



Specialist Autism Services

Covid-19 Secure-Site Risk Assessment-Building Based Support

Autism First

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FURTHER INFORMATION

This risk assessment should be read in conjunction with:

- Covid-19 Organisational Risk Assessment
- Covid-19 Member's Individual Risk Assessments
- Covid-19 Staff Individual Risk Assessments
- Covid-19 Activity Risk Assessments
- Outreach Risk Assessments (where applicable)

INTRODUCTION

Organisation: Specialist Autism Services

Location: Shipley (Autism First)

Activity: Working safely on-site during COVID-19 (Coronavirus)

Responsible Manager/s: Claire Hawker, Naomi Garrity, Lucy Middlebrook

Assessment By: Janet Bean – Director of Operations

Opening Date: To be confirmed

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Review Frequency: Monthly or as necessary in line with changes in law, restrictions, new information

RISK ASSESSMENT - POTENTIAL TRANSMISSION OF COVID-19 DUE TO VISITORS/CONTRACTORS ON SITE

What are the hazards?	Who might be harmed and how?	Evaluate the risks. What are we doing already?	What further action is necessary?	Action by whom?	Action by when?	Complete? Y/N
Potential transmission of COVID-19 due to visitors/contractors on site	Staff	Visits are by appointment only.				
	Parents/Carers	All non-essential visitors are not permitted to enter the building, this includes parents/carers/escorts/drivers.				
	Members	All essential visitors/contractors must complete the Visitor and Contractor Questionnaire sent by the Manager they are visiting, which includes a health declaration prior to the visit.				
	Visitors	All essential visitors follow the visitor's protocol which is laminated and displayed on the front door of the site and reinforced by Front of House staff. Which includes a health declaration and a temperature check on entry, wearing PPE for the duration of the visit, increased hand hygiene and social distancing. Visitor Poster				
	May contract the virus	Front of house staff follow and adhere to Covid-19 visitor protocol, laminated and displayed in reception. Visitor Protocol				
		FOH/reception staff inducted in visitor procedure.				

	<p>Visitors made aware that social distancing of 2 metres should always be maintained. Social Distancing Poster and floor markers are displayed in reception and throughout the building.</p>				
	<p>An electronic Test and Trace record is kept of all visitors and contractors.</p>				
	<p>Deliveries protocol in place to ensure delivery people do not enter. Poster displayed on entrance door Deliveries Poster</p>	<p>FOH/Staff to follow procedure and ensure social distancing is maintained</p>	<p>Staff</p>	<p>Ongoing</p>	

RISK ASSESSMENT – *POTENTIAL TRANSMISSION OF COVID-19 DUE TO CROSS-SITE WORKING*

What are the hazards?	Who might be harmed and how?	Evaluate the risks. What are we doing already?	What further action is necessary?	Action by whom?	Action by when?	Complete? Y/N
Potential Transmission of COVID-19 due to Cross-Site Working	Staff Members Cleaners	Cross site working is not allowed unless the staff have been home working for a continuous period of 14 days prior to working at another site and are symptom free.				
		Cross site meetings are held via Zoom.				
		Collection of any goods/ PPE from the central stock at Bradford must be made from outside the building if possible, e.g., the car park/front entrance.				
		Staff must gain prior authorisation from their Site Manager and follow the essential visitor's procedure if they must make an essential visit to another site.				
		Cleaners who clean for other organisations and then clean at our sites have been given a local induction and are aware they must adhere to Covid-19 Health and Safety Policy, COVID-19- Good Hygiene/ Infection Prevention and Control Procedures and wear disposable PPE as per PPE Quick guide.	Monitor adherence and cleaning standards	Site manager	Ongoing	
		SAS cleaner is trained in IPC and PPE donning and doffing.				

RISK ASSESSMENT – POTENTIAL TRANSMISSION OF COVID-19 DUE TO NUMBER OF STAFF AND MEMBERS ON-SITE AT ANY GIVEN POINT IN TIME

What are the hazards?	Who might be harmed and how?	Evaluate the risks. What are we doing already?	What further action is necessary?	Action by whom?	Action by when?	Complete? Y/N
Potential transmission of COVID-19 due to number of staff and members on site at any given point in time	Staff Members	Assessed the maximum number of staff and members that can safely work in allocated rooms/workshops whilst maintaining social distancing and using shared facilities				
		Site is spilt into 2 parts (bubbles) Staffing allocation template reflects maximum members and staff per day for each bubble: Bubble 1 – Oak: Walnut - 2 staff- 2 members. Oak - 4 staff- 4 members. Birch - 1 staff -1 member. Pine - 2 staff -2 members. Sensory room 2 - 1 staff-1 member Total: 10 staff, 10 members, Ops managers 2, Senior 1, 2 staff-Support/cleaning/entry and exit support staff. Maximum people: 25				
		Bubble 2 – Orchard: Yellow room - 1 staff- 1 member. Life Skills - 2 staff -2 members. Maple (+ Small room) - 2 staff -2 members. Sycamore - 3 staff 3 members. Total: 8 staff, 8 members,				

