ROYAL VICTORIA HOTEL - COVID-19 RISK ASSESSMENT

ASSESSOR	Ann Owen	POSITION	Hotel Manager			
SCOPE OF ASSESSMENT & DESCRIPTION OF ACTIVITIES	Alert Level 0 Hotel operation – reasonab	Alert Level 0 Hotel operation – reasonable measures against Covid-19 infection spread.				
	Group 1 - Clinically extremely vulnerable	individuals	Group 6 - Agency staff			
	Group 2 - Clinically vulnerable individuals	S	Group 7 - Contractors			
PERSONS WHO MAY BE AFFECTED	Group 3 - Employees (in good health)		Group 8 - Delivery personnel			
AFFECTED	Group 4 – Guests		Group 9 - Agents & third-party operators			
	Group 5 - Non-resident customers		Group 10 - Other visitors (e.g. Officials, consultants, emergency personnel etc.)			
NATURE OF RISK COVERED BY RISK ASSESSMENT Risk - a situation involving exposure to danger			el through all operations and the spread of the virus between sibility of respiratory failure and other life-threatening conditions.			
KEY CONTROLS Detailed controls are listed in this assessment on a departmental level. However a summary of key controls is provided here for all hotel operations.	 Maintaining social distancing alw unless mitigation controls are in Effective and safe use of person 	ing throughout the operation, particularly of hand vays so that staff, guests place. al protective equipment to orking, with the exception	ation. I contact points throughout the operation. Is and third parties on site do not come within 2-metres of each other I throughout the operation. Use of face coverings for guests in public I son of when they are eating and drinking.			

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	Persons Affected (group categories where hotel operation has duty of care and potential control of hazard)		nazard Reference No.		
	Staff arrival at work		Groups 3 & 6		Covid-19 v6 - 4	
RISK RATING	Consequence (1-5)	Χ	Likelihood (1 - 5)	=	Risk Rating (1-25)	
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		2		8	
	Control Action Required		Person Responsible		Date of Completion	
CONTROL MEASURES	 Departments to stagger arrival and departure times for employees to reduce crowding at peak times. Staff entrance doors & barriers to be kept open where practicable. Signage to indicate staff must wear face covering when entering and exiting the hotel via the staff entrance and main entrance. Face coverings must be worn by staff working in any indoor area that is open to the public and where they are likely to come into contact with a member of the public. Eliminate touch pads, shared sign in arrangements and similar devices where practicable. If they cannot be eliminated staff to be instructed to immediately wash hands through signage. Signage should be used to remind staff that if they have Covid-19 symptoms they must not enter the hotel and should return home immediately and seek advice from NHS111. Symptoms are defined as a new, continuous cough (this means coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours - if you usually have a cough, it may be worse than usual) and/or a high temperature (this means you feel hot to touch on your chest or back - you do not need to measure your temperature) and/or a loss or change to your sense of smell or taste (this means you've noticed you cannot smell or taste anything, or things smell or taste different to normal). Signage to be displayed to advise staff that hand washing on arrival at work is mandatory. Signage should provide guidance on hand washing and minimum duration (20 seconds). On arrival at work mandatory hand washing must be carried out before any activities are undertaken. Return to work questionnaires to be used to verify that employees who have been absent where they live with someone who has been diagnosed with Covid-19 have self-isolated for a minimum period of 10 days and are symptomless. 					

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	ope	Persons Affected oup categories where hotel eration has duty of care and otential control of hazard)	I	azard Reference No.
	Use of locker rooms, WCs, and shower rooms		Groups 3 & 6		Covid-19 v6 - 5
RISK RATING	Consequence (1-5)	X	Likelihood (1 - 5)	=	Risk Rating (1-25)
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		3		12
	Control Action Required		Person Responsible		Date of Completion
CONTROL MEASURES	 Lockers are issued to a single member of staff only and are not shared. Employees entering locker rooms should maintain 2-metre separation unless mitigation measure such as avoiding face to face contact, limiting time, no speaking, wearing face covering. Hand sanitiser must be provided at the entrance/or just inside to all WC and shower facilities. Non-contact soap dispensers and taps should be provided, where practicable, in WC areas. WC area touch points should be sanitised regularly 				

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	ope	Persons Affected oup categories where hotel ration has duty of care and otential control of hazard)	н	azard Reference No.
	Access to staff restaurant and other rest areas		Groups 3 & 6		Covid-19 v6 - 6
RISK RATING	Consequence (1-5)	Х	Likelihood (1 - 5)	=	Risk Rating (1-25)
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		2		8
	Control Action Required		Person Responsible		Date of Completion
CONTROL MEASURES	 Staff restaurant and other rest area touch points are disinfected at a minimum 2 hourly or hourly if practicable, with 1,000 ppm available chlorine disinfectant (or approved product with supporting evidence from the supplier that it is effective against SARS-CoV-2) used on chairs, tables, door handles and plates and other hand contact points. Where the staff restaurant is used for rest breaks outside of any food service, this is permissible but social distancing must still apply. Signage must be used at entrances to staff restaurants and other rest areas to remind staff that hand washing is mandatory before and after using the facilities. Hand washing arrangements must be defined. Hand sanitiser must be provided at the entrance to the staff restaurants and other rest areas. Employees entering staff restaurants and other rest areas should always maintain 2-metre separation or 1 metre +, but only with mitigation measure such as avoiding face to face contact, limiting time, no speaking, wearing face covering. Face covering may only be removed when eating and drinking and must be replaced immediately afterwards. Departments to stagger break times to minimise the number of employees using the facilities at any one time. Non-staff personnel (e.g. contractors) should be prohibited from using the staff restaurant and rest areas. 				

