**East Herts Council**

**Risk Assessment**

**(2020)**

# (Remobilising East Herts Councils Customer Receptions - COVID-19)

| Assessment carried out by: | Service: | Date carried out: | Date of Review: |
| --- | --- | --- | --- |
| Peter Dickinson in conjunction with Ben Wood, Alex Cook, Debbie Handy, Sarah Bye | Human Resources and Organisational DevelopmentCommunications, Strategy and Policy (Receptions) | 24 May 2020 | Ongoing |

| **What is being assessed?** (For example the workplaces/an activity/use of equipment/conditions) *delete as appropriate* | **How was the assessment done?** (For example desktop exercise, site visit in consultation with employees, managers, safety representatives? | **Type of assessment** |
| --- | --- | --- |
| The remobilisation of East Herts Councils Customer Services Receptions for Wallfields, Hertford and Charringtons House, Bishop’s Stortford during the COVID-19 pandemic. | Desktop assessment, consultation and input from Head of Customer Services, Strategy and Policy, Customer Services Team.Assessment based on UK Government, HSE and PHE lockdown easing guidance and information as of May 2020. | **Dynamic Technical Assessment.** This assessment uses the risk rating score in **Appendix A** |

## -GUIDANCE NOTES-

Risk assessments must be produced for any activity that carries a risk of harm or injury to an individual.

Failure to undertake risk assessments and implement the actions identified can have significant consequences to you as the manager and the Council

* Lost time as a result of the effects of accidents, ill health related absence.
* Intervention by the Health and Safety Executive resulting in financial loss as a result of the Fee For Intervention (FFI) scheme and possible prosecution.
* Defending claims, reduction in premiums

However, it is not necessary to produce risk assessments for every work activity as this shifts focus away from successfully identifying and managing high risk activities and wastes valuable time.

Risk assessments should only include what could reasonably be expected to know – **you are not expected to anticipate unforeseeable risks.**

A risk assessment is simply a careful examination of the tasks and activities in your service that could cause harm to people, so that you can weigh up whether you have taken enough precautions or should do more to prevent harm. Workers and others have a right to be protected from harm caused by a failure to take reasonable control measures.

1. You must ensure that you only record factual hazards on the assessment. Please do not predict hazards or base your assessment on predicting possible outcomes.
2. Where hazards are identified you must record on the assessment what has been/will be done to control the risk.
3. Remember you are responsible for taking action and dealing with any issues arising in column D.
4. Please ensure that your risk assessment is dated.
5. Remember to review and update your risk assessment if:

(a) You have reason to believe it is out of date.

(b) You have made changes which invalidate the assessment

(c) You have introduced new procedures

(d) Please ensure your assessment has the correct date

(e) Please send completed assessments to the Health and Safety Officer. If you update an assessment a copy must be sent to the Health and Safety Officer.

## -IMPORTANT-

**To the reader**

A risk assessment, as in the case of most inspections or assessments is a snapshot of a specific point in time based on known facts and supported by evidence. A risk assessment cannot be based on any of the following statements:

“It could happen tomorrow”

“It might happen”

“It happened x years ago” etc.

“There’s a chance”

All activities, tasks, events, and life experiences carry an element of risk; it is not feasible to eliminate all hazards to create a risk free environment.

## -EXECUTIVE SUMMARY-

This assessment has been prepared in line with the Governments guidance for easing lockdown restrictions and moving toward re-opening workplaces. The assessment is designed to address the requirements for social distancing measures, hygiene controls and the safety of users of the Councils Co-working environment ‘Launchpad’

**Protecting people who are at higher risk**

Employees that fall within one of the two categories outlined will not be expected or required to return to the workplace under any circumstances. These categories have been determined by a panel of Expert doctors in England.

**Clinically extremely vulnerable individuals**, who are at higher risk of severe illness (for example, people with some pre-existing conditions, see **Appendix 1**) have been strongly advised not to work outside the home.

**Clinically vulnerable individuals** have been asked to take extra care in observing social distancing and should be helped to work from home, either in their current role or in an alternative role.

If clinically vulnerable, but not extremely clinically vulnerable individuals cannot work from home, they should be offered the option of the safest available on-site roles, enabling them to stay 2m away from others. If they have to spend time within 2m of others, a Person Specific Risk Assessment must be undertaken to carefully assess whether this involves an acceptable level of risk.