	<p>1- Front of House, 1- Ops Manager, 1-Senior, 1- floating-Cleaning/entry and exit support staff. Maximum people: 20</p>				
	<p>'Maximum number of people in this room' - Poster displayed on each door</p>				
	<p>Staff aware to remain in allocated area</p>				
	<p>Staff aware to support members to not breach the bubble. Procedure in place in the event of bubble breaches. Managers aware that any bubble breaches must be recorded for Test and Trace purposes and JB informed, dates, times, info re touching, PPE, social distancing, using Bubble Breach recording form.</p>				
	<p>Staff and Managers identified as not essential to work on site to work from home and continue alternative support provision, social distanced walks, 1:1 zoom calls, zoom workshops, videos, activity packs etc.</p>	<p>Reassess on a weekly basis which staff are required to operate the alternative support functions, utilise information from staff risk assessments.</p>	<p>Operations Directors</p>	<p>Ongoing</p>	<p>Ongoing</p>

RISK ASSESSMENT – *POTENTIAL TRANSMISSION OF COVID-19 DUE TO MEMBER SUPPORT NEEDS*

What are the hazards?	Who might be harmed and how?	Evaluate the risks. What are we doing already?	What further action is necessary?	Action by whom?	Action by when?	Complete? Y/N
Potential transmission of COVID-19 due to member support needs	Members Staff	Members identified who want to return as soon as possible. Priority members identified through consultation with members/parents/carers and social workers and using: Assessing priority members-RAG Room/areas identified for all members to allow for social distancing when they want to return.	Continue to review on a weekly basis through contact with social workers/wellbeing calls, identifying additional members who want to return/require additional alternative support.	Operations	Ongoing	Ongoing
		All members have a Covid-19 risk assessment in place that details support needs (Including personal care, medication, and Positive Behaviour Support needs) with measures to minimise the transmission of Covid-19, quality checked by management, shared with staff, staff aware to ensure measures are followed.				
		All activities that pose a risk of potential transmission of Covid-19 are risk assessed and measures agreed as per Activities Protocol- Activities protocol				
		Member's activity resources are in their own plastic lidded boxes. They are not shared and are disinfected after use by 1:1 staff. Protocol in place and followed by staff- Cleaning of Equipment and Resources V3				
		Member's Outreach/Transition Risk Assessments are completed, and measures identified for members who are receiving social distanced walks.				

	Outreach-Transitional support protocol followed by staff. Concerns raised with management. Outreach-transitional Support Protocol				
	Parents/carers and care management consulted re risk assessment measures prior to the member's return to site.		Operations	Before each member returns	Ongoing
	All members have a Transition Plan in place to support their return to a building-based service.				
	Members support needs are in line with their interests and Individual Learning Plan (ILP) Goals. Members have a Phase 1. ILP in place which identifies settling in goals (changes to routine, travel, environment, staff wearing PPE and anxiety management etc) and Covid-19 related goals (Social distancing, Hand hygiene, tolerating staff wearing masks and additional PPE, temperature checks.				
	We are continuing to offer alternative support provision including wellbeing calls, 1:1 zoom sessions and Workshops via Zoom, to include members on-site in different bubbles, members who are unable to return or are at home due to being unable to attend on all their usual days.				

Additional to the existing arrangements for the operation of the organisation as identified in the organisational risk assessment and the operation of the building described in this document, there are the following Covid-19 protocols in place which identify safe systems of work and are followed by staff:

1. [Arrival to the building](#)
2. [Taking routine temperatures](#)
3. [Personal Care Support Protocol](#)
4. [Cleaning of Personal Care spaces protocol](#)
5. [Cleaning of Equipment and Resources](#)
6. [Lunchtime support protocol](#)
7. [Medication Administration Support](#)
8. [Activities protocol](#)
9. [Toilet Use-Staff, Members, Visitors](#)
14. [Member Covid Absence](#)
19. [Cleaning an area when a staff/member with symptoms has left](#)
22. [NHS-Putting on and taking off PPE safely](#)
23. [What to do If someone has the symptoms of COVID19](#)
24. [Covid 19 Laundry Protocol](#)
26. [Outreach-Transitional support protocol](#)
27. [FSB-Handwashing and hand rub guidelines](#)
28. [Good Hygiene-Infection Prevention and Control protocols manual for AF staff](#)
[Good Hygiene Infection Prevention and Control procedures Manual -AF Managers](#)