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	ope	Persons Affected oup categories where hotel eration has duty of care and otential control of hazard)	Н	azard Reference No.
	Moving around the hotel including back of house and guest areas		Groups 3, 6, 7, 8, 9 & 10		Covid-19 v6 - 7
RISK RATING	Consequence (1-5)	X	Likelihood (1 - 5)	=	Risk Rating (1-25)
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		3		12
CONTROL MEASURES	 Control Action Required All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. Employees should maintain 2-metre separation, where practicable, when moving around the hotel. This includes separation between themselves and other employees and between guests and nonresident visitors. Employees must wear a face covering when moving around the Hotel (this includes guest and staff communal areas). Face coverings are not required in staff areas whilst eating or drinking in the canteen or at a workstation or in a team meeting provided 2 metre social distancing is in place. Signage must be used in back of house areas to advise that 2-metre social distancing should be maintained unless mitigation measure such as avoiding face to face contact, limiting time, no speaking, wearing face covering. Hand sanitiser to be provided in back of house areas at entrance points to guest and front of house areas. 	5	Person Responsible		Date of Completion

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	ope	Persons Affected oup categories where hotel eration has duty of care and otential control of hazard)	Н	azard Reference No.
	Use of office areas		Groups 3, 6, 7, 9 & 10		Covid-19 v6 - 9
RISK RATING	Consequence (1-5)	X	Likelihood (1 - 5)	=	Risk Rating (1-25)
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		2		8
	Control Action Required		Person Responsible		Date of Completion
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. Employees should maintain 2-metre separation, where practicable, in office unless mitigation measure such as avoiding face to face contact, limiting time, no speaking, wearing face covering. This includes separation between themselves and other employees and visitors Hand sanitiser to be provided at the entrance to each office area. Workstation mouse and keyboard should be disinfected using an alcohol based cleaner (e.g. minimum 60% alcohol or 70% isopropyl alcohol) before and after each use by the individual employee. Where workstations must face one another rather than be side by side a physical screen must be in place to definitively separate them. Efforts must be taken to separate workstations rather than screen and screening is a last resort.)			

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	ope	Persons Affected oup categories where hotel eration has duty of care and otential control of hazard)	Ŧ	azard Reference No.
	Staff meetings and contact with third parties (e.g. contractors, visitors etc.)		Groups 3, 6, 7, 9 & 10		Covid-19 v6 - 10
RISK RATING	Consequence (1-5)	X	Likelihood (1 - 5)	=	Risk Rating (1-25)
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		2		8
CONTROL MEASURES	Control Action Required All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. Sales visitors and non-essential meetings with third parties should be conducted using online meeting option where practicable. Where visitors are required to come to the then hosting employees should maintain 2-metre separation unless mitigation measure such as avoiding face to face contact, limiting time, no speaking, wearing face covering. A well-ventilated space should be utilised for meetings, where the 2-metre separation can be maintained. Hand sanitiser to be provided at the entrance to/or just inside each meeting area.	7	Person Responsible		Date of Completion

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	ope	Persons Affected oup categories where hotel eration has duty of care and otential control of hazard)	Н	azard Reference No.
DIOI/ DATING	Goods receiving	V	Groups 3, 6 & 8		Covid-19 v6 - 11
RISK RATING For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	Consequence (1-5) 4	X	Likelihood (1 - 5)	=	Risk Rating (1-25)
CONTROL MEASURES	 Control Action Required All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. Employees must maintain 2-metre separation in goods receiving. Signage must be used in goods receiving to advise that 2-metre social distancing unless mitigation measure such as avoiding face to face contact, limiting time, no speaking, wearing face covering. Markings can be used at the point of receipt on the floor to indicate where the delivery can be placed, and goods receivers should only approach the delivery when the delivery driver has stepped back to ensure the 2-metre social distancing rule. Hand sanitiser to be provided at the entrance to goods receiving. Goods receiving areas should be sanitised after each delivery with sanitiser. Goods receivers should be issued with, and wear, PPE. Face covering must be provided for use at all times. PPE should be worn when receiving a delivery. Any writing implement (e.g. pens) used to sign for receipt should be held only by the goods receiver and should not be given to or accepted from a delivery person. Each person in goods receiving should keep their own dedicated pen. Fresh food products arriving in sealed packaging (meat, fish, eggs, cheese, fruits, vegetables etc.) should be unpacked close to the relevant storage area (with boxes etc. then discarded as waste). 		Person Responsible		Date of Completion

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	ope	Persons Affected oup categories where hotel eration has duty of care and otential control of hazard)	Н	azard Reference No.
	Handling waste		Groups 3, 6, 7 & 8		Covid-19 v6 - 12
RISK RATING	Consequence (1-5)	X	Likelihood (1 - 5)	=	Risk Rating (1-25)
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		2		8
	Control Action Required		Person Responsible		Date of Completion
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. Employees must maintain 2-metre separation when handling waste. Waste must be cleared regularly throughout the working day and must never accumulate in work areas. Waste from cleaning tasks must be put in a plastic rubbish bag and tied when full. Waste should be stored safely and kept away from all members of the public. Waste must never be stored in communal areas. If waste is likely to have been clinically contaminated, then store it for at least 72 hours and then put in with the normal waste If clinical contamination is suspected and storage for at least 72 hours is not appropriate, arrange for collection as a Category B infectious waste either by the approved waste collection contractor or a specialist clinical waste contractor. They will supply you with orange clinical waste bags for you to place your bags into so the waste can be sent for appropriate treatment. Waste containers in guest areas should always be considered as potentially clinical waste. Hand sanitiser to be provided at the entrance to waste handling rooms. Waste handlers should be issued with, and wear, PPE. As a minimum this should be protective overalls or apron & protective gloves. Face covering must be worn. 				

