as much as possible?					
Is there scheduled extra cleaning for busy areas?					
Have you provided more waste facilities and more frequent rubbish collection?					
Where possible can you provide paper towels as an alternative to hand dryers in handwashing facilities?					
Changing Rooms and Showers					
Where shower and changing facilities are required, have you set clear use and cleaning guidance for showers, lockers and changing rooms to ensure they are kept clean and clear of personal items and that social distancing is achieved as much as possible?					
Have you introduced enhanced cleaning of all facilities regularly during the day and at the end of the day?					
Handling goods, merchandise and other materials, and onsite vehicles					
Are there cleaning procedures for the parts of shared equipment people touch after each use, thinking about equipment, tools and vehicles, for example, pallet trucks and forklift trucks?					
Do you encourage increased handwashing and have you introduced more handwashing facilities for workers handling goods and merchandise or					

providing hand sanitiser where this is not practical?				
Is there a system to ensure the regular cleaning of reusable delivery boxes?				
PPE				
Is extra PPE required such as face masks? See appendix for more information				
Shift patterns and working groups				
Have you as far as possible, where people are split into teams or shift groups, fixed these teams or shift groups so that where contact is unavoidable, this happens between the same people?				
Have you identified areas where people have to directly pass things to each other, (for example, job information, spare parts, samples, raw materials), and found ways to remove direct contact, such as through the use of drop-off points or transfer zones?				
Work related travel				
Can you minimise non-essential travel and considered remote options first (such as Zoom meetings etc)?				
Can you Minimise the number of people travelling together in any one vehicle by using fixed travel partners, increasing ventilation when possible and avoiding sitting face-to-face?				
Is there a system to clean shared vehicles between shifts or on handover?				
Where workers are required to stay away from their home, is there a system to centrally log the stay and making sure any overnight accommodation meets social distancing guidelines?				
Are procedures in place to minimise person-to-person contact during deliveries to other sites?				
Do you maintain consistent pairing where two-person deliveries are required?				
Can you minimise contact during payments and exchange of documentation, for example, by using electronic payment methods and electronically signed and exchanged document?				
Inbound and outbound goods				
Have you pick-up and drop-off collection points, procedures, signage and markings?				
Have you considered methods to reduce frequency of deliveries, for example by ordering larger quantities less often?				
Where possible and safe, can you have single workers load or unload vehicles or use the same pairs of people for loads where more than one is needed?				
Do you encourage drivers to stay in their vehicles where this does not compromise their safety and existing safe working practice, such as preventing drive-aways?				
Poster				
Employers are being asked to display a poster which acknowledges they have followed guidance this can be found at https://assets.publishing.service.gov.uk/media/5eb97d30d3bf7f5d364bfbb6/staying-covid-19-secure.pdf				

Appendix

Clinically extremely vulnerable Clinically extremely vulnerable people will have received a letter telling them they are in this group, or will have been told by their GP. Guidance on who is in this group can be found here: https://www.gov.uk/government/publications/guidance-on-shielding-andprotecting-extremely-vulnerable-persons-from-covid-19/guidance-onshielding-and-protecting-extremely-vulnerable-persons-from-covid-19

Clinically vulnerable people Clinically vulnerable people include those aged 70 or over and those with some underlying health conditions, all members of this group are listed in the 'clinically vulnerable' section here: https://www.gov.uk/government/publications/full-guidance-on-staying-athome-and-away-from-others/full-guidance-on-staying-at-home-and-awayfrom-others

PPE from government guidance "Working Safely during COVID 19 Factories Plants and Warehouses" dated 11th May 2020

PPE protects the user against health or safety risks at work. It can include items such as safety helmets, gloves, eye protection, high-visibility clothing, safety footwear and safety harnesses. It also includes respiratory protective equipment, such as face masks. Where you are already using PPE in your work activity to protect against non-COVID-19 risks, you should continue to do so. At the start of this document we described the steps you need to take to manage COVID-19 risk in the workplace. This includes working from home and staying 2m away from each other in the workplace if at all possible. When managing the risk of COVID-19, additional PPE beyond what you usually wear is not beneficial. This is because COVID-19 is a different type of risk to the risks you normally face in a workplace, and needs to be managed through social distancing, hygiene and fixed teams or partnering, not through the use of PPE. The exception is clinical settings, like a hospital, or a small handful of other roles for which Public Health England advises use of PPE. For example, first responders and immigration enforcement officers. If you are in one of these groups you should refer to the advice at: https://www.gov.uk/government/publications/coronaviruscovid-19-personal-protective-equipment-ppe-plan/covid-19- personal-protective-equipment-ppe-plan and https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19- decontamination-in-non-healthcare-settings.

Workplaces should not encourage the precautionary use of extra PPE to protect against COVID-19 outside clinical settings or when responding to a suspected or confirmed case of COVID-19. Unless you are in a situation where the risk of COVID-19 transmission is very high, your risk assessment should reflect the fact that the role of PPE in providing additional protection is extremely limited. However, if your risk assessment does show that PPE is required, then you must provide this PPE free of charge to workers who need it. Any PPE provided must fit properly .

Face coverings
There are some circumstances when wearing a face covering may be marginally beneficial as a precautionary measure. The evidence suggests that wearing a face covering does not protect you, but it may protect others if you are infected but have not developed symptoms. A face covering can be very simple and may be worn in enclosed spaces where social distancing isn't possible. It just needs to cover your mouth and nose. It is not the same as a face mask, such as the surgical masks or respirators used by health and care workers. Similarly, face coverings are not the same as the PPE used to manage risks like dust and spray in an industrial context. Supplies of PPE, including face masks, must continue to be reserved for those who need them to protect against risks in their workplace, such as health and care workers, and those in industrial settings like those exposed to dust hazards. It is important to know that the evidence of the benefit of using a face covering to protect others is weak and the effect is likely to be small, therefore face coverings are not a replacement for the other ways of managing risk, including minimising time spent in contact, using fixed teams and partnering for close-up work, and increasing hand and surface washing. These other measures remain the best ways of managing risk in the workplace and government would therefore not expect to see employers relying on face coverings as risk management for the purpose of their health and safety assessments. Wearing a face covering is optional and is not required by law, including in the workplace. If you choose to wear one, it is important to use face coverings properly and wash your hands before putting them on and taking them off. Employers should support their workers in using face coverings safely if they choose to wear one. This means telling workers:
• Wash your hands thoroughly with soap and water for 20 seconds or use hand sanitiser before putting a face covering on, and after removing it.
• When wearing a face covering, avoid touching your face or face covering, as you could contaminate them with germs from your hands.

• Change your face covering if it becomes damp or if you've touched it.
• Continue to wash your hands regularly. • Change and wash your face covering daily.
• If the material is washable, wash in line with manufacturer's instructions. If it's not washable, dispose of it carefully in your usual waste. • Practise social distancing wherever possible. You can make face-coverings at home and can find guidance on how to do this and use them safely on GOV.UK.