The following Quick Guides have been produced for ease of information:

Quick Guides

3. Personal Care Support-Quick Guide

41. [On Entry-Donning Quick Guide](#)

42. [On Exit-Doffing- Quick Guide](#)

43. [Face shield cleaning-quick guide](#)

44. [Laundry-quick guide](#)

45. [Cleaning Instructions-Quick Guide](#)

46. [Donning-Doffing sign](#)

48. [PPE Quick Guide A3](#)

49. [Quick Guide to Cleaning an area when someone with symptoms has left](#)

50. [Toilet Use-Quick Guide](#)

51. [When to remove and replace your PPE-Quick Guide](#)

[Cleaning the sensory room protocol](#)

	Seniors and Managers provide Incident support, and Protocol in place AF Incident Procedure				
	Videos, social stories, photos, discussions, visual timetables provided to support understanding.				

RISK ASSESSMENT – POTENTIAL TRANSMISSION OF COVID-19 DUE TO SOCIAL DISTANCING MEASURES NOT BEING MANAGED AND ADHERED AT THIS SITE

What are the hazards?	Who might be harmed and how?	Evaluate the risks. What are we doing already?	What further action is necessary?	Action by whom?	Action by when?	Complete? Y/N
Potential transmission of COVID-19 due to social distancing measures not being managed and adhered at this site	Members Staff Essential visitors	Staff and members (parents/carers) made aware of the symptoms of Coronavirus and that they must stay at home should they or a member of their household have symptoms or if they have been contacted by NHS Test and Trace and must follow PHE guidance. Staff Absence Covid-19 protocol in place.	Send returning to building-based support letter to members/parents/carers to remind them	Site Managers	As they return	Ongoing
		Separate entrances/exits identified for staff and members each bubble.	Inform members/parents/carers and transport which entrance/exit they will be using	Operations	As they are transitioned back into site	Ongoing
		Staggered start and finish time to prevent queueing.	As more members resume building based support ensure sufficient time to prevent queueing for temp checks, donning mask (if able), and hand wash/sanitiser on entry and doffing mask and hand wash/sanitiser on exit.	Staff Operations	As more members return	Ongoing
		Cleaner arrives at a set time each day after members have left, wears PPE as per Quick Guide and is aware to social distance.				
		All clutter removed from site to allow space for social distancing.				

Social distancing markers visible at all entrances and exits and throughout the building including stairs and any pinch points.				
The buildings have been marked for one-way traffic where necessary, staff made aware during local induction.	Check weekly-replace any damaged or if removed by members.	Operations	Ongoing	Ongoing
Entry and Exit protocols in place to be followed by staff and members to prevent queuing. Staff allocated daily to ensure protocols are adhered to at entry and exit points.				
Only essential visitors/contractors allowed on site and must always socially distance, with all people. Visitor poster explains this expectation.				
All members encouraged to wear masks/face coverings on entry by allocated staff if they can tolerate them.				
Staff support members with increased hand hygiene throughout the day and catch it-bin it-kill it (when not wearing a mask).				
Members provided with prompting and accessible information, social stories, videos, PEC's discussions, and activities to help them understand and learn how to social distance.	Identify any members who need additional guidance resources, such as Social stories, activities/ discussions via Zoom, guidance videos.	Staff/Ops	Ongoing	Ongoing
IPC protocols adhered to by staff, staff allocated specifically to support this. Allocated staff conduct regular cleaning of touched areas throughout the day. Cleaning charts are used to record cleaning completed. Visual and verbal checks are made by managers and supervisors throughout and at the end of the day.				

	<p>Hand washing facilities are available in all toilet areas.</p> <p>70% Alcohol Hand Sanitiser is available in all designated areas at entrances and exits and in safe places throughout the building.</p> <p>Staff carry own Hand Sanitiser.</p> <p>Staff support members with increased hand hygiene, on entry and exit and throughout the day.</p>				
	Adequate ventilation via open windows.				
	<p>Smoking breaks are staggered where possible.</p> <p>Social distancing markers are in place in smoking areas.</p> <p>Staff aware to follow social distancing measures on leaving the building and in smoking area.</p> <p>Designated smoking area for each bubble.</p>				
	<p>Movement within the building:</p> <p>Reducing movement by:</p> <p>limiting the numbers of people in any room at any given point in time by restricting members and staff to allocated workshops/rooms (bubble areas) in the building.</p>				
	Each bubble has its own PPE store, cleaning equipment and COSHH store, Medication cabinet, toilet facilities and office.				
	Each bubble has its own PPE Donning and Doffing stations.				
	Each bubble has its own Cleaning Stations.				
	Each bubble has its own toilets and hand hygiene facilities.				