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	ope	Persons Affected oup categories where hotel eration has duty of care and otential control of hazard)	Н	azard Reference No.
	Cleaning a guest bedroom		Groups 3 & 6		Covid-19 v6 - 13
RISK RATING For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	Consequence (1-5) 4	Х	Likelihood (1 - 5)	=	Risk Rating (1-25)
	Control Action Required		Person Responsible		Date of Completion
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. Employees must maintain 2-metre separation when carrying out housekeeping duties in rooms. If guest(s) are in a room then the room attendant must not enter and should return when the guest is absent. HM Government Guidance on Covid-19: cleaning in non-healthcare settings, updated 26th March 2020 must be considered in the development of specific housekeeping cleaning procedures. This can be found here: 				

If clinical contamination is suspected and storage for at least 72 hours is not appropriate, arrange for collection as a Category B infectious waste either by the approved waste collection contractor or a specialist clinical waste contractor. They will supply you with orange clinical waste bags for you to place your bags into so the waste can be sent for appropriate treatment. Waste containers in quest rooms should always be considered as potentially clinical waste. Room attendants must disinfect their protective gloves or remove PPE for disposal and wash their hands thoroughly and effectively, in accordance with the published guidelines for a minimum period of 20 seconds when entering a room to clean it. Following cleaning a room disinfection of gloves or hand washing should be undertaken again. Hand sanitiser to be provided on each service trolley. Left consumable items after quest (e.g. coffee sticks, milk pouches, tea bags etc. will be replaced when room is serviced on check out. Avoid creating splashes and spray when cleaning. Avoid shaking bed linen, towels, robes etc. Clean and empty vacuum cleaners used immediately after cleaning process. Empty inside a large waste sack to avoid risk of inhalation of material. Wear face mask, eye protection and protective gloves during process. Treat all vacuum waste as potentially contaminated. Ensure vacuum cleaners are in good repair with tight seals. HEPA

filter units should be used.

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	ope	Persons Affected oup categories where hotel ration has duty of care and otential control of hazard)	Hazard Reference No.
	Handling dirty laundry		Groups 3, 6, 8 & 9	Covid-19 v6 - 14
RISK RATING	Consequence (1-5)	X	Likelihood (1 - 5)	= Risk Rating (1-25)
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		3	12
	Control Action Required		Person Responsible	Date of Completion
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. Employees must maintain 2-metre separation when carrying out housekeeping duties in rooms. If guest(s) are in a room then the room attendant must not enter and should return when the guest is absent. HM Government Guidance on Covid-19: cleaning in non-healthcare settings, updated 26th March 2020 must be considered in the development of specific housekeeping cleaning procedures. This can be found here:			

with the chemical supplier, who should confirm and validate the effectiveness of the process. External laundry providers must provide written specification of their laundering process and confirm that it is effective against Covid-19. Contaminated pillows and duvets must be removed from service and cleaned and dried in hot air (e.g. tumble dryer). Clean and empty vacuum cleaners used immediately after cleaning process. Empty inside a large waste sack to avoid risk of inhalation of material. Wear face mask, eye protection and protective gloves during process. Treat all vacuum waste as potentially contaminated. Ensure vacuum cleaners are in good repair with tight seals. HEPA filter units should be used.	
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HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	Persons Affected (group categories where hotel operation has duty of care and potential control of hazard)		nd Hazard Reference No.	
	Cleaning public areas		Groups 3 & 6		Covid-19 v6 - 15
RISK RATING For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	Consequence (1-5) 4	X	Likelihood (1 - 5)	=	Risk Rating (1-25)
	Control Action Required		Person Responsible		Date of Completion
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. Employees should maintain 2-metre separation when carrying out housekeeping duties in public unless mitigation measure such as avoiding face to face contact, limiting time, no speaking, wearing face covering. Public area cleaning should be scheduled to avoid busy times when guests are less likely to be present. HM Government Guidance on Covid-19: cleaning in non-healthcare settings, updated 26th March 2020 must be considered in the development of specific housekeeping cleaning procedures. This can be found here: https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings/ Staff involved in cleaning are to be trained on the methodology for cleaning of different areas and the use of each chemical product. Housekeeping staff must be provided with minimum PPE of disposable gloves, apron, and face mask. These must always be carried on service trolleys. Wearing of disposable gloves and apron is mandatory. This PPE should be changed regularly and always when damaged. Face masks are provided, and their use is mandatory. Use approved disinfectant (COSHH assessment must be in place). Using a cleaning cloth, clean hard surfaces with approved disinfectant. Cleaning cloths should be disposable or cotton microfibre which are washed after use on a hot wash. Waste must be cleared regularly throughout the working day and must never accumulate. Never leave waste from cleaning tasks in public areas. Waste from cleaning tasks (including disposable cloths and tissues) must be put in a plastic rubbish bag and tied when full. It should be put in a suitable and secure place. Waste should be stored safely and kept away from all members of the public. If waste is likely to have been clinically contaminated, then store		Person Responsible		Date of Completion

clinical waste bags for you to place your bags into so the waste can be sent for appropriate treatment. Waste in containers in public areas should always be considered as potentially clinical waste. Public area cleaning staff must wash their hands thoroughly and effectively, in accordance with the published guidelines for a minimum period of 20 seconds before and after work. If hand washing facilities between PPE changes are not available, then hand sanitiser should be used. Hand sanitiser to be provided on each service trolley. Avoid creating splashes and spray when cleaning.
When items cannot be cleaned using detergents or laundered, for example, upholstered furniture, steam cleaning should be used.
 Clean and empty vacuum cleaners used immediately after cleaning process. Empty inside a large waste sack to avoid risk of inhalation of material. Wear face mask, eye protection and protective gloves during process. Treat all vacuum waste as potentially contaminated.
Ensure vacuum cleaners are in good repair with tight seals. HEPA filter units should be used.