As for any workplace risk you must take into account specific duties to those with protected characteristics, including, for example, expectant mothers who are, as always, entitled to suspension on full pay if suitable roles cannot be found. Particular attention should also be paid to people **who live with** clinically extremely vulnerable individuals.

| **What are the hazards?** | **Who might be harmed?** | **What controls are currently in place to manage the risks?** | **Are further controls required to control the risk?** | **Person(s) responsible for taking action.** | **Date action completed.** |
| --- | --- | --- | --- | --- | --- |
| **Biological****COVID-19 Virus transmission between employees.** **Or transmission in the workplace through work activities and contact with contaminated surfaces.** **Transmission from co-workers / Launchpad members** | The impact of Coronavirus COVID-19 on the welfare of all employees and others covered by the Health and Safety at Work etc. Act 1974 and delivery of the business functions of East Herts. Employees who are unable to work from home or are returning under guidance.  | All employees have been fully briefed with current advice on staying protected through the Councils [Coronavirus Information Page](https://myeastherts.invotra.com/section/coronavirus-1)Adhere to social distancing guidelinesAntibacterial cleaning wipes, hand wash and sanitisers are provided for use. | Maintain regular communications and updates with Customer Services Team.Reception rota to be mindful of staff members who are living with someone in the vulnerable categoryMaintain robust hygiene measures, clean desks, keyboards, mouse, screen, chair including arms, etc. before and after use and regular handwashingAny employees experiencing any symptoms or who has come into contact with someone who has symptoms must inform their manager immediately.Maintain social distancing where possible | Head of Communications, Strategy and Policy.As above and Team Leaders to monitorAll employees are responsible for following the guidance and instructions from the Head of Communications, Strategy and Policy. | May 2020 Ongoing. To be reviewed as guidance is updated. |
| **Psychological/Employee Wellbeing****Personal Impacts** Uncertainty and absence of knowledge due to the unprecedented nature of the pandemic. Heightened anxiety. | The Impact of COVID-19 on the welfare of all employees and others covered by the Health and Safety at Work etc. Act 1974 and delivery of the business functions of East Herts.Employees who are unable to work from home or are returning under guidance | Access to the Employee Assistance Programme, available for all staff.Able Futures Mental Health Wellbeing Platform. Mental Health First Aiders.1-3-1 contact with Managers and Colleagues.NOTE: further support also available to members from East Herts UNISON. | Employees who fall under the following criteria **Clinically extremely vulnerable / Clinically vulnerable individuals** or caring for others in this category should declare their status to their manager.HR to compile responses to ensure support, guidance and advice is available as required. | All employees are responsible for following the guidance and instructions from:Leadership Team Service ManagersAdvice on Mental Health Wellbeing and Intervention provided by Human Resources. | May 2020 Ongoing. To be reviewed as guidance is updated. |
| **Psychological / Employee Wellbeing****Maintaining Employee wellbeing** | The impact of COVID-19 on the welfare of all employees and others covered by the Health and Safety at Work etc. Act 1974 and delivery of the business functions of East Herts.Employees who are unable to work from home or are returning under guidance. | Regular information sharing, to ensure all team members are aware of guidance and procedures. Employee Assistance and Wellbeing available on the Councils intranet [Wellbeing-hub](https://myeastherts.invotra.com/section/wellbeing-hub) | Agree regular means of communicating with LP team members. | Head of Communications, Strategy and Policy.Customer Services Team Leaders. | May 2020 Ongoing. To be reviewed as guidance is updated. |
| **Physical/Workplace Issues****Changes in Emergency provision****In workplaces and sites****First Aid****Fire Safety****Security****Lone Working** | The impact of Coronavirus COVID-19 on the welfare of all employees and others covered by the Health and Safety at Work etc. Act 1974 and delivery of the business functions of East Herts.Employees who are unable to work from home or are returning under guidance | 2x Caretakers First Aid at Work qualified.For Charringtons House ensure that at least 1x member of staff is First Aid Qualified.Caretakers issued with Lone Worker Devices monitored 24/7/365 by an Alarm Receiving Centre and mobile phones.Access to first aid kit and first aid room. | Changes to fire safety and first aid arrangements provision to mitigate reduced staff in buildings.Reinforce fire evacuation procedures and awareness of evacuation notices.Set building closing time. | Health and Safety OfficerTeam LeaderHead of ServiceLeadership Team | May 2020 Ongoing. To be reviewed as guidance is updated. |
| **Physical / Workplace Issues****Social Distancing** | The impact of Coronavirus COVID-19 on the welfare of all employees and others covered by the Health and Safety at Work etc. Act 1974 and delivery of the business functions of East Herts.Employees who are unable to work from home or are returning under guidanceCustomers in proximity to other customers and staff. | Guidance from UK Government.Notices provided to display in work areas.Social Distancing – Reducing the number of persons in any work area to comply with the 1-metre plus gap recommended by the Government.Taking steps to review work schedules including start and finish times/shift patterns, working from home etc. to reduce number of workers on site at any one time. Also relocating workers to other tasks. | **Re-purpose Workspace – Reconfigure****Co-working areas** Reconfiguring seating and tables to maintain spacing and reduce face-to-face interactions. This includes reduction of self-service stations. Currently there are 4 in CH along with one phone, in Wallfields there are 6 and 2 phones. Move to just 2 self-service stations in each reception centre and one phone.Remove modular seating units to prevent customers from breaking social distancing measures (no waiting area).Initial communications on remobilising reception areas will emphasise that receptions are open but operating with restrictions in place. Customers only to come in if they cannot resolve their issue over the phone or website (or do not have access to either). Self-service stations available but assistance will be limited.  | Head of Communications, Strategy and Policy.Team LeadersProperty Services TeamFacilities Management TeamHealth and Safety OfficerAll employees have a responsibility to comply with arrangements put into place. | May 2020 Ongoing. To be reviewed as guidance is updated. |
| **Physical/Workplace Issues****Workplace Hygiene** | The impact of COVID-19 on the welfare of all employees and others covered by the Health and Safety at Work etc. Act 1974 and delivery of the business functions of East Herts.Employees who are unable to work from home or are returning under guidanceCustomers using desktops, phones and kiosk keypad. | Premises are currently open and routinely checked by Caretakers.Enhanced and deep cleaning undertaken by contract cleaning services. | Frequent and enhanced cleaning of work areas and equipment between uses. Frequent cleaning of objects and surfaces that are touched regularly, such as door handles, and making sure there are adequate disposal arrangements. Clearing workspaces and removing waste and belongings from the work area at the end of the working day. Limiting or restricting use of high-touch items and equipment, for example, copier printers or whiteboards.Cleaning of surfaces, keyboards and phones after customer use.Signage on kiosk to encourage customer to use contactless payment where possible and avoid cash. | Facilities Management TeamCustomer Service Advisors | Prior to and when receptions are re-opened |
| **Physical/Workplace Issues****Access Managing Customers** | The impact of Coronavirus COVID-19 on the welfare of all employees and others covered by the Health and Safety at Work etc. Act 1974 and delivery of the business functions of East Herts.Employees who are unable to work from home or are returning under guidance.Launchpad members in proximity to one another |  | Display notices explaining the Councils guidance and procedures on social distancing and hygiene for customers on arrival.**One way customer flows:*** Wallfields:main entrance door for entry and exit through caretaker’s entrance (please note the other options would be to exit through the old building past the CAB offices but the exit has no ramp and it also means customers have access to a restricted part of the building).

