

COVID-19 Risk Assessment – re-opening services to clients

HAZARD/Consequences: Could result in minor to serious illness, death, spreading of virus, mass isolation.

HAZARD	RISK	CONTROLS REQUIRED	RISK RATING	PERSONS AT RISK	FURTHER CONTROL MEASURES	ANY OTHER /FURTHER ACTION	RISK RATING after further control measures
Spread through poor hygiene	People touching items, handles, surfaces and contaminate them or pick up the virus.	 Hand Washing Hand washing facilities with soap and water in place. Stringent hand washing taking place. See hand washing guidance. Drying of hands with disposable paper towels or hand dryers Staff encouraged to protect the skin by applying emollient cream regularly Gel sanitisers in any area where washing facilities not readily available • 	6		Employees to be reminded on a regular basis to wash their hands for 20 seconds with water and soap and the importance of proper drying with disposable towels. Also reminded to catch coughs and sneezes in tissues – Follow Catch it, Bin it, Kill it and to avoid touching face, eyes, nose or mouth with unclean hands. Tissues will be made available throughout the workplace. To help reduce the spread of coronavirus (COVID-19) reminding everyone of the public health advice - https://www.publichealth.hscni.net/news/covid-19-coronavirus Signs displayed around buildings about hand washing People touch only their own items where possible – own pens, computer etc.		4
Building becoming unclean	Breeding ground for the virus	All staff must adhere to a strict cleaning procedure, to support infection prevention and minimise risk of cross-contamination.	14	Clients Staff	 Staff must ensure that they are vigilant when considering cleaning practices in the workplace. Cleaning products will be available onsite for use. 	Staff must not deviate from the COSHH assessed list of products.	8



Develo	Cleaning procedures not followed Running out of cleaning products	Areas clients will have access to are limited to shared toilet facilities and rooms within their social bubble. As with all cleaning procedures, staff must adhere to the cleaning risk assessment. Stock sheets monitor stock levels so minimum levels are not exceeded. Multiple suppliers used.			 Staff must wear gloves when cleaning. Gloves are single-use and must not be used to clean more than one room. If cleaning cloths are used to clean surfaces, these should be thrown away after. Where possible, staff to use toilet roll to wipe cleaning product residue from surfaces, flushing accordingly. All waste bin bags are to be disposed of on a daily basis. All bins to have lids Staff must do the touchpoints regularly and after each use. Deep cleaning will commence of each room after the end of every day. 	Staff will be responsible for the touchpoints and deep cleaning in their "room bubble"	
People arriving at the hubs	Touching of surfaces with unclean hands when entering/exiti ng the building and internal rooms Contact with others in the building People arriving early and entering building or waiting in groups	All buildings will have alcohol gel dispensers situated at the front and back of the building for use on entrance and exit of any building. Alcohol gel is provided in each room. Staff and clients currently arrive at staggered arrival times.	6	Clients Staff	 entry/reception responsible for 'policing' people coming in. The will complete the 'covid' checklist. All staff and clients are to be advised they must inform us if they are contacted by Track and Trace. All staff and clients are to have their temperatures checked before they enter any of the buildings or before staff start to work with them. If their temperature is high we will retest 10 min later and if its still high they will be sent home and asked to take a test. Clients have an allocated entrance to come in, this follows a one-way system down the corridors to their allocated room bubble. 	All key holders have their own set of keys. All staff have availability to a thermometer - either in the hubs or community. Staff working 1 2 1 will covid check themselves and their clients. One-way systems are shown with signs and tape.	4