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	Persons Affected (group categories where hotel operation has duty of care and potential control of hazard)		egories where hotel las duty of care and Hazard Refere	
	Cleaning WCs and other sanitary accommodation		Groups 3 & 6		Covid-19 v6 - 16
RISK RATING	Consequence (1-5)	Х	Likelihood (1 - 5)	=	Risk Rating (1-25)
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		3		12
	Control Action Required		Person Responsible		Date of Completion
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. Employees must maintain 2-metre separation when carrying out housekeeping duties in sanitary accommodation. Cleaning should be scheduled to avoid busy times when guests are less likely to require the facilities. If guest(s) are in the facilities, then the cleaner must not enter and should return when the facilities are clear. Before commencing cleaning, signage should be used to explain that the facilities are closed for cleaning. Cleaning should only take place in vacant facilities. HM Government Guidance on Covid-19: cleaning in non-healthcare settings, updated 26th March 2020 must be considered in the development of specific housekeeping cleaning procedures. This can be found here:		T erson responsible		Date of Completion

•	If clinical contamination is suspected and storage for at least 72 hours is not appropriate, arrange for collection as a Category B infectious waste either by the approved waste collection contractor or a specialist clinical waste contractor. They will supply you with orange clinical waste bags for you to place your bags into so the waste can be sent for appropriate treatment. Waste in containers in WC areas should always be considered as potentially clinical waste.	
•	Cleaning staff must wash their hands thoroughly and effectively, in accordance with the published guidelines for a minimum period of 20 seconds before and after work. If hand washing facilities between PPE changes are not available, then hand sanitiser should be used.	
•	Hand sanitiser to be provided on each service trolley.	
•	Avoid creating splashes and spray when cleaning.	
•	 Clean and empty vacuum cleaners used immediately after cleaning process. Empty inside a large waste sack to avoid risk of inhalation of material. Wear face mask, eye protection and protective gloves 	
	during process. Treat all vacuum waste as potentially contaminated.	
	Ensure vacuum cleaners are in good repair with tight seals. HEPA	
	filter units should be used.	

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	Persons Affected (group categories where hotel operation has duty of care and potential control of hazard)			Hazard Reference No.	
	Maintenance and repairs in a guest bedroom		Groups 3 & 7		Covid-19 v6 - 18	
RISK RATING	Consequence (1-5)	Χ	Likelihood (1 - 5)	=	Risk Rating (1-25)	
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		2		8	
	Control Action Required		Person Responsible		Date of Completion	
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. Engineering employees and contractors must maintain 2-metre separation when carrying out maintenance and repair duties in rooms. If guest(s) are in a room then the engineer or contractor must not enter and should return when the guest is absent. If emergency work is required in a room where the guest is present the Engineer or Contractor must always be accompanied to the room by the Duty Manager (maintaining the required 2-metre social distancing rule or 1 metre +, but only with mitigation measure such as avoiding face to face contact, limiting time, no speaking, wearing face covering). The Duty Manager must explain to the guest the reason why access is required and request that the guest leaves the room for reasons of social distancing during the work. Planned preventative maintenance is in place to minimise the number of maintenance and repair requests and potential need for access to rooms. The infection risk from Covid-19 following contamination of the environment decreases over time. It is not yet clear at what point there is no risk. However, studies of other viruses suggest that, in most circumstances, the risk is likely to be reduced significantly after 72 hours. Therefore if an area can be kept closed and secure for 72 hours, ahead of maintenance or repair works, this will reduce the risk as the amount of virus living on surfaces will have reduced significantly by 72 hours. Non-emergency maintenance of any occupied room where a guest is subsequently tested as positive for Covid-19. However where this is not the case the room should always be left for a minimum period of 72 hours before maintenance or repair works are undertaken. Engineering staff and third-party contractors must be provided with minimum PPE of disposable gloves, overalls, eye protection and face mask. Wearing of disposable gloves and overalls is					

- In guest rooms always avoid unnecessarily touching hand contact points.
- Never leave waste from maintenance or repair tasks in guest rooms.
- Waste from maintenance or repair tasks must be put in a plastic rubbish bag and tied when full. It should be put in a suitable and secure place.
- Waste should be stored safely and kept away from all members of the public.
- If waste is likely to have been clinically contaminated, then store it for at least 72 hours and then put in with the normal waste.
- If clinical contamination is suspected and storage for at least 72 hours is not appropriate, arrange for collection as a Category B infectious waste either by the approved waste collection contractor or a specialist clinical waste contractor. They will supply you with orange clinical waste bags for you to place your bags into so the waste can be sent for appropriate treatment.
- Engineering staff and contractors must wash their hands thoroughly and effectively, in accordance with the published guidelines for a minimum period of 20 seconds prior to going to a room to carry out any work. Following work in a room hand washing should be undertaken again if facilities on the floor allow. If not, then hand sanitiser should be used, and the Engineer or contractor should make their way to the Engineering Workshop to wash their hands.
- Hand sanitiser to be provided.
- Avoid creating splashes and spray when working, particularly in bathroom areas.
- Avoid shaking bed linen, towels, robes etc. when carrying out works in occupied or un-serviced rooms.
- Where a vacuum is used, then clean and empty vacuum cleaners used immediately after maintenance or repair process. Empty inside a large waste sack to avoid risk of inhalation of material. Wear face mask, eye protection and protective gloves during process. Treat all vacuum waste as potentially contaminated.
- Ensure vacuum cleaners are in good repair with tight seals. HEPA filter units should be used.
- Tools used should be disinfected using 1,000 ppm available chlorine before entering the room and immediately after the work has been completed. The minimum contact time should be ensured (check product being used). This includes tools provided by and used by contractors. A COSHH assessment must be in place.
- Tools should not be shared between engineers and contractors. If tools must be shared for some technical reason, then they must be disinfected first.