	<p>Activities take place in the room members are allocated to.</p> <p>Member's activity resources are in their own plastic lidded boxes in their room. They are not shared and are cleaned and disinfected after use by 1:1 staff.</p>				
	<p>A sensory room is available in each bubble, maximum people in room- 1 staff, 1 member. Sign on door. Availability of room is communicated to staff by WhatsApp to reduce unnecessary movement.</p>				
	<p>Members have their own allocated personal care supplies (if required) in the member's own container, with contents list (laminated), stored safely (not left in toilet areas) Restocked at the end of the day.</p>				
	<p>Members have their own box of resources in their area which are not shared and are cleaned and disinfected after use.</p>				
	<p>Staff's paperwork is completed electronically in the room staff are allocated to, or at home.</p>				
	<p>Offices</p> <p>Assessed the layout of desks to create zonal areas with sufficient separation (2 meters between closest seating for managers that are in on the same day).</p> <p>No face-to-face seating allowed unless 2 metres apart or more.</p> <p>Maximum number of managers in room- sign displayed.</p> <p>Additional chairs removed.</p> <p>Floor markers in place.</p>				

	Signage and markers are in place to discourage encroachment by colleagues.				
	Shared equipment is discouraged. Staff/Managers must not share equipment unless it has been cleaned and disinfected first. Signage in place by each desk.				
	70% isopropanol alcohol wipes are provided on every desk/workstation for staff to sanitise surfaces and work equipment such as keyboards/mice etc.				
	Staff/managers have individual hand sanitiser bottles to use at their desk/workstation when needed.				
	Printer/photocopier is available in each bubble located where social distancing can be achieved- markers also in place. Signage in place-staff must disinfect before and after use. Printing and the use of paper is limited.				
	Meetings All face-to-face meetings rearranged as Zoom meetings. If not possible then: Windows available and open when practically possible to allow maximum ventilation of room and the room allows for social distancing of 2 metres.				
	Maximum number of people in room adhered to and signage in place. IIR masks must be worn. Social distancing adhered to.				
	Outdoor meetings allowed where practically possible.				

	<p>Shared spaces/Common areas Staff and members are encouraged to take a break outside in the fresh air where practically possible.</p>				
	<p>Staff adhere to 2 metre social distancing in shared/outside areas-signage in place. Shared/outside space allocated to members daily for each bubble. Staff from different bubbles aware not to mix.</p>				
	<p>Members supported by staff to social distance when outside/in shared spaces. Staff reminded in morning meetings- social distancing agenda point</p>				
	<p>Outdoor equipment and seating cleaned and disinfected before and after each use by 1:1/allocated cleaning staff.</p>				
	<p>Staff and members bring their own food and drink in to work and eat in allocated room unless the member needs to be specifically allocated to a dining room. This is reflected in daily allocation. Dining rooms have maximum people in room signs and are adhered to. Dining rooms are laid out for social distancing.</p>				
	<p>Staff breaks take place in the room they have been working in after the member has left.</p>				
	<p>If a member cannot socially distance Risk assessments have been completed and measures are in place. Separate rooms have been allocated where possible.</p>				

	<p>Staff aware to:</p> <ul style="list-style-type: none"> •Limit the amount of physical contact to meet the members needs •Offer distraction/alternatives /reassurance to minimise contact. •Choose the lesser option e.g., high fives not hugs. •Support the member to wash hands regularly/use hand sanitiser/wipes. •Wear full PPE which is changed regularly. •Use social stories, videos, games etc to teach the member about social distancing where possible. •Distract members when they are attempting to approach others and support social distancing with others. 				
	<p>Fire evacuation</p> <p>A review of Fire evacuation procedures has taken place to reflect entrances and exits for bubbles.</p> <p>Assembly points are available for both bubbles and are big enough for social distancing of 2 metres to be achieved.</p>	<p>Fire drills to be carried out by staff and again when members have returned, procedures and PEEP's will be reviewed.</p>	Ops	March	
	<p>Toilets</p> <p>To allow for social distancing, the safe number of people who can use the toilet facilities at any one time has been identified.</p> <p>Maximum number of people signs displayed. Sinks are taped off. Vacancy/In use signs on doors. Staff aware.</p>				