Departing the building	Mass gatherings Social distancing not adhered to	Staggered departure times	12	All	Staff to police departure Clients to remain in allocated room until timed transport arrives	Chaff ha arrays they	8
Visitors	Carrier of virus	Stop all non-essential visitors	12	All	Any essential visitor must have an appointment	Staff to ensure they liaise with carers/suppliers and only book essential visits	8
Non compliance to wear PPE	Spreading the virus Mass sickness of staff/clients Closing of the hub Behaviour issues with clients refusing	All staff will be asked to bring a bag to keep their own PPE for use during sessions. These will contain: antibacterial gel, reusable face masks/shields, gloves, antibacterial wipes, tissues, pens.	12	Clients Client Household Staff Public	 Clients will received a training session explain why we have to do everything and what is expected of them in order to keep everyone safe etc. All staff and clients will be shown, through the use of government guidance and guidelines set up by Headway, the correct procedures for using PPE. Before and after use of PPE Before putting on PPE, hand hygiene should be practiced and extended to exposed forearms using alcohol hand-rub or gel or soap and water. After removing any element of PPE, hand hygiene should be practiced and extended to exposed forearms, using alcohol hand-rub or gel or soap and water. Gloves Gloves are subject to single use and must be disposed of after each contact. Face Masks/ shields Face masks/ shields to be worn at all times and changed (if single use paper masks) when moving to assist each client or group of clients. Additional face masks/shields available at reception for clients to purchase. 	Each site will have additional PPE (alcohol hand gel, wipes, gloves, face shields or masks and tissues) for replenishing bags. Managers/Seniors will ensure their teams have access to additional PPE items as and when required. Disposal of gloves: Any single use should be disposed of correctly. Alcohol gel/rub must be used if soap and water are not available.	6



				 When delivering personal care face masks and shields must be worn or assisting with injury or support medical needs. Face masks must cover the nose and extend to cover the mouth and chin. Only when alone can face masks be removed Hands must be washed prior to and following a session with clients. If soap and water are not available alcohol rub/gel must be used. When washing hands with soap and water this process should last for at least 20 seconds this should be practiced and extended to exposed forearms. Staff will be shown the NHS guidance on how to wash your hands. Staff Coughing/Sneezing If not wearing a face mask, staff must cover their mouth and nose with a tissue or sleeve (not your hands) when they cough or sneeze. 	It is the responsibility of each staff member to keep their own face shields clean and disinfected. Notices and posters are displayed around the building.	
Supply of PPE	Running out Staff not protected	Adequate stock before opening Stock sheets to ensure minimum levels are not exceeded Approved suppliers Multiple suppliers/robust supply chain	12	 All staff to be advised to request restocking of supplies before they run out or get too low. 		8
Lone working	Close contact with the client Spending time out in the community Clients/carers / staff not understandin g the new rules	An evaluation format will be available for staff to complete as and when required, to ensure that we are performing safely and reflecting on our experiences. Risk assessments will need to be updated as and when client's needs change	6	 All the above will need to be followed/guidelines For managers/seniors to timetable effectively staff and the clients they will be working with on each day of the week. This central point of contact will be referenced on the timetable as this may change day to day. Staff to be aware of who to contact. Managers to speak with their teams on a regular basis to discuss any concerns or positive feedback they have experienced during sessions. The safety guides and reasons will be explained to all clients community visits will be limited to safe practices 	A central point of contact will be highlighted on the timetables for each day of the week; this person can be available to speak with and alert any concerns to. This person can also be available to support in cases of emergency.	4



	Illness						
Group/1-2-1 Sessions	Maintaining Stringent Social Distancing Clients/carers /staff not understandin g the new rules Unknowingly carrying the virus Spending time out in the community	Government guidelines have determined a 1-metre social distance between those persons not from the same household. When working in the community, this must be maintained, but exceptional circumstance may result in this 1-metre distance being compromised e.g. To administer first aid To prevent injury To support medical needs, epilepsy, the administration of medication. Unanticipated personal care needs. Clients not adhering to guidelines Members of the public not adhering to guidelines	8	Clients Staff Public	 Clients have been offered a level of service identified as most suitable to the client's needs, behaviors and levels of understanding. All clients will have an updated risk assessment which identifies measures needed to be implemented to meet their individual requirements. Clients will be provided with guidelines explaining the protocols that they will need to follow. All seating for sessions is spaced 2m apart and will be cleaned before, during and at the end of the day. Clients will be asked to wear PPE throughout the day. Both clients and staff to avoid touching their face areas, including eyes, nose and mouth. Working in the home Clients will be asked where possible to remain at a 1-metre distance from the staff where this is not possible staff must adhere to the guidelines (full PPE, cleaning of areas) individual risk 	Guidelines to be sent to clients and families to allow clients to read information prior to session commencing. Staff will go through the guidelines when working with the clients to remind them PPE will be available to all staff. All staff will be provided with items they require, to be placed in their own bags, for use when working in the hubs or community.	4
	community	guidelines			a 1-metre distance from the staff where this is	working in the hubs or	
		terms of safety and the client's ability to maintain the requirements of social distancing. If, during contact, the staff member deems that the session is unsafe, they must consult carers and terminate the session there and then, asking for the client to be collected An evaluation format will be available for staff to complete			visits. PPE will be provided to staff working in this way. 1:1 or Group Support Clients will be reminded of the 1-metre distancing rule as and when necessary Staff will avoid areas heavily populated by members of the public. Any clients who require medication should have this administered (where possible) prior to the session. Where it is not possible to remain 1-metre apart,	Staff should wear clean clothes every day and those traveling on public transport should change clothes before entering and leaving hubs. Material wash bags are provided so staff can put clothes straight into the wash.	
		as and when required, to			staff should work side by side with client, facing	into the wash.	