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	Persons Affected (group categories where hotel operation has duty of care and potential control of hazard)			
	Maintenance and repairs in public areas		Groups 3 & 7		Covid-19 v6 - 19
RISK RATING	Consequence (1-5)	X	Likelihood (1 - 5)	=	Risk Rating (1-25)
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		2		8
	Control Action Required		Person Responsible		Date of Completion
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. Engineering employees and contractors should maintain 2-metre separation when carrying out maintenance and repair duties in public areas or 1 metre +, but only with mitigation measure such as avoiding face to face contact, limiting time, no speaking, wearing face covering. Work should be planned and scheduled when areas are quiet, and guests are likely to be absent. Planned preventative maintenance is in place to minimise the number of maintenance and repair requests and potential need for emergency works. Engineering staff and third-party contractors must be provided with minimum PPE of disposable gloves, overalls, eye protection and face mask. Wearing of disposable gloves and overalls is mandatory. Gloves should be single use only and should be changed regularly and always when damaged. Face masks are provided, and their use is mandatory. Following maintenance and repair works in public areas cleaning should be subsequently carried out, ensuring disinfection of all hand contact points. When carrying out maintenance or repair duties, where possible open windows and allow increased ventilation of the area. Never leave waste from maintenance or repair tasks in public areas. Waste from maintenance or repair tasks must be put in a plastic rubbish bag and tied when full. It should be put in a suitable and secure place. Waste should be stored safely and kept away from all members of the public. If waste is likely to have been clinically contaminated, then store it for at least 72 hours and then put in with the normal waste. If clinical contamination is suspected and storage for at least 72 hours is not appropriate, arrange for collection as a Category B infectious waste either by the approved waste collection contractor or a specialist clinical waste contractor. They will supply you				

 Engineering staff and contractors must wash their hands thoroughly and effectively, in accordance with the published guidelines for a minimum period of 20 seconds prior to carrying out any work. Following work hand washing should be undertaken again if facilities allow. If not, then hand sanitiser should be used, and the Engineer or contractor should make their way to the Engineering Workshop to wash their hands. Hand sanitiser to be provided. Avoid creating splashes and spray when working. Where a vacuum is used, then clean and empty vacuum cleaners used immediately after maintenance or repair process. Empty inside a large waste sack to avoid risk of inhalation of material. Wear face mask, eye protection and protective gloves during process. Treat all vacuum waste as potentially contaminated. Ensure vacuum cleaners are in good repair with tight seals. HEPA filter units should be used. Tools used should be disinfected using 1,000 ppm available chlorine before entering the room and immediately after the work has been completed. The minimum contact time should be ensured (check
product being used). This includes tools provided by and used by contractors. A COSHH assessment must be in place. Tools should not be shared between engineers and contractors. If tools must be shared for some technical reason, then they must be disinfected first.

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	Persons Affected (group categories where hotel operation has duty of care and potential control of hazard)		re hotel are and Hazard Reference	
	Maintenance and repairs in back of house areas		Groups 3 & 7		Covid-19 v6 - 20
RISK RATING	Consequence (1-5)	X	Likelihood (1 - 5)	=	Risk Rating (1-25)
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		2		8
	Control Action Required		Person Responsible		Date of Completion
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. Engineering employees and contractors should maintain 2-metre separation when carrying out maintenance and repair duties in back of house areas or 1 metre +, but only with mitigation measure such as avoiding face to face contact, limiting time, no speaking, wearing face covering. Work should be planned and scheduled when areas are quiet and other employees are likely to be absent. Planned preventative maintenance is in place to minimise the number of maintenance and repair requests and potential need for emergency works. Engineering staff must be provided with minimum PPE of disposable gloves, overalls, eye protection and face mask. Wearing of disposable gloves and overalls is mandatory. Gloves should be single use only and should be changed regularly and always when damaged. Face masks are provided, and their use is mandatory. When third party contractors are coming on site, they should be informed beforehand to provide their own PPE (as per their own Company guidelines). Following maintenance and repair works in back of house areas cleaning should be subsequently carried out, ensuring disinfection of all hand contact points. When carrying out maintenance or repair duties, where possible open windows and allow increased ventilation of the area. Never leave waste from maintenance or repair tasks in back of house areas. Waste from maintenance or repair tasks must be put in a plastic rubbish bag and tied when full. It should be put in a suitable and secure place. Waste should be stored safely and kept away from all members of the public. If waste is likely to have been clinically contaminated, then store it for at least 72 hours and then put in with the normal waste. If clinical contamination is suspected and storage for at least 72 hours is not appropriate, arrange for				

 Engineering staff and contractors must wash their hands thoroughly and effectively, in accordance with the published guidelines for a minimum period of 20 seconds prior to carrying out any work. Following work hand washing should be undertaken again if facilities allow. If not, then hand sanitiser should be used, and the Engineer or contractor should make their way to the Engineering Workshop to wash their hands. Hand sanitiser to be provided. Avoid creating splashes and spray when working. Where a vacuum is used, then clean and empty vacuum cleaners used immediately after maintenance or repair process. Empty inside a large waste sack to avoid risk of inhalation of material. Wear face mask, eye protection and protective gloves during process. Treat all vacuum waste as potentially contaminated. Ensure vacuum cleaners are in good repair with tight seals. HEPA filter units should be used. Tools used should be disinfected using 1,000 ppm available chlorine before entering the room and immediately after the work has been completed. The minimum contact time should be ensured (check
product being used). This includes tools provided by and used by contractors. A COSHH assessment must be in place. Tools should not be shared between engineers and contractors. If tools must be shared for some technical reason, then they must be disinfected first.

