

GENERAL HEALTH AND SAFETY RISK ASSESSMENT FORM

Site	Peter Scott House			Department	Campus Services			Version / Ref No.	1								
Activity Location	Edgbaston Park Hotel and Conference Centre			Activity Description	Return to commercial hotel operations risk assessment 60 Staff are currently actively working for Edgbaston Park Hotel since the Coronavirus Lockdown began. They are a mix of Managers and operational staff. 8 of these are regularly working from home.												
Assessor	Tracey Whyte			Assessment Date	15.09.2020		Date of Assessment Review	10.10.2020									
Academic / Manager Name	Richard Metcalfe			Academic / Manager Signature	Richard Metcalfe												
Hazard Assessment				Control Assessment							Actions						
Hazard Category	Hazards Identified	Who might be harmed? Staff Students Contractors Others	How might people be harmed?	Existing Control Measures			Initial Risk Rating			Are these adequate? Yes/No	Changes to/ Additional Controls	Residual Risk Rating			Owner	Due Date	Action Complete
							S	L	R			S	L	R			
Biological	Virus transmission in the workplace	Staff and guests	Exposure to respiratory droplets carrying COVID-19 from an infectious individual transmitted via sneezing, coughing or speaking.	<p>The controls and management arrangements for the psychological and wellbeing risks for the staff and a suspected case of Covid-19 within the building are included in the Edgbaston Park Hotel and Conference Centre Risk Assessment which has been shared with staff and an electronic copy is available on the hotel website.</p> <p>Social distancing: Peter Scott Checklist has been completed to identify the control measures to consider reducing the risk of workplace infections.</p> <p>This risk assessment will be shared with all staff and guests. Staff will be emailed a copy and updates and guests will be able to review it on the hotel website.</p> <p>The hotels on line FLOW training modules specific to Covid-19 have been provided and completed for all staff returning to work in the hotel.</p> <p>To help with consistency and adherence to building specific measures such as access routes, occupancy limits etc. staff from other departments accessing the building (such as cleaning and</p>			4	2	8	y		4	2	8			