		ensure that we are performing safely and reflecting on our experiences. Risk assessments will need to be updated as and when client's needs change			 away from client or with , rather than face-to-face if possible. Where face-to-face contact is essential, breaking the 1-metre distance, e.g. due to a medical need, this should be kept to 15 minutes or less wherever possible. If 1-metre distance is compromised due to an exceptional circumstance, staff must ensure there PPE is secure and dispose of this accordingly after use. 		
Client activities	Group sizes Adhering to social distancing	Due to the clients that we support and their levels of vulnerability, group size has had to be considered to ensure least risk and utmost safety when working in the hubs or community.	8	Clients Staff Public	 A limit of up to 6 clients in a group; managers and coordinators will review to discuss clients suitable for this level of working, to ensure least risk. Clients working in groups should have some understanding of social distancing and staff must be confident that clients will be able to maintain the 1-metre distance as much as feasibly possible. Staff to consider clients allocated to groups and their individual needs i.e. is group working sensible for specific clients. Clients will be directed to a room bubble and asked to work in that bubble for the day. Ensure all room are well ventilated. All seating for sessions is spaced 2m apart and will be cleaned before, during and at the end of the day. Consider using outside space for some sessions Lidded bins in rooms for used tissues/other waste 	Two staff to each room bubble and the room bubble will have the same staff and clients in for the day.	6
Preparation of food and drink	Break and lunch time Group gatherings Communal use of kitchen equipment	Staff and clients will have staggered break and lunch times within their room bubble	8	Clients Staff	 Clients to be asked to bring their own labelled cups and utensils with them to sessions. An allocated staff member to be in the kitchen and prepare the drinks trolley. This is then taken to the door of each room bubble and the staff in that bubble will serve the drinks to the clients. Staff to bring own drinks or cups with them to sessions. 	All staff ensuring new PPE is used to serve drinks or assist with food. If clients fail to bring or provide their own utensils staff will provide them and	6



					 Any surfaces that are touched should be cleaned afterwards by staff. Clients will be required to bring their own packed lunch in a cool bag, clients will not be able to bring in food that requires reheating they will keep this on their person. Clients will take their own cups, lunch boxes and utensils home with them. Clients wishing to go outside to smoke or for fresh air will be directed to go at the designated time and will go out in their room bubble to avoid congestion in corridors and allowing for social distancing. They will be asked to stay within the allocated spaces. They will not be allowed to share lighters or cigarettes. 	ensure they are sterilized after every use. Any clients and staff leaving the room must wear PPE and sanitise their hands on return to rooms.	
Work vehicles	Close proximity to passenger Touching of surface areas Road Traffic Accident/ Breakdown	Work vehicles may be used by staff to enable them to visit clients. The larger vehicles (minibuses) can, in agreed circumstance, be used to collect three clients at a time for a session.	8	Clients Staff	 Work vehicles must be visually inspected before use to ensure safety. No more than 4 people from separate households can be in the minibus vehicles at any one time (1 driver and 3 passengers). The passengers must be seated at the very back of the vehicle to ensure maximum distance is maintained between driver and passengers. If staff are using their own vehicle to escort clients then they must ensure the client is in the back to ensure safe distancing If traveling with clients in personal vehicles PPE must be worn at all times. Journeys should be kept to a minimum length of time. Drivers must use antibacterial wipes to clean any surfaces/areas touched in the vehicles after use or before handover of vehicle. Windows can be open to give a good level of ventilation in the vehicles. 	Surfaces/areas of vehicles to be cleaned includes but not limited to:	6



