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| **Generic Risk Assessment**  |
| **Primary purpose of working on-site**  | Mitigation to control transmission of the COVID-19 virus within the workplace (non-lab) including direct and indirect risks.  | **Date** | **20/04/2021** |
| **School/Faculty/Directorate** | **B40 Prayer Room** | **Assessor** | **Tajwar Choudhury** |
| **Line Manager/Supervisor** |  | **Primary site/location** | **B40 Prayer Room** |
| **Task/activity/travel frequency** | 5 times daily, over 24 hours | **Task/activity/travel duration** | ***Daily Prayers*** |
| **Brief details/comments** | Some critical roles cannot be done remotely. A partial return to work on campus for employees is therefore required.  |

***This assessment is based on the default that those who can work from home should do so.***

***The following assessment should be reviewed and adapted to ensure it reflects local arrangements and activities. The risk hierarchy is applicable to determining measures to control all risks.***

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| **(1) Risk identification** | **(2) Risk assessment** | **(3) Risk management** |
| **Hazard** | **Potential Consequences** | **Inherent** | **Control measures (use the risk hierarchy)** | **Residual** | **Further controls (use the risk hierarchy)** |
| **Likelihood** | **Impact** | **Score** |  | **Likelihood** | **Impact** | **Score** |  |
| Use of communal spaces | Spread of Covid-19 among teamIll-health. Sickness absence. Spread of infection to others. Productivity loss.  | 3 | 5 | 15 | Implement social distancing:* Identified a separate entrance and exit to communal spaces if possible
* Implemented clear pathways and one way routes around communal areas - demarcate using signage and barriers
* Provide simple induction to remind employees of personal hygiene measures before and after every visit to the toilet, access to fresh water, printer area or other communal area
* Increased frequency of cleaning in communal areas e.g. corridors, doors, toilets
* Reminded employees to stay home if symptomatic
* Supervise employees in communal areas to ensure social distancing is observed
* Remind employees to bring in their own food as food preparation in kitchens will not be permitted.
* Provide means of opening door without touching it i.e. use of paper towels with bin outside
* Alcohol sanitiser stations located within communal areas.
* Social gathering amongst employees have been discouraged whilst at work.
* Staff should not shake hands as a greeting
* Anybody visiting site will be informed that they are not to enter if they’re experiencing COVID-19 symptoms and will be advised to self-isolate in line with government recommendations
* Staff avoid touching common pieces of equipment such as printers/scanners/faxes and use only dedicated work equipment on the workstations.
* Any use of common work equipment is restricted and managed.
 | 2 | 3 | 6 | Consider keeping doors open (where fire-safety requirements permit) to reduce need to touch doors after washing hands.Consider alternating the use of facilities to enable increased cleaning.Remind employees that they cannot use kitchens to prepare food.**Windows will be kept open whenever possible to aid ventilation.****Hand sanitising station has been installed.****Enforce 1m social distancing, with 1m gaps between each worshipper in each row. This gives a maximum capacity of 56. 2m distancing allows for 28 users at any one time.****Users will be encouraged to take weekly COVID testing.****N.B. majority of users currently are medical students/hospital staff, meaning many if not all are already vaccinated.** **Users will be asked to exit via the rear exit after the Maghrib (sunset) prayer if they wish to collect food from the marquee outside of B40. They will be released in groups of 6.****With regards to the Eid prayer, groups of 6 will have appropriate distancing between them. Attendees will be encouraged to take a COVID test beforehand. Groups will be dispatched in a staggered manner once the event concludes.** |
| Workplace hygiene | Ill-health due to viral spread. Sickness absence. Spread of infection to others. Productivity loss.  | 3 | 4 | 12 | * A deep clean of the building has been carried out before returning if required. (Not required if the building has been unoccupied for more than 72 hours)
* All hand contact points cleaned on a frequent basis throughout the day including, door handles, light switches, furniture, handrails, IT equipment, desks, phones, flush plates, taps, dispensers, toilets,
* Where practical, curtains and blinds are removed to minimise the areas where viruses can be difficult or time consuming to remove.
* Blinds be kept opened and locked if they cannot be removed.
* Rugs and mats are removed where safe to do so to make cleaning and disinfection of floors easier.
* Appropriate cleaning products are used during daily preventative clean regime.
* Persons undertaking the cleaning been instructed with clear safe usage instructions.
* The relevant Safety Data Sheet and COSHH assessment is provided for the substances in use
* Correct PPE is provided for the use of cleaning materials
* Appropriate cleaning products are provided, so that staff can frequently clean their workspaces during the day.
* Staff provided with waste bins lined with a plastic bag so that they can be emptied without contacting the contents.
* Staff are instructed that the emptying of bins and wastepaper baskets should be followed by hand washing.
 | 2 | 4 | 8 | **One person in the toilet/ablution facilities at a time. Provide antibacterial sprays/wipes to clean down after every use.** **Users will need to bring their own prayer mats and disinfect the water facility after they use. We can provide antibacterial spray to be kept next to the area. As for regular cleaning, this is something that has been done by the university (E+F) so we request an increase in frequency when these cleans happen.** |
| Employees identified as ‘clinically extremely vulnerable’ with severe chronic or underlying health condition / over the age of 70 | Severe illness if infected.Long term sickness absence.Risk of non-compliance with government guidance. | 5 | 5 | 25 | * Eliminate the work-based risk by allowing employees to continue to work from home in accordance with government guidance
 | 1 | 4 | 4 | **Vulnerable members of staff & students will be advised to use discretion (or to avoid wherever possible) when deciding whether to use the prayer room, unless they have received both vaccine doses. A group will be made and we will explicitly advise anyone in this group to avoid using the facility.** |
| Those identified as ‘clinically vulnerable’ such as expectant mothers, those with underlying conditions  | Unknown impact to the unborn baby.Severe illness to the mother if immune compromised due to pregnancy or other associated health condition.Likelihood of more severe illness for those in the older category.  | 5 | 4 | 20 | * Eliminate the risk by allowing them to continue to work from home if possible in accordance with government guidance.