Environmental	<p>due to lack of social distancing</p> <p>Virus transmission in the workplace due to lack of</p>		<p>COVID-19 from an infectious individual transmitted via sneezing, coughing or speaking.</p> <p>Exposure to respiratory droplets carrying COVID-19</p>	<p>Staff activities are segregated to promote social distancing rules including:</p> <ul style="list-style-type: none"> • Work stations moved or staff relocated. Provision of additional screens where needed to segregate people. Desks are arranged with employees facing in opposite directions. Display Screen Equipment (DSE) assessments reviewed and revised. • Areas of work marked out with floor tape to ensure adequate social distancing is in place. Visual management aids in place to remind people of the need for social distancing, • Headcount capacity to ensure social distances standards have been achieved have been set and displayed in shared rooms e.g. meeting rooms. • Capacity limits have been set for common facility areas (e.g. toilets, welfare areas etc.) These capacities are displayed on the entrance doors. • Staff encouraged to remain on-site and, when not possible, maintaining social distancing while off-site. • Where available safe outside areas used for break. • Social distancing is marked on the corridor floor prior to entry to the WCs (toilets). Smaller facilities has a one out one in policy. Additional signage has been placed on facilities doors to announce people's presence and to ensure hands are washed via correct method for handwashing prior to and after use. Building users are reminded to leave the facilities in a respectable condition. <p>Clear method of socially distancing of staff and guests in reception areas defined and implemented including:</p> <ul style="list-style-type: none"> • Queuing systems or processes • Social distancing in waiting and reception areas <p>Visits from people outside of the building are managed via remote connection/working where this is an option. Where this is not an option including engineering contractors, visitor arrangements have been revised to ensure social distancing and hygiene at all times.</p> <p>All corridors are :</p> <ul style="list-style-type: none"> • Marked in areas to ensure social distancing is adhered to (lines on floor). • Have a one way system around the building. • Corridors that are 2 m wide have a two way system of use, people using the corridor must stay to their left. • Where this is not possible keep left signs are displayed <p>Additional signage in corridors reminding staff about social distancing</p> <p>Information provided and signs displayed informing people to use the stairwells rather than lifts unless they have difficulty using the stairs. The maximum occupancy of the lift has been reduced to 1 person at a time and social distance marked on the floor. Once</p>																					
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	social distancing		infectious individual transmitted via sneezing, coughing or speaking.	<ul style="list-style-type: none"> • Re-organising pedestrian flows to be one way where appropriate. • PPE consisting of face masks and/or a clear visor that covers the face, and provides a barrier between the wearer and others, provided for staff working in close proximity to people and in particular a person's face, mouth and nose, for an extended period of time (the majority of the working day). Re-usable visors are cleaned and sanitised regularly using normal cleaning products. • Individuals (including staff, students, visitors and contractors), unless exempt, are required to wear face coverings, inside buildings where social distancing isn't possible and cannot be maintained. Information provided in local communications and local inductions and signs displayed informing people of the mandatory requirement to wear a face covering within the building. <p>Individuals have been reminded through <i>a tailored return to work induction</i> of how to use face coverings safely including the following:</p> <ul style="list-style-type: none"> • wash your hands thoroughly with soap and water for 20 seconds or use hand sanitiser before putting a face covering on, and before 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 <p>Hygiene guidance given such as avoiding touching eyes, nose, mouth and unwashed hands, cover your cough or sneeze with a tissue, and throw it away in a bin and wash your hands is given to all staff via the flow training modules prior to their return from furlough.</p> <p>Adequate training has been made on what PPE is required (i.e. gloves, masks, the correct donning/doffing of PPE and face fit testing. Government advice is followed: https://www.gov.uk/government/collections/coronavirus-covid-19-personal-protective-equipment-ppe https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings</p>																					
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Environmental	Virus transmission in the workplace	<p>including work surfaces, work equipment, door handles, banisters, chair arms and floors.</p> <p>Contact with an object that has been contaminated with COVID-19 and which</p>	<p>Individuals are reminded during their Flow training prior to returning from Furlough 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. Posters are displayed around the workplace in corridors, stairwells and upon entering the building.</p> <p>Individuals have been informed to check their skin for dryness and cracking and to inform their line manager or supervisor if there is a problem.</p> <p>To help reduce the spread of coronavirus (COVID-19) individuals are reminded <i>during their re-induction</i> of the public health advice: https://www.gov.uk/government/publications/coronavirus-outbreak-faqs-what-you-can-and-cant-do/coronavirus-outbreak-faqs-what-you-can-and-cant-do</p> <p>A review of the cleaning regime for the building/area to ensure controls are in place to keep surfaces clean and free of contamination, cleaning products have been made available to all occupants and everyone has been briefed during their re-induction on the importance of keeping surfaces and work equipment clean.</p> <p>Sharing of equipment is restricted where possible and cleaned / disinfected before and after use.</p> <p>Objects and surfaces that are touched regularly are cleaned frequently by the EPHCC housekeeping team, such as door handles and keyboards, and making sure there are adequate disposal arrangements.</p> <p>Internal doors that are not signed as fire doors (unless held open with a mechanical device) kept open whilst working (last person out shuts the doors) to prevent multiple people using door handles.</p> <p>There is clear desk policy in place to reduce the amount of personal items on desks and work benches to be practiced when the space is in use or not in use.</p> <p>There are cleaning procedures for goods and merchandise entering the site. Greater handwashing and handwashing facilities have been introduced for workers handling goods and merchandise and hand sanitiser provided where this is not practical. Non-business deliveries stopped, for example, personal deliveries to workers.</p> <p>Areas where people directly pass things to each other, for example office supplies, have been identified and ways to remove direct contact, such as using drop-off points or transfer zones have been introduced.</p>															
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	Exposure to Existing Hazards			Life-saving rules, will continue to be governed, enforced and communicated during COVID-19 in particular "speaking up" if they witness any unsafe behaviours, conditions or symptoms related to COVID-19.													
Environmental	Virus transmission outside of the workplace	Staff	Exposure to respiratory droplets carrying and contact with an object that has been contaminated with COVID-19.	<p>On the outside / approach to the building there is signage to warn all prior to entering this building social distancing is in place.</p> <p>There is signage advising staff and guests to wash their hands regularly and not to touch their face.</p> <p>Building access control is used during busy spells in the building i.e. one out one in and this is managed by the Duty manager via the main entrance.</p> <p>Controlled access and egress is monitored to ensure it is followed.</p>	4	2	8	Yes	No	4	2	8					
Mechanical	Machinery & Equipment	Staff	Exposure to respiratory droplets carrying and contact with an object that has been contaminated with COVID-19.	<p>Equipment and surfaces that are touched regularly will be frequently cleaned and disinfected.</p> <p>Sterilising chemicals and cloths are provided in the area to clean machines and equipment prior to the commencement of work and upon completion. If machines and equipment are shared, sterilising will be carried out between operations.</p>	4	2	8	Yes	No	4	2	8					
Environmental	Ventilation	Staff	Exposure to respiratory droplets carrying COVID-19.	<p>Recirculation of unfiltered air within the workplace and public areas has been avoided or reduced as far as possible.</p> <p>All ventilation has been serviced as required. All filters have been changed as required.</p> <p>Building users are encouraged where possible to ensure windows are open.</p>	4	2	8	Yes	No	4	2	8					
Environmental	Virus transmission in the hotel related to the guest population.	Staff/ Guests	Exposure to respiratory droplets carrying and contact with an object that has been contaminated with COVID-19.	<p>The hotels pre stay email to guests will inform them of the actions the hotel is taking in regards to COVID-19 and the risk assessment will be shared with guests on the hotels website.</p> <p>Marking points on the floors; a physical rope barrier will be used to ensure social distancing can be observed where queues are possible.</p> <p>The Duty Manager will monitor social distancing in the public areas to ensure it is being followed by guests.</p> <p>Signage encouraging the use of hand sanitiser, along with hand sanitising stations, are available in all public areas and immediately visible upon entry.</p>	4	2	8	Yes	No	4	2	8					