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	Persons Affected (group categories where hotel operation has duty of care and potential control of hazard)		nd Hazard Reference No	
	Maintenance and repairs in plant rooms		Groups 3 & 7		Covid-19 v6 - 21
RISK RATING	Consequence (1-5)	X	Likelihood (1 - 5)	=	Risk Rating (1-25)
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		2		8
	Control Action Required		Person Responsible		Date of Completion
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. Existing PPE controls must be strictly adhered to. Work in plant areas may require PPE such as respirators, eye protection and hearing protection. This Covid-19 assessment is not intended to detract from those existing controls in any way. Lone working should be avoided in plant areas where it involves any high-risk work (e.g. work at height, work with electricity, work with hazardous chemicals etc.). But where lone work is not being undertaken engineering employees and contractors must maintain 2-metre separation when carrying out maintenance and repair duties in plant rooms. Work should be planned and scheduled when other employees do not need to access the plant room areas. Planned preventative maintenance is in place to minimise the number of maintenance and repair requests and potential need for emergency works. Engineering staff must be provided with minimum PPE of disposable gloves, overalls, eye protection and face mask. Wearing of disposable gloves and overalls is mandatory. Gloves should be single use only and should be changed regularly and always when damaged. Face masks are provided, and their use is mandatory. Contractors must have their temperatures taken before entering site. They must report to the loading bay and wait for further instruction. Following maintenance and repair works in plant rooms cleaning should be subsequently carried out, ensuring disinfection of all hand contact points. You must check the compatibility of any chemicals held in plant rooms and the disinfectant being used. There may be a need to remove chemicals in the short term to allow for effective disinfection, without risk of potential chemical reaction. When carrying out maintenance or repair duties, where possible allow for increased ventilation of the plant room area. This can be challenging in some plant rooms				

- If waste is likely to have been clinically contaminated, then store it for at least 72 hours and then put in with the normal waste.
 If clinical contamination is suspected and storage for at least 72 hours is not appropriate arrange for collection as a Category B infectious.
 - is not appropriate, arrange for collection as a Category B infectious waste either by the approved waste collection contractor or a specialist clinical waste contractor. They will supply you with orange clinical waste bags for you to place your bags into so the waste can be sent for appropriate treatment.
 - Engineering staff and contractors must wash their hands thoroughly and effectively, in accordance with the published guidelines for a minimum period of 20 seconds prior to carrying out any work.
 Following work hand washing should be undertaken again if facilities allow. If not, then hand sanitiser should be used, and the Engineer or contractor should make their way to the Engineering Workshop to wash their hands.
 - Hand sanitiser to be provided.
 - Avoid creating splashes and spray when working.
 - Where a vacuum is used, then clean and empty vacuum cleaners used immediately after maintenance or repair process. Empty inside a large waste sack to avoid risk of inhalation of material. Wear face mask, eye protection and protective gloves during process. Treat all vacuum waste as potentially contaminated.
 - Ensure vacuum cleaners are in good repair with tight seals. HEPA filter units should be used.
 - Tools used should be disinfected using 1,000 ppm available chlorine before entering the room and immediately after the work has been completed. The minimum contact time should be ensured (check product being used). This includes tools provided by and used by contractors. A COSHH assessment must be in place.
 - Tools should not be shared between engineers and contractors. If tools must be shared for some technical reason, then they must be disinfected first.

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	Persons Affected (group categories where hotel operation has duty of care and potential control of hazard)			Hazard Reference No.	
	Maintenance and repairs in external areas		Groups 3 & 7		Covid-19 v6 - 23	
RISK RATING	Consequence (1-5)	Χ	Likelihood (1 - 5)	=	Risk Rating (1-25)	
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		2		8	
	Control Action Required		Person Responsible		Date of Completion	
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. Engineering employees and contractors must maintain 2-metre separation when carrying out maintenance and repair in all external areas. Work should be planned and scheduled when the area concerned is quiet, and guests are likely to be absent. Planned preventative maintenance is in place to minimise the number of maintenance and repair requests and potential need for emergency works. Engineering staff and third-party contractors must be provided with minimum PPE of disposable gloves, overalls, eye protection and face mask. Wearing of disposable gloves and overalls is mandatory. Gloves should be single use only and should be changed regularly and always when damaged. Face masks are provided, and their use is mandatory. Never leave waste from maintenance or repair tasks in external areas. Waste from maintenance or repair tasks must be put in a plastic rubbish bag and tied when full. It should be put in a suitable and secure place. Waste should be stored safely and kept away from all members of the public. If waste is likely to have been clinically contaminated, then store it for at least 72 hours and then put in with the normal waste. If clinical contamination is suspected and storage for at least 72 hours is not appropriate, arrange for collection as a Category B infectious waste either by the approved waste collection contractor or a specialist clinical waste contractor. They will supply you with orange clinical waste bags for you to place your bags into so the waste can be sent for appropriate treatment. Engineering staff and contractors must wash their hands thoroughly and effectively, in accordance with the published guidelines for a minimum period of 20 seconds prior to carrying out any work. Following work hand washing should be undertaken again. After completing the task th					

 Tools used should be disinfected using 1,000 ppm available chlorine before entering the room and immediately after the work has been completed. The minimum contact time should be ensured (check product being used). This includes tools provided by and used by contractors. A COSHH assessment must be in place. Tools should not be shared between engineers and contractors. If tools must be shared for some technical reason, then they must be disinfected first. Work equipment such as lawn mowers and plant used externally should be disinfected using 1,000 ppm available chlorine before and immediately after the work has been completed. The minimum contact time should be ensured (check product being used). This includes tools provided by and used by contractors. A COSHH
assessment must be in place.
Tools should not be shared between engineers and contractors. If tools must be shared for some technical reason, then they must be disinfected first.