 Floor stickers and signage in place to make flow-routes clearBarrier at each front entrance to separate customers who use kiosk from those using reception.Signage for no more than 2 people in reception at any one time. Controlled queuing floor sticker in placeNo staff to use main entrance to access or leave the buildingReception desks to have screens in place for any face to face interactions (for example standard queries, scanning documents, service requests). Continue to suspend “drop in services” for benefits, housing and planning until phase 2. | Head of Communications, Strategy and Policy.Team LeadersProperty Services TeamFacilities Management TeamHealth and Safety Officer | Prior to re-opening reception areas. |
| **Physical/Workplace Issues****Shared Workplaces (including with CAS).****At both sites this includes reception desks, cash-up, office and customer service desks.** | The impact of Coronavirus COVID-19 on the welfare of all employees and others covered by the Health and Safety at Work etc. Act 1974 and delivery of the business functions of East Herts.Employees who are unable to work from home or are returning under guidance. | Use of disposable gloves for handling documents and cheques.If kiosks re re-opened ensure staff use disposable gloves to handle cash.Employees may wish to make use of a face covering or face mask if they wish to do so.A face covering can be very simple and may be worn in enclosed spaces where social distancing isn’t possible. It just needs to cover your mouth and nose. It is not the same as a face mask, such as the surgical masks or respirators used by health and care workers. Similarly, face coverings are not the same as the PPE used to manage risks like dust and spray in an industrial context. | When managing the risk of COVID-19, additional PPE beyond what you usually wear is not beneficial. This is because COVID-19 is a different type of risk to the risks you normally face in a workplace, and needs to be managed through social distancing, hygiene and fixed teams or partnering, not through the use of PPE.The Council should not encourage the precautionary use of extra PPE to protect against COVID-19 outside clinical settings or when responding to a suspected or confirmed case of COVID-19.Supplies of PPE, including face masks must continue to be reserved for those who need them to protect against risks in their workplace, such as health and care workers, and those in industrial settings like those exposed to dust hazards.Disposable gloves for handling of documents and cash – follow guidance on disposal of used gloves. | Head of Communications, Strategy and Policy.Team LeadersProperty Services TeamFacilities Management TeamHealth and Safety Officer | Prior to re-opening reception areas. |

## -RIDDOR reporting of COVID-19-

You must **only** make a report under RIDDOR (The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013) when:

An unintended incident at work has led to someone’s possible or actual exposure to coronavirus. This must be reported as a dangerous occurrence.