				<p>Guests will be asked to confirm they have been Symptom free for 14 days before check in.</p> <p>Breakfast will be served as room service.</p> <p>Breakfast will be operated as per the F&B Standard Operating Procedure, updated post COVID-19</p> <p>Social distancing floor markings will be present in the public areas.</p> <p>The frequency of cleaning guest rooms has been reviewed to take into account the different lengths of stay and the requirement for the guest to vacate their room whilst this is undertaken. Room collateral will be kept to a minimum and hand contact surfaces will be disinfected with the use of the fogging machine in the event of a suspected positive case of COVID19 from a guest.</p>											
Environmental	A Guest presenting with Symptoms of COVID-19	Staff/ Guests	Exposure to respiratory droplets carrying and contact with an object that has been contaminated with COVID-19.	<p>If a guest presents themselves with symptoms of COVID-19 or is asymptomatic but declares the need to self-isolate, they should be advised by the Duty Manager on shift to self-isolate according to current government guidance.</p> <p>If a guest is displaying signs of the Covid-19 virus while staying in overnight accommodation in Peter Scott House, they should immediately self-isolate where they are to minimise any risk of transmission, and request a test.</p> <p>If they are confirmed to have Covid-19, they should return home if they reasonably can. They should use private transport but only drive themselves if they can do so safely. If a guest cannot reasonably return home (for example because they are not well enough to travel or do not have the means to arrange transport), their circumstances should be discussed with NHS 111 and, if necessary, the local authority.</p> <p>This will apply to all guests that were present in the room. If the guest shows acute symptoms has breathing difficulties or their life is at potential risk, the hotel will seek medical help immediately.</p> <p>Hotel cleaning after a suspected contamination</p> <p>Personal protective equipment (PPE) The minimum PPE to be worn for cleaning an area or bedroom where a person with possible or confirmed coronavirus (COVID-19) has been, is disposable gloves, a face mask and an apron. Hands should be washed with soap and water for 20 seconds after all PPE has been removed. – This will be conducted by the hotels housekeeping team.</p> <p>Cleaning and disinfection</p>	4	2	8	Yes	No	4	2	8			

If the guest has stayed in a bedroom, no staff members should enter the bedroom until 72 hours have lapsed since the guest checked out.