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	ope	Persons Affected (group categories where hotel operation has duty of care and potential control of hazard)		ind Hazard Reference No.	
	Use of work equipment		Groups 3, 6, 7 & 8	Covid-19 v6 - 26		
RISK RATING	Consequence (1-5)	Х	Likelihood (1 - 5)	=	Risk Rating (1-25)	
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		3		12	
	Control Action Required		Person Responsible		Date of Completion	
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. All staff and any third-party contractors must wash their hands thoroughly and effectively, in accordance with the published guidelines for a minimum period of 20 seconds prior to carrying out any work, particularly when handling any work equipment. Following work hand washing should be undertaken again if facilities allow. If not, then hand sanitiser should be used, and the employee or contractor should make their way to the nearest washroom to wash their hands. Work equipment should not be shared where practicable. If it does have to be shared, then minimise the number of persons who use it. Avoid "borrowing" equipment by separate departments. Work equipment should be sanitised between use. Work equipment should not be shared between the hotel and third-party contractors. If tools must be shared for some technical reason, then they must be disinfected first. Where work equipment does need to be passed from one person to another this must never be by direct contact. Drop off points or transfer zones should be established. 	3				

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	Persons Affected (group categories where hotel operation has duty of care and potential control of hazard)		Hazard/Activity (group ca operation potentia		Hazard/Activity (group categories where hotel operation has duty of care and potential control of hazard)			Hazard Reference No.		
	Guest and visitor arrival at hotel		Groups 3, 4, 5 & 10		Covid-19 v6 - 27						
RISK RATING	Consequence (1-5)	Χ	Likelihood (1 - 5)	=	Risk Rating (1-25)						
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		3		12						
	Control Action Required		Person Responsible	l	Date of Completion						
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. Shaking hands is strictly prohibited. Direct contact with a guest is strictly prohibited except for a medical emergency, when a first aider can be called to assist. Tipping by guests must not involve direct contact at any time. Staff should open the hotel entrance doors for guests to eliminate the need for the guest to have to touch the door. Guests entering public areas of the hotel should wear a face covering. Luggage handles or items that may be damaged by wet spray can be cleaned using an alcohol based cleaner (e.g. minimum 60% alcohol or 70% isopropyl alcohol) before being handled, or alternatively staff should sterilise or wash their hands before handling luggage. If using disposable sterile gloves, they should be worn as single use only. Trolleys, with handles disinfected before each use, should be utilised to minimise hand contact. Staff greeting and assisting guests must report any obvious sign of a guest being unwell with symptoms of Covid-19 (obvious fever or significant persistent cough) to Duty Manager for further investigation. Guest should not at this stage be approached regarding their health. Staff greeting and assisting guests must wash their hands thoroughly and effectively, in accordance with the published guidelines for a minimum period of 20 seconds after each guest arrival. If facilities are not immediately available, then hand sanitiser should be used, and the employee should then make their way to the nearest washroom to wash their hands. Work equipment should not be shared where practicable. If it does have to be shared, then minimise the number of persons who use it. Avoid "borrowing" equipment by separate departments (e.g. for luggage handling). Work equipment should be disinfected using 1,000 ppm available chlorine before each use. The minimum conta										

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.			(group categories where hotel operation has duty of care and potential control of hazard)			
	Check in/out		Groups 3, 4, 5 & 10		Covid-19 v6 - 28	
RISK RATING	Consequence (1-5)	X	Likelihood (1 - 5)	=	Risk Rating (1-25)	
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		3		12	
	Control Action Required		Person Responsible		Date of Completion	
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. Signage should be considered at each entrance to ask customers with symptoms not to enter the hotel, and to remind both staff and customers to always keep 2-metres from other people wherever possible and for guests to wear a face covering in public areas. Employees must wear a face covering when moving around the hotel, spa etc. (This includes guest and staff communal areas). Face coverings are not required in staff areas whilst eating or drinking in the canteen or at a workstation or in a team meeting provided 2 metre social distancing, or with mitigation is in place. Hand sanitizer to be placed in all high traffic public area points (e.g. reception, concierge etc.). This should be located behind the reception counters for staff use and at a distance at least 2-metres from staff for guest use. Where practicable non-contact sanitiser dispensers should be considered in public areas. If feasible, you should also install plexiglass barriers at all points of regular interaction to further reduce the risk of infection for all parties involved, cleaning the barriers regularly. You should still advise staff to keep 2-metres apart as much as possible. Guests will be arriving from various parts of UK and, when travelling restrictions allow, from overseas. All required documentation including forms, room keys and guidance information (letter from GM) should be prepared in advance where practicable. This will help to ensure minimal contact between guest and hotel staff. For payment allow the guest to insert and remove their own credit card into EPoS (point of sale terminal) devices. If guests pay with cash, then the staff member should wash their hands immediately after the transaction has been completed. Clean the EPoS device after each transaction with approved disinfectant or an alcohol based cleaner (e					