If not possible:* Isolate the employee by providing separated workspace away from others but taking into account lone working requirements
* Minimise the time spent in the workplace
* Enable employee to work at different times/shifts to others
* Consider timetabling breaks to avoid contact with others
 | 1 | 4 | 4 | **Pregnant women will be requested to not use the prayer room. A group will be made and we will explicitly advise anyone in this group to avoid using the facility.** |
| Those identified by ONS data as more likely to get a severe illness from COVID-19 such as those in older age groups i.e. 60+, those from the BAME community | Likelihood of more severe illness for those in the older category.  | 4 | 4 | 16 | * Allow them to continue to work from home if possible

If not possible:* Isolate the employee by providing separated workspace away from others but taking into account lone working requirements
* Minimise the time spent in the workplace
* Enable employee to work at different times/shifts to others
* Consider timetabling breaks to avoid contact with others
 | 1 | 4 | **4** | **Older members will be requested to use at their discretion, we will advise those who have not been vaccinated yet to avoid using the prayer room until they have been. A group will be made and we will explicitly advise anyone in this group to avoid using the facility.** |
| Employees with visual, hearing or mobility impairments | Employee may be less adept at moving quickly; may not see or hear clearly; to help them avoid other people.May need assistance to evacuate a building which breaches social distancing.May need assistance to carry out certain tasks which breaches social distancing. | 4 | 3 | 12 | * Eliminate the risk by enabling continued work from home if possible
* Reduce the risk by ensuring special needs are taken into account in all areas the employee may need to use
* Ensure suitable access and egress
* Ensure pathways, one way systems etc are wide enough to allow for wheelchairs
* Ensure disabled toilets available nearby
* Ensure safe emergency evacuation without the need for a buddy in close proximity

If safe evacuation cannot be provided then employee must continue to work from home. | 1 | 4 | 4 |  |
| Fire/emergency evacuation  | Increased likelihood and spread of fire because reduced numbers of trained personnel to address it. Increased risk that not everyone will evacuate safely because of a lack of fire wardens. | 2 | 5 | 10 | * Please note: the Responsible Person for each building for the University will ensure that checks are carried out on your building when reopening in respect of fire safety arrangements. The Responsible Person could be NOC Estates, NHS, E&F or any other person responsible for building facilities management.
* The designated lead should check with E&F or the Responsible Person that these checks have been carried out and the building is fit to occupy
* The designated lead should undertake a visual inspection upon reopening of the building and highlight any concerns to the Responsible Person.
* Ensure high risk work is sufficiently supported on site with technical expertise.
* Line managers to ensure employees are supervised and that Health & Safety policy and housekeeping is adhered to.
* Ensure there is a system in place to monitor and control the number of people within the building and their location.
* Ensure trained fire wardens are included among those returning to work on campus.