A worker has been diagnosed as having COVID 19 and there is reasonable evidence that it was caused by exposure at work. This must be reported as a case of disease.

A worker dies as a result of occupational exposure to coronavirus.

**What to report**

**Dangerous occurrences**

Read about RIDDOR [regulation 7, Schedule 2 – Section 10 on legislation.gov.uk](http://www.legislation.gov.uk/uksi/2013/1471/schedule/2/made)

If something happens at work which results in (or could result in) the release or escape of coronavirus you must report this as a dangerous occurrence. An example of a dangerous occurrence would be a lab worker accidentally smashing a glass vial containing coronavirus, leading to people being exposed.

**Cases of disease: exposure to a biological agent**

Read about RIDDOR [regulation 9 (b) on legislation.gov.uk](http://www.legislation.gov.uk/uksi/2013/1471/regulation/9/made)

If there is reasonable evidence that someone diagnosed with COVID-19 was likely exposed because of their work you must report this as an exposure to a biological agent using the case of disease report. An example of a work-related exposure to coronavirus would be a health care professional who is diagnosed with COVID-19 after treating patients with COVID-19.

**Work related fatalities**

Read about RIDDOR [regulation 6 (2) on legislation.gov.uk](http://www.legislation.gov.uk/uksi/2013/1471/regulation/6/made)

**If a worker dies as a result of exposure to coronavirus from their work and this is confirmed as the likely cause of death by a registered medical practitioner, then you must report this as a death due to exposure to a biological agent using the ‘case of disease’ report form. You must report workplace fatalities to HSE by the quickest practicable means without delay and send a report of that fatality within 10 days of the incident.**

**Incidents involving members of the public**

Whilst the likelihood of encountering a member of the public is low due to lockdown and social distancing guidelines it is important to remain alert to the possibility that a person may come to the Councils offices, these may be homeless or displaced persons, people with mental health, alcohol or drug related health concerns. They may display or exhibit erratic, heightened emotional agitation, aggression or aggressive gesturing etc. If you find yourself faced with this situation you are advised to:

* Remove yourself to a place of safety from the vicinity of the individual, your safety is the main priority
* Contact the emergency services if the situation escalates. Do not confront or challenge individuals
* Report the incident to your manager and complete an incident/near miss report [**FOR Incident and Near Miss Report Form 2020.doc**](https://myeastherts.invotra.com/file/1182164/download/FOR%2520Incident%2520and%2520Near%2520Miss%2520Report%2520Form%25202020.doc)

**Considerations and Other Factors**

This assessment was based on the following criteria:

* Exposure to coronavirus (Covid-19) by the transmission of small droplets from the nose or mouth which are spread when a person with COVID-19 coughs or exhales. These droplets land on objects and surfaces around the person. Other people then catch COVID-19 by touching these objects or surfaces, then touching their eyes, nose or mouth. People can also catch COVID-19 if they breathe in droplets from a person with COVID-19 who coughs out or exhales droplets. This is why it is important to stay more than 1 meter (3 feet) away from a person who is sick.

## Appendix 1

**Who is ‘clinically extremely vulnerable’?**

Expert doctors in England have identified specific medical conditions that, based on what we know about the virus so far, place someone at greatest risk of severe illness from COVID-19.

Clinically extremely vulnerable people may include the following people. Disease severity, history or treatment levels will also affect who is in the group.

1. Solid organ transplant recipients.
2. People with specific cancers:
* People with cancer who are undergoing active chemotherapy
* People with lung cancers who are undergoing radical radiotherapy
* People with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
* People having immunotherapy or other continuing antibody treatments for cancer
* People having other treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors
* People who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs.
1. People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe chronic obstructive pulmonary (COPD).
2. People with rare diseases that significantly increase the risk of infections (such as SCID, homozygous sickle cell).
3. People on immunosuppression therapies sufficient to significantly increase risk of infection.
4. Women who are pregnant with significant heart disease, congenital or acquired.

People who fall in this group should have been contacted to tell them they are clinically extremely vulnerable.

If you’re still concerned, you should discuss your concerns with your GP or hospital clinician.