Public areas where a symptomatic individual has passed through and spent minimal time, such as corridors, but which are not visibly contaminated with body fluids will be cleaned thoroughly as normal. All surfaces that the symptomatic person has come into contact with will be cleaned and disinfected, including:

- Objects which are visibly contaminated with body fluids
- All potentially contaminated high-contact areas such as bathrooms, door handles, telephones, lift buttons and TV remote controls.

The **Peter Scott House**, will use disposable cloths or paper roll and disposable mop heads, to clean all hard surfaces, floors, chairs, door handles and sanitary fittings, following one of the options below:

- A household detergent followed by disinfection with Ultra AX.

Any cloths and mop heads used will be disposed of and should be put into waste bags as outlined below.

When items cannot be cleaned using detergents or laundered, for example, upholstered furniture and mattresses, steam cleaning should be used.

Any items that are heavily contaminated with body fluids and cannot be cleaned by washing should be disposed of.

A fogging machine will be used as per its guidance during the cleaning of a room in which there has been a confirmed or suspected case.

Laundry

The hotel will wash items in accordance with the manufacturer's instructions. Use the warmest water setting and dry items completely. Dirty laundry that has been in contact with an unwell person can be washed with other people's items.

We will train the team to not shake dirty laundry, this minimises the possibility of dispersing virus through the air.

Peter Scott House, team will clean and disinfect anything used for transporting laundry with the hotels usual products, in line with the cleaning guidance above.

Waste

Waste from possible cases and cleaning of areas where possible cases have been (including disposable cloths and tissues):

1. Should be put in a plastic rubbish bag and tied when full.

Risk Assessment Guidance

Risk Scoring System

The scoring system is provided as a tool to help structure thinking about assessments and to provide a framework for identifying which are the most serious risks and why.

	Consequence / Severity score (severity levels) and examples of descriptors				
	1	2	3	4	5
Domains	Negligible	Minor	Moderate	Major	Catastrophic
Impact on the safety of staff, students or public (physical / psychological harm)	Minimal injury not requiring first aid or requiring no/minimal intervention or treatment. No time off work	Minor injury or illness, first aid treatment needed or requiring minor intervention. Requiring time off work for <3 days	Moderate injury requiring professional intervention Requiring time off work for 4-14 days RIDDOR / MHRA / agency reportable incident	Major injury leading to long-term incapacity/ disability (loss of limb) Requiring time off work for >14 days	Incident leading to death Multiple permanent injuries or irreversible health effects

Likelihood score	1	2	3	4	5
Frequency	Rare	Unlikely	Possible	Likely	Almost certain
Broad descriptor	This will probably never happen/occur	Do not expect it to happen/occur but it is possible it may do so	Might happen or occur occasionally	Will probably happen/occur but it is not a persisting issue	Will undoubtedly happen/occur, possibly frequently
Time-framed descriptor	Not expected to occur for years	Expected to occur at least annually	Expected to occur at least monthly	Expected to occur at least weekly	Expected to occur at least daily
Probability Will it happen or not?	<0.1 per cent	0.1–1 per cent	1.1–10 per cent	11–50 per cent	>50 per cent

The overall **level of risk** is then calculated by multiplying the two scores together.

$$\text{Risk Level} = \text{Consequence / Severity} \times \text{Likelihood (C x L)}$$

	Likelihood				
Likelihood score	1	2	3	4	5
	Rare	Unlikely	Possible	Likely	Almost certain
5 Catastrophic	5	10	15	20	25
4 Major	4	8	12	16	20
3 Moderate	3	6	9	12	15
2 Minor	2	4	6	8	10
1 Negligible	1	2	3	4	5

The Initial Risk Rating is the level of risk before control measures have been applied or with current control measures in place.

The Residual Risk is the level of risk after further control measures are put in place.