RISK ASSESSMENT – POTENTIAL TRANSMISSION OF COVID-19 DUE TO LACK OF AWARENESS AND LACK OF GUIDANCE/SIGNAGE

What are the hazards?	Who might be harmed and how?	Evaluate the risks. What are we doing already?	What further action is necessary?	Action by whom?	Action by when?	Complete? Y/N
Potential transmission of COVID-19 due to lack of awareness and lack of guidance/signage	Staff Members Visitors	Members made aware of staff wearing PPE, the need to social distance, increase hand hygiene, and temperature checks.	Staff to continue to create individualised Social stories, activities/discussions via Zoom, photos and guidance videos for members.	Staff	Prior to each member returning	Ongoing
		Parents sent information re coronavirus and what to do if someone has symptoms	Send letter to parents re to contact management if their son/daughter/member of the household have symptoms or confirmed coronavirus, are contacted by NHS Test and Trace or told to quarantine prior to son/daughter resuming building-based service. Not to send son or daughter if ill.	Site Manager/JB	Prior to son/daughter resuming building-based service.	Ongoing
		Guidance and prompting provided for members when on site re social distancing, wearing of masks/face coverings, donning and doffing, hand hygiene and catch it-bin-it kill it.	Send Video of entry and exit protocols to members.	Ops	Prior to each member returning	Ongoing
		Posters and Quick Guides are displayed in relevant areas. Limited the number of posters displayed to prevent 'poster blindness'. Entrances-				

	<p>Donning Stations: PPE Quick guide table Entry -Quick Guide PPE (correct order for donning) Hand rub techniques-how to use hand sanitiser correctly Donning and Doffing NHS Poster Taking Routine Temperatures-Quick Guide</p> <p>Entrance doors: Visitor Poster and protocol in place Deliveries poster and protocol in place</p> <p>Throughout the building: Maximum people in room Hands Face Space Social distance floor markers Disinfect before and after use.</p> <p>Doffing Station: On Exit Doffing- Quick Guide Hand rub techniques-how to use hand sanitiser correctly. Donning and Doffing NHS Poster</p> <p>Covid-19 Information Board: Easy Read- If Alerted by Test and Trace Easy read- Get tested if you have symptoms Easy Read Covid Symptoms</p> <p>Male/Female Toilets: Handwashing-boy-superhero poster Handwashing-girl-superhero poster Princess Handwashing Poster NHS-Handwashing Poster</p>				
		Source visual posters if needed/if staff and members begin to get used	Ops/JB	When needed	Ongoing

		to them and stop 'seeing' them.			
	Protocols are laminated and put in a folder for staff to refer to when needed. One in each bubble.				
	Staff receive induction in Covid-19 protocols.				
	Managers and supervisors available throughout the day to provide guidance.				
	Morning and afternoon staff meetings with Managers and Supervisors.				
	Fortnightly cross- site Operations meetings to share good practice and concerns, Directors attend to provide guidance.				
	Regular updates from Government, PHE and NHS shared with staff and management team by email, Teams, SharePoint Covid-19 Information page.				
	Directors available daily for advice.				
	Management attends fortnightly Leeds Day Services Provider Forum-Reopening of day services, to share concerns and good practices				

RISK ASSESSMENT – *POTENTIAL FOR TRANSMISSION OF COVID-19 VIA UNCLEAN SURFACES*

What are the hazards?	Who might be harmed and how?	Evaluate the risks. What are we doing already?	What further action is necessary?	Action by whom?	Action by when?	Complete? Y/N
Potential transmission of COVID-19 via unclean surfaces	Staff Members Visitors	Only essential visitors/contractors allowed on site by appointment only.				
		Visitor Protocol in place, which includes hand hygiene, PPE and minimising touching things when in the building.				
		Visitors are always supervised and must remain in the area they are visiting/working.				
		Opening up protocol in place for unlocking doors with keypads, propping open authorised fire doors and opening windows to reduce contact with surfaces and ensure adequate ventilation. Shut down protocol in place. Manager allocated daily.				
		Staff are allocated and follow Infection prevention and control protocols in place which include enhanced cleaning regime of frequently touched items regularly throughout the day and at the end of each day. Quick Guides displayed in relevant areas. Protocols laminated and put in a folder available to staff (1 in each bubble).				
		The following cleaning protocols and quick guides are in place: -Covid-19 Good Hygiene Infection Prevention and Control Procedures- staff manual. -General Principles of Cleaning poster 4.Cleaning of Personal Care Spaces Protocol				