Travelling in the community	Public Transport Other passengers Cross contaminatio n Members of public not adhering to social distancing	Clients/ staff may meet us at a location or hub, having boarded a bus independently for travel As of 15 June 2020 all passengers on public transport will be required to wear a face mask. Should staff, for any reason, have to use public transport they must ensure they wear their mask.	15	Clients Staff Public	 For those clients who have travelled by bus to meet staff at a location, remind them to wash their hands or use alcohol gel if they do not have access to soap and water Staff to, where possible, do not use the bus to travel to work or get to a session. Staff to make use of the work vehicles or own transport to arrive to sessions. Staff to change clothes before as soon as they enter the building if they have travelled by public transport 	
Illness - client	Cross contaminatio n Social distancing rules Mass self- isolation	If a client becomes unwell with any of the following: • new, continuous cough • high temperature • loss of, or change in, their normal sense of taste of smell (anosmia) they must be sent home and advised to follow the COVID-19: guidance for households with possible coronavirus (COVID-19) infection guidance In an emergency, call 999 if the client is seriously ill or injured or their life is at risk. Do not visit the GP, pharmacy, urgent care center or a hospital. https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-	12	Clients Client Household Staff Public	 Client should be moved, if possible, to a room where they can be isolated behind a closed door, with supervision from one other staff member. Until arrangements can be made for them to return home. If in an isolated room, a window should be open for ventilation. If it is not possible to isolate the client, they must be moved to an area which is at least 2-metres away from other people. Carers must be contacted immediately to collect the client. If the client requires use of the bathroom while waiting to be collected, they should use a separate bathroom to other clients if possible. The bathroom should be cleaned and disinfected using onsite cleaning products before being used by anyone else. PPE should be worn by staff caring for the client while they await If a member of staff has helped someone with symptoms, they do not need to go home unless they develop symptoms themselves or the client subsequently tests positive for COVID-19. 	



	settings/covid-19-decontamination-in-non-healthcare-settings			 Following use of a room for isolation purposes, guidance must be followed on the decontamination of the room. Following a client displaying symptoms compatible with coronavirus (COVID-19), they should be sent home and advised to self-isolate for 7 days and arrange to have a test to see if they have COVID-19. Their fellow household members should self-isolate for 14 days. If the client tests negative, they can return to sessions and their fellow household members can end their self-isolation. 	
Illness - staff Cross contaminatio n Social distancing rules Mass self- isolation	If a staff member becomes unwell with any of the following: • new, continuous cough • high temperature • loss of, or change in, their normal sense of taste of smell (anosmia), they must be sent home and advised to follow the COVID-19: guidance for households with possible coronavirus (COVID-19) infection guidance	12	Client Clients Household Staff Public	 The staff member must ring their manager/senior to report that they are displaying symptoms. If a staff member develops symptoms compatible with coronavirus (COVID-19), they should be sent home immediately and advised to self-isolate for 7 days and arrange to have a test to see if they have COVID-19. Their fellow household members should self-isolate for 14 days. Carers to be informed and clients who have worked with the staff member to return home and be observed for symptoms. If the staff member tests negative, they can return to running sessions and their fellow household members can end their self-isolation. 	8



Positive case of Covid-19 following attendance at hub	Death Minor/serious illness Mass self- isolation Closure of the hub	Following a session of contact, the staff member, client or any client who was part of a group is confirmed to have COVID-19.	16	Clients Clients Household Staff Public	 Staff member confirmed case If a staff member tests positive, any client/s they have worked with should be sent home and advised to self-isolate for 14 days. The other household members of the client/s do not need to self-isolate unless the client they live with subsequently develops symptoms. Headway must inform the correct authorities immediately of any confirmed cases during working hours. Client confirmed case If a client tests positive, the staff member supporting, and any other clients they have had contact with (if group working), should be sent home and advised to self-isolate for 14 days. The other household members of the staff member and/or client/s do not need to self-isolate unless the staff member or client they live with subsequently develops symptoms. Headway must inform the correct authorities immediately of any confirmed cases during working hours. 		12
Communal Toilets	Touch points Cross infection Cleaning procedure not followed	Staff must consider all surfaces will need cleaning with cleaning products provided following any staff or client use of the shared toilet facilities. Surfaces may include, but are not limited to: Door handles (interior and exterior) Wash basins Liquid soap dispenser Taps Toilet seat Toilet roll dispenser Light switches/pulls Toilet flusher/button	12		 Staff should avoid the use of toilet facilities at a client's home, unless essential. If essential, staff will make use of the handwashing facilities and follow guidance on handwashing to ensure risk reduction. Should staff have to use a client's toilet, they should ask carers / clients for cleaning products to clean all surfaces they have had contact with. Staff should avoid using a fabric hand towel to dry their hands; should no alternative be available, staff to use alcohol gel/rub which air dries. 1:1 or group support One client or staff member to access the toilet at any one time. 	Cleaning sprays must be sprayed onto surfaces and left in contact with the surface for at least 30 seconds before wiping clean. Signs to remind people about the guidelines for washing their hands.	8