Or* Ensure employees are aware of the need to self-evacuate upon hearing the alarm via the nearest safe exit route, irrespective of any existing ‘one way’ systems and must not re-enter the building until given the all clear by security.
 | 1 | 5 | 5 | **There is a first aid kit situated inside****The prayer leader has been given the fire warden training - Dr Gamal Moustafa, 2829878 (Chemistry)** |
| Water | Poor water management can lead to legionella – severe illness. Can make the employee much more susceptible to other illnesses and viruses such as Covid-19 | 3 | 5 | 15 | * Tanks, taps and shower outlets inspected and maintained.
* The designated lead should ensure that suitable controls are in place to reduce the risk of legionnaires disease by liaising with the Responsible Person or E&F.
* Showers must be run at maximum temperature for 5mins to eliminate standing water and eradicate legionella bacteria. Showers only to be used for emergency use.
* Drinking water facilities safe for use i.e. bottled water for personal use or provision of fresh cups with water cooler or tap
 | 2 | 4 | 8 | Employees to thoroughly wash hands before eating or drinking. **Water will not be used for drinking.** |

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| ***PART G - Approval*** |
| **Declaration by responsible manager:** I confirm that this is a suitable & sufficient risk assessment for the activities identified above and that all residual risks can be reduced to as low as is reasonably practicable (green). |
| **Signed** |  | **Print name** |  | **Date** |  |
| **Declaration by Head of School or Unit/Director of professional service:** I approve this assessment and accept the risks identified. |
| **Signed** |  | **Print name** |  | **Date** |  |

**Assessment Guidance**

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| 1. Eliminate
 | Remove the hazard wherever possible which negates the need for further controls | If this is not possible then explain why |  |
| 1. Substitute
 | Replace the hazard with one less hazardous | If not possible then explain why |
| 1. Physical controls
 | Examples: enclosure, fume cupboard, glove box | Likely to still require admin controls as well |
| 1. Admin controls
 | Examples: training, supervision, signage |  |
| 1. Personal protection
 | Examples: respirators, safety specs, gloves | Last resort as it only protects the individual |

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| Impact | Health & Safety |
| 1 | Trivial - insignificant | Very minor injuries e.g. slight bruising |
| 2 | Minor | Injuries or illness e.g. small cut or abrasion which require basic first aid treatment even in self-administered.  |
| 3 | Moderate | Injuries or illness e.g. strain or sprain requiring first aid or medical support.  |
| 4 | Major  | Injuries or illness e.g. broken bone requiring medical support >24 hours and time off work >4 weeks. |
| 5 | Severe – extremely significant | Fatality or multiple serious injuries or illness requiring hospital admission or significant time off work.  |

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| **LIKELIHOOD** | 5 | 5 | 10 | 15 | 20 | 25 |
| 4 | 4 | 8 | 12 | 16 | 20 |
| 3 | 3 | 6 | 9 | 12 | 15 |
| 2 | 2 | 4 | 6 | 8 | 10 |
| 1 | 1 | 2 | 3 | 4 | 5 |
|  | 1 | 2 | 3 | 4 | 5 |
| **IMPACT** |

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| Likelihood  |
| 1 | Rare  |
| 2 | Unlikely  |
| 3 | Possible  |
| 4 | Likely  |
| 5 | Very Likely  |

Risk process

1. Identify the impact and likelihood using the tables above.
2. Identify the risk rating by multiplying the Impact by the likelihood using the coloured matrix.
3. If the risk is amber or red – identify control measures to reduce the risk to as low as is reasonably practicable.
4. If the residual risk is green, additional controls are not necessary.
5. If the residual risk is amber the activity can continue but you must identify and implement further controls to reduce the risk to as low as reasonably practicable.
6. If the residual risk is red do not continue with the activity until additional controls have been implemented and the risk is reduced.
7. Control measures should follow the risk hierarchy, where appropriate as per the pyramid above.
8. The cost of implementing control measures can be taken into account but should be proportional to the risk i.e. a control to reduce low risk may not need to be carried out if the cost is high but a control to manage high risk means that even at high cost the control would be necessary.

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| ***PART H – Action Plan*** |
| **Risk Assessment Action Plan** |
| **Part no.** | **Action to be taken, incl. Cost** | **By whom** | **Target date** | **Review date** | **Outcome at review date** |
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| Responsible manager’s signature: | Responsible manager’s signature: |
| Print name: | Date: | Print name: | Date |

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| ***PART I - Approval*** |
| **Declaration by users:** I confirm that I have read this risk assessment, understand the controls outlined herein and will report to the responsible manager any incidents that occur or any shortcomings I find in this assessment. |
| **Signed** |  | **Print name** |  | **Job Title/Student (UG/PGT/PGR/PHD)** |  | **Date** |  |
| **Signed** |  | **Print name** |  | **Job Title/Student (UG/PGT/PGR/PHD)** |  | **Date** |  |
| **Signed** |  | **Print name** |  | **Job Title/Student (UG/PGT/PGR/PHD)** |  | **Date** |  |
| **Signed** |  | **Print name** |  | **Job Title/Student (UG/PGT/PGR/PHD)** |  | **Date** |  |
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| **Signed** |  | **Print name** |  | **Job Title/Student (UG/PGT/PGR/PHD)** |  | **Date** |  |