	<p>5. Cleaning of Equipment and Resources 6. Lunchtime support protocol 7. Medication Administration Support 9. Toilet Use-Member-Staff-Visitor-Protocol 16. Removal of contaminated waste 18. Eye protection -cleaning 19. Cleaning an area when a staff/member with symptoms has left 37.PPE waste disposal guidance 43. Face shield cleaning-quick guide 44. Laundry-quick guide 45. Cleaning Instructions-Quick Guide 49. Quick Guide to Cleaning an area when someone with symptoms has left 50.Toilet Use-Quick Guide</p> <p>Quick guides are laminated and displayed in relevant places throughout the building.</p>				
	IPC Cleaning check sheets are in place in each room which staff complete following cleaning.				
	Managers and supervisors check that cleaning has been completed (verbal and visual checks) to monitor effectiveness of cleaning regimes and protocols throughout the day.				
	Staff and SAS cleaner have received Infection Prevention and Control training and PPE Donning and Doffing training, donning and doffing of PPE and records are up to date.	Checks made on external cleaner’s training and cleaning company’s risk assessments and Health and Safety Policy and provision of PPE.	JB	Before external cleaning company resumes	

		Any external cleaners must have our Covid-19 local induction in IPC cleaning protocols							
	PPE, alcohol wipes, antiviral disinfectant disposable cloths and cleaning products are available in each bubble for staff and cleaner to use. Stock checks are carried out and cleaning stations restocked every evening. Stock is reordered weekly.								
	Staff and cleaner are aware of the contact time required for disinfectant, to read the instructions and leave it on surfaces long enough to kill the virus.								
	Donning and Doffing stations are kept separate to avoid cross contamination.								
	Waste is removed daily by allocated staff/cleaners.								
	Waste removal protocols in place: PPE waste disposal guidance Removal of contaminated waste protocol								
	Alcohol wipes/disinfectant wipes are placed next to the printers/photocopiers to allow staff to disinfect the keys on them before and after individual use. Signs displayed.								
	Deliveries protocol poster displayed and staff aware. All delivered goods are sprayed with disinfectant where possible/dated and stored for 72 hours before use.								

	Lift usage restricted to one person only and signage in place to use hand gel before and after using the lift.				
	Kitchen equipment and towels have been removed.				
	Lunchtime support protocol in place. Staff and members bring in their own food and hot drinks in flasks to minimise risk of transmission through shared equipment.	Review this protocol	Directors/Ops	4 weeks after service on site resumes	
	Members have their own box of activity resources in the room they are allocated to which are cleaned and disinfected after use by their 1:1 staff/allocated cleaning staff. Protocol in place- Cleaning of equipment and resources				
	Laundry Laundry facilities are to be used for members spare clothes which are kept on site only. Laundry protocol in place Laundry Protocol Quick Guide displayed.				
	Toilets Protocol in place includes wiping of touched areas before use with disinfectant wipes. Toilet Use-Staff, Members, Visitors Bins are available for used wipes.				
	Additional sanitising of toilet door handles, and toilet flush systems and seats will also be done 4 x per day as part of the regular daily cleaning schedule by staff, disinfectant wipes, hand wash and disposable hand towels will be restocked. This is allocated to staff daily on a rotational basis.				
	Replaced signing in sheets with online version.				

	Replaced visitor book with online Visitor Covid-19 Test and Trace record.				
	Removal of shared pens.				

RISK ASSESSMENT – POTENTIAL FOR TRANSMISSION OF COVID-19 DUE TO POOR HYGIENE

What are the hazards?	Who might be harmed and how?	Evaluate the risks. What are we doing already?	What further action is necessary?	Action by whom?	Action by when?	Complete? Y/N
Potential for transmission of COVID-19 due to poor hygiene	Staff Members Visitors	All staff have received Infection Control E-Learning training (includes handwashing techniques) Infection Control E-learning And completed questionnaire: Infection Control Questionnaire				
		Posters are displayed to reinforce awareness of handwashing techniques for staff, visitors and members. FSB-Handwashing and hand rub guidelines Handwashing-boy-superhero poster Handwashing-girl-superhero poster Princess Handwashing Poster NHS-Handwashing Poster				
		The following protocols and quick guides are in place: Arrival to the building Personal Care Support Protocol Toilet Use-Staff, Members, Visitors Exiting the building Quick Guides 3. Personal Care Support-Quick Guide 41. On Entry-Donning Quick Guide 42. On Exit-Doffing- Quick Guide 48. PPE Quick Guide A3 51. When to remove and replace your PPE-Quick Guide Catch it-Bin it- Kill it Posters displayed.				

	Hand wash and Paper towels are provided at all handwashing facilities for each bubble, supplies checked and restocked daily.				
	Tissues are available in all member areas/offices and bins available to collect used tissues.				
	Waste is removed daily. Protocol in place re: disposal of waste which includes advice on double bagging and daily disposal and disposal of waste if a person has symptoms. PPE and cleaning wipes-Waste Disposal				
	All staff wear disposable PPE including gloves as per PPE Quick Guide A3 and remove and replace regularly as per When to remove and replace your PPE-Quick Guide Hands are washed/sanitised before putting on and after taking off PPE.				
	Handwashing/sanitising is carried out by all staff, members and essential visitors on arrival and exit and throughout the day.				
	Staff ensure that hand hygiene techniques are promoted to members on entry, before and after activities, lunch and snacks, after using the sensory room, after using the outdoor area/equipment, after touching objects when outside, after using the toilet and on exit.				