		Hand dryers are present in all toilets in the hubs, staff must encourage clients to use these; fabric hand towels must not be available for clients to dry their hands on. PPE must be worn when cleaning shared toilet facilities and single use gloves disposed of immediately after use.			 Staff to monitor the clients they are supporting when using the toilets, reminding them to wash their hands, use the hand dryers (where available) or to use alcohol rub/gel if needed. Toilets must be cleaned after each use, by staff. Staff to wear PPE when cleaning the toilet areas; these are single use and must be disposed of immediately after use. Cleaning products available onsite must be used to clean surfaces and toilets, still complying with COSHH safety guidelines 		
Client assisted personal care needs	Toileting Cross contaminatio n Cleaning procedures not followed Social distancing difficult to adhere to	When working 1:1 or in a group, cleaning toilets after each client use must be considered in terms of the supervision of clients during this time.	8	Clients Staff	 For clients who cannot be left unsupervised safely, they must remain in your view. If this compromises the 1-metre distance, this must be for no longer than 15 minutes and PPE must always be worn (mask and gloves) by the staff member. Clients must wear PPE. PPE must be worn by staff when cleaning shared toilet areas. Toilet roll to be used to wipe off cleaning product residue from surfaces. Where cleaning cloths are used, they must be thrown away after every use. 	Toilets must be deep cleaned at the end of every day. This includes: • soap dispensers • All hard surfaces • Hand dryers • Tiles • Pipes • Floors • taps	6
Session resources	Shared equipment Cross infection Reduced activity programme	Activities will be planned and provided by staff during contact sessions. Staff must consider the risk of any activity they prepare and the viability of completing each activity with the least risk.	12	Clients Client Household Staff Public	 Home Visits For staff to plan to reduce the use of shared resources as much as possible: Staff should seek to prevent the sharing of stationery and other equipment where possible e.g. make use of client's stationery but wear single use gloves to handle. Shared materials and surfaces should be cleaned and disinfected after use. Gloves must be worn on a single-use basis when making use of a client's resource such as a card game. These must then be disposed of appropriately after use. 	Staff to speak with carers prior to sessions to see what resources they have available to reduce resources required to be taken with staff on home visits.	6



					 Contact sports such as sports or games which require passing an object using hands e.g. basketball, rounders, Frisbee etc. must be avoided. 		
Giving of 1 st Aid	Cross contamination Social distancing not adhered to	These exceptional circumstances may result in the 1-metre distance being compromised.	15		 1:1 or Group Support PPE must be worn by the staff at all times and by the client where possible All PPE must be disposed of after use. Prior to and after breaking the distance, staff are to wash hands or make use of alcohol gel/rub if soap and water is not available. A first aid kit is available in each staff bags. Staff are responsible for ensuring the contents of this is sufficient If medical emergency, which cannot be supported by staff alone or under 15 minutes, staff to call 999 emergency services for support. Clients who have known medical needs, e.g. require emergency medication, frequent seizures, should be considered for a 1:1 service to ensure safety. 	Additional first aid supplies will be available onsite; managers/seniors to ensure staff have access to these items when required. One fist aider is to be in each room bubble.	12
Use of Public Spaces/ Amenities	Members of the public Cross contaminatio n Social distancing not followed	As part of working in the community, staff will be supporting clients in various local areas, making use of each area's local assets such as fields/parks.	15	Clients Staff Public	 Staff to consider how busy the public spaces are and the level of risk when supporting clients in these areas. Public toilets must be avoided, due to the significant risk of infection that these present. Staff must consider their session planning in terms of toilet facilities and local amenities. Staff and clients should carry hand sanitizer with them as hand washing facilities will not be guaranteed. 		12
Telephones	Shared use Cross contaminatio n	Staff who are allocated phones will be able to keep these phones in their allocated bags, taking these home and keeping these for daily use. Staff should not use any phone that is not allocated to themselves.	8	Clients Staff	 Staff to ensure they take a work phone with them on contact sessions. Staff should NOT hand over their phones to another staff member /clients to use. An alternative phone should be found to use. This should then be cleaned. need to use the phone, 		2