RISK ASSESSMENT – *POTENTIAL TRANSMISSION OF COVID-19 DUE TO HANDLING OF GOODS AND ONSITE VEHICLES*

What are the hazards?	Who might be harmed and how?	Evaluate the risks. What are we doing already?	What further action is necessary?	Action by whom?	Action by when?	Complete? Y/N
Potential transmission of COVID-19 due to handling of goods and onsite vehicles	Staff	PPE is worn by staff receiving any business-related goods.				
		Persons delivering goods are not allowed to enter building.				
		Delivery protocol is in place and poster displayed on entrance doors. Staff aware of protocol. Deliveries Protocol Deliveries Poster				
		All goods are to be stored safely for 72 hours before use where possible or sprayed with disinfectant allowing for stand time before cleaning. Safe storage area allocated.				

RISK ASSESSMENT – POTENTIAL FOR TRANSMISSION OF COVID-19 THROUGH LACK OF PPE/PPE NOT WORN/PPE NOT CORRECTLY WORN

What are the hazards?	Who might be harmed and how?	Evaluate the risks. What are we doing already?	What further action is necessary?	Action by whom?	Action by when?	Complete? Y/N
Potential for transmission of COVID-19 through lack of PPE/PPE not worn/PPE not correctly worn/used PPE not disposed of correctly	Staff Members Visitors	All staff wear Personal Protective Equipment as per PPE Quick Guide table. PPE (including IIR masks, FFP3 masks, disposable aprons, disposable gloves and face shields) are available for staff to use.				
		All staff with individual risk assessments (in medically vulnerable category) wear additional PPE as required per risk assessment.				
		Donning and Doffing stations are available at entrances and exits at both bubbles.				
		Donning stations are stocked daily.				
		Stock inventory is updated by allocated staff.				
		Stocks of PPE are reordered on a weekly basis.				
		Guidance is displayed for staff to understand what PPE must be worn in different situations. PPE Quick Guide A3 Poster				
		Guidance is displayed for when PPE should be removed and replaced. When to remove and replace your PPE-A3 Poster				
Guidance is displayed for correct order of putting on and taking off PPE on entry and exit. (includes temp check on entry) Entry Quick Guide PPE Exit Doffing Quick Guide						

	Guidance is displayed at PPE stations NHS-Putting On and Removing PPE Correctly-A3 Poster				
	Staff aware to support Members who are able to wear masks/face coverings to do so correctly.				
	Visitor protocol in place which requires all essential visitors and contractors to wear PPE throughout the duration of their visit Visitor Protocol				
	Guidance is provided for visitors Visitor Poster . FOH supports with PPE on entry/exit.				
	PPE Donning and Doffing training has been delivered to all staff and records kept.				
	Support with donning and doffing is provided by allocated manager on entry. Staff observed to put on/take off PPE as per guidelines throughout the day.				
	All staff received local Induction and records kept. Local Induction includes: PPE Competency Check AF-Local Induction-Covid-19 protocols questionnaire				
	All staff have received Infection Control E-Learning (includes handwashing techniques) and records kept.				
	Hand sanitiser and handwashing facilities are available.				
	Disposal of used PPE prevents cross-contamination, staff, members and essential visitors follow PPE and cleaning wipes-Waste Disposal protocol for single use items.				
	Face shield cleaning Quick Guide and facilities in place. Face shield cleaning Quick Guide				

RISK ASSESSMENT – *POTENTIAL FOR TRANSMISSION OF COVID-19 VIA WORKFORCE*

What are the hazards?	Who might be harmed and how?	Evaluate the risks. What are we doing already?	What further action is necessary?	Action by whom?	Action by when?	Complete? Y/N
Potential for transmission of COVID-19 via workforce	Staff Members Visitors	Only identified staff working on site are allowed to enter building. Staff allocation reflects this.				
		No cross site working unless staff have spent 14 consecutive days working from home.				
		Staff encouraged to follow all current government guidance out of work. Updates are checked daily and those relevant are emailed to staff by the Director of Operations as they occur.				
		Staff wear PPE as per protocols and guidance and follow 2 metre social distancing guidance on site and during breaks where possible. This is monitored by managers and supervisors.				
		Lunch and breaks are staggered where possible.				
		Social distancing markers are in place in all areas.				
		Designated smoking area for each bubble.				
		Staff adhere to all infection prevention and control measures on site. Regular reminders are provided. This is monitored by managers and supervisors.				
		Staff aware of Safer Travel guidance and car sharing protocols.				