					 antibacterial wipes must be used before and after handover. When staff use an office phone if not allocated to them, they must sanitise this at the end of call. 	
Weather	Affects session planning Sessions could be cancelled Sunburn	If Sessions are predominantly are taking place outside, therefore weather conditions need to be considered and clients and carers aware that a session may be cancelled should the weather be considered too adverse.	3	Clients Staff	 Client checklist to be sent home for contact sessions to ensure clients and carers consider outdoor clothing needed e.g. coats, anoraks, umbrellas. Sun cream to be applied prior to clients attending sessions. Staff to check weather forecast prior to sessions. 	2
Offices	Shared offices Social distancing Cross contamination Shared resources	Desks spaced at required distance Face coverings to be worn if sharing an office Current cleaning schedule Notices around the building as a visual reminder to all	12	staff	 All office spaces to be used by one allocated worker for that day where possible Office area to be thoroughly cleaned at the end of each working day. Desks to be moved to allow for the 1- meter social distancing guidelines. Screens to be in place if staff have to have face to face contact Offices to be well ventilated Face coverings MUST be worn if offices are occupied by more than 1 person 	8
Fire/Fire Alarm	Congregation of crowds Surfaces touched by masses and not cleaned Death	Fire procedure in place Preserving life from the immediate threat of death or serious injury takes precedence.	12	Staff clients	In each of the buildings each room bubble to be allocated a separate fire exit and meeting point. Staff supervising their room bubble to make sure clients know where Clients and staff to be allocated a set fire exit according to their bubble their exits are each day.	8



	Group gathering Communal use of kitchen equipment Spread of the virus	Antibacterial wipes are in place to wipe down all shared surfaces Normal cleaning schedule in place	12	Staff clients	 Only one member of staff in the kitchen at any one time Full PPE to be worn at all times and changed after each preparation of the drinks trolley. Any cutlery that is borrowed to be disinfected over night or washed in the dishwasher 	8
closure	Loss of clients when we re- open Loss of staff not coming back after re- opening Loss of income from lost placement/ Hours Loss of income from charity shops Future implications from government to recoup 200m deficit Reduction/en d of some services Unable to meet reserves (3-6mths operating costs)	Pandemic Procedure Revised Budget Redundancies Remote services/sessions New Income Generation plan Grant applications made where applicable Furlough scheme used	15		 Covid-19 Risk Assessment created Covid-19 budget/cashflow created Stringent HR policy in place Continual contact with clients to reassure we are still here New grant from government for retaining furloughed staff 	12



Loss of 1 or			
more of			
buildings			
Further staff			
cuts			

RISK GRADE	What this means
16 - 25	An unacceptably high risk, avoid, eliminate or STOP IMMEDIATELY
9 - 15	A medium to high risk, must be substituted, changed or CONTROLLED AS A PRIORITY
4 - 8	A moderate risk, MUST BE CONTROLLED
0 - 3	Trivial or low risk, acceptable, give training, supervision etc.

LIKELIHOOD	SEVERITY - RISK/CONSEQUENCE						
	1	2	3	4	5		
	INSIGNIFICANT	MINOR	MODERATE	MAJOR	CATASTROPHIC		
1	1	2	3	4	5		
RARE	LOW	LOW	LOW	MODERATE	MODERATE		
2	2	4	6	8	10		
UNLIKELY	LOW	MODERATE	MODERATE	MODERATE	MED/HIGH		
3	3	6	9	12	15		
POSSIBLE	LOW	MODERATE	MED/HIGH	MED/HIGH	MED/HIGH		
4	4	8	12	16	20		
LIKELY	MODERATE	MODERATE	MED/HIGH	EXTREME	EXTREME		
5	5	10	15	20	25		
ALMOST CERTAIN	MODERATE	MED/HIGH	MED/HIGH	EXTREME	EXTREME		

Written by: Becky Whenham Signed: R Whenham	Authorised by: Denise Taylor Signed: D Taylor	Date Implemented :	30/7/20	
Subject to review, monitoring and revision by: Becky Whenham		Every:	1	month or sooner if government guidance changes.

Risk Assessment Review: COVID – 19 Risk Assessment

Date of Review	Amendments (if applicable)	Recorded by	Authorised by
(12 monthly or sooner if			
changes required)			