	Staff adhere to individual risk assessments if applicable. These are reviewed as necessary by HR/Line Managers following changes to guidance/personal circumstances.				
	Staff aware to stay at home and inform line manager if they or anyone in their household have symptoms/ have tested positive to the virus/ have been contacted by Test and Trace/ have returned from a holiday abroad. To follow PHE guidance and What to do is someone has symptoms-protocol				
	Absence protocol in place for staff Staff Absence Reporting Covid-19				
	Guidance for managers to escalate to Directors. Managers Guidance Reporting Covid Absence				
	Escalation to Directors via email and Managers Covid-19 Outbreak Investigation form				
	Directors aware to inform PHE and local authorities and provide further instructions to managers, dependant on the circumstances of the absence.				
	Weekly PCR testing undertaken by all staff working on site/with members.				
	All staff have been offered the vaccine				

RISK ASSESSMENT – *POTENTIAL FOR TRANSMISSION OF COVID-19 VIA WORK RELATED TRAVEL*

What are the hazards?	Who might be harmed and how?	Evaluate the risks. What are we doing already?	What further action is necessary?	Action by whom?	Action by when?	Complete? Y/N
Potential for transmission of COVID-19 via work related travel	Staff Members	All non-essential travel has been eliminated by ensuring meetings are held remotely.				
		Staff are aware to follow Safer Travel Guidelines.				
		Staff aware to travel to work independently by car, on foot or by cycle where possible, and to maintain 2 metre social distance.				
		Car sharing is not encouraged, staff identified as needing to car share have been allocated to the same bubbles and informed of the car sharing protocol Car Sharing Protocol .				
		Staff travelling by public transport are aware of relevant guidance , to sanitise hands on entry and exit and wear masks/face coverings. Staff are provided with IIR masks for use on public transport.				
		Staff who have multiple use of public transport during journey to and from work have been allocated to work from nearest site where possible.				
		Where possible staff allocation avoids staff travelling during peak times.				

RISK ASSESSMENT – *POTENTIAL FOR TRANSMISSION OF COVID-19 DUE TO LACK OF COMMUNICATION AND TRAINING*

What are the hazards?	Who might be harmed and how?	Evaluate the risks. What are we doing already?	What further action is necessary?	Action by whom?	Action by when?	Complete? Y/N
Potential for transmission of COVID-19 due to lack of communication and training	Staff Members Visitors	Weekly cross site Management Briefings via Zoom to share concerns and best practise.				
		Morning and afternoon staff meetings used to share concerns and best practise, provide guidance and support.				
		Regular memos sent to all staff via email.				
		Teams used to share information with staff in a concise and efficient manner.				
		FAQs have been produced for staff and shared on SAS sharepoint-Covid-19 risk assessments and information page.				
		Website has been redesigned to include specific guidance for staff and other stakeholders on Covid 19.				
		Staff consultations take place regularly with the Board of Directors.				
		Directors available to managers for advice daily.				
		Mental Health Awareness advice is available to all Line Managers who can then support staff via HR.				
		Welfare and update calls are taking place for staff self-isolating.				
		Risk assessments and protocols shared with staff team.				

	Quick Guides created to summarise key information from protocols, displayed in relevant areas of the building.				
	Protocols laminated and put in a folder for staff to access when needed.				
	Service Coordinators and Supervisors have been inducted in Covid-19 protocols by Service Manager.				
	Current staff working with members on site for emergency support have had local induction and practical demonstrations in Covid-19 protocols.				
	Covid-19 Good Hygiene and Infection Prevention and Control protocols manual developed and sent to staff. Training in Covid-19 protocols delivered, and records kept.				
	All staff have received Donning and Doffing training and records are kept.				
	Induction completed by all staff working on site. On site (practical) Local Induction includes: PPE Competency Check AF-Local Induction-Covid-19 protocols questionnaire On site practical demonstrations and competency checks for all staff by competent managers include: PPE Competency Check General Principles of Cleaning. Face Shield Cleaning. Taking someone's temperature.				

	Member arrival and exit. Laundry. Medication. Personal Care Support. Lunchtime support. Fire evacuation. Deliveries. Visitors.				
	Donning and Doffing video (refresher) watched monthly by all staff prior to collecting their testing kits.				
	All staff have received Infection prevention and control training and records are kept.				
	Reception staff follow visitor's protocols and ensure visitor reads the visitor poster. Visitor questionnaire provides information on our expectations when essential visitors/contractors are on site.				