answer before leaving the corridor. Shaking hands is strictly prohibited. Direct contact with a guest is strictly prohibited except for a medical emergency, when a first aider can be called to assist. Tipping by guests must not involve direct contact at any time. Luggage handles or items that have not previously been handled by hotel team that may be damaged by wet spray can be cleaned using an alcohol based cleaner (e.g. minimum 60% alcohol or 70% isopropyl alcohol) before being handled, or alternatively staff should sterilise or wash their hands before handling luggage. If using disposable sterile gloves, they should be worn as single use only. Trolleys, with handles disinfected before each use, should be utilised to minimise hand contact. Staff greeting and assisting guests must report any obvious sign of a guest being unwell with symptoms of Covid-19 (obvious fever or significant persistent cough) to Duty Manager for further investigation. Guest should not at this stage be approached regarding their health. Work equipment should not be shared where practicable. If it does
have to be shared, then minimise the number of persons who use it. Avoid "borrowing" equipment by separate departments (e.g. for luggage handling). • Work equipment should be disinfected using 1,000 ppm available
chlorine before each use. The minimum contact time should be ensured (check product being used). A COSHH assessment must be in place.

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	Persons Affected (group categories where hotel operation has duty of care and potential control of hazard)		Hazard Reference No.	
	Use of guest lifts		Groups 3, 4, 5 & 10		Covid-19 v6 - 29
RISK RATING	Consequence (1-5)	Χ	Likelihood (1 - 5)	=	Risk Rating (1-25)
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		3		12
	Control Action Required		Person Responsible		Date of Completion
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. Where possible staff should not use guest lifts and should utilise staircases provided. If directing a guest to another level, they should be assisted with the lift but then allowed to travel on their own, whilst the employee arranges to meet them at the required level, having used the staircase. Employees must maintain 2-metre separation from all guests when waiting for a lift to arrive. Monitoring of staff behaviour must be undertaken continually by Department Heads, Supervisors and Security. Where social distancing rules are not followed then an education and disciplinary process must be in place. Signage should be considered by lift lobbies to advise that 2-metre social distancing is required. Markings can be used on the lift floor to indicate the positions to stand with the feet facing outwards towards the lift walls. Where practicable, when a guest lift must be used, a maximum of 2 persons should use it together or a single household. In the staff lifts a maximum of 2 persons should use it together, unless room service is in the lift, when they should always be on their own with no other person. Face covering must be worn in lifts. Hand sanitiser to be provided at lift access door points. Signage should be used to recommend guests use hand sanitiser before and after touching the lift controls. Lifts controls, doors and walls should be disinfected every 2 hours, with 1,000 ppm available chlorine disinfectant (or approved product with supporting evidence from the supplier that it is effective against SARS-CoV-2). Direct contact with a guest is strictly prohibited except for a medical emergency, when a first aider can be called to assist. Tipping by guests must not involve direct contact at any time. 				

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	Persons Affected (group categories where hotel operation has duty of care and potential control of hazard)		group categories where hotel peration has duty of care and Hazard Reference	
	Lost & found property		Groups 3, 4, 5 & 10	Covid-19 v6 - 30	
RISK RATING	Consequence (1-5)	Х	Likelihood (1 - 5)	=	Risk Rating (1-25)
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		2		8
CONTROL MEASURES	Control Action Required All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. As guestrooms are accessed after post departure hotel staff can follow hotel's L&F procedure when dealing with items collected from guest bedrooms. L&F property should be bagged before storing. Staff must use suitable PPE when handling the L&F. Ensure those responsible for the handling of L&F items wear a face covering and must sanitise or wash their hands before handling the items After handling L&F items the employee must wash their hands immediately following the guidance provided for a minimum period of 20 seconds.	5	Person Responsible		Date of Completion

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity				(group categories where hotel operation has duty of care and potential control of hazard)		Hazard Reference No.	
	Food preparation – kitchen operations			Groups 3, 4, 5 & 10		Covid-19 v6 - 31		
RISK RATING	Consequence (1-5)	Х	Likelihood (1 - 5)	=	Risk Rating (1-25)			
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		3		12			
	Control Action Required		Person Responsible		Date of Completion			
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. External clothing and personal items must never be brought into the food preparation areas but are to be placed securely in the allocated lockers. Employees entering the food preparation areas should maintain 2-metre separation unless with mitigation measure such as avoiding face to face contact, limiting time, no speaking, wearing face covering. Non-food handling staff should not enter the kitchen unless it is for critical reasons. If so, they must wear full protective clothing consisting of a full-length food grade protective coat and hair covering. Hand sanitiser must be provided at the entrance to all food and beverage areas. Non-contact soap dispensers and taps should be provided, where practicable, in food and beverage areas. Hand washing must be increased in frequency. It is recommended that as a minimum an hourly alert is given to request all food handlers to wash their hands, although this should be staggered in areas so that not all attempt to do so at the same time, so that the 2-metre social distancing rule is not compromised. Signage should be used throughout the food & beverage areas reminding staff to wash their hands more regularly during this period of heightened risk. Supervisors should monitor how often hand washing is being undertaken and should intervene and re-train staff who are noted to be compromising hand washing rules, both in terms of frequency and effectiveness. Food preparation areas should be sanitised throughout the production period and food handlers should be trained so that they are aware that the hotel is operating in a heightened period of risk and that sanitising is a key control that must be adhered to. General hand contact points such as door handles, taps, light switches, oven controls etc. should be sanitised regularly. Daily deep clean							

- Minimise interaction between kitchen staff and other workers, including when on breaks. Break periods for kitchen staff should be scheduled when they do not have to come into contact with non-food staff where practicable.
- Only 1 person is permitted inside walk in chillers, freezers, and dry stores at any time. Signage should be used to highlight this rule.
- Chefs should place food on service counter/service pass and there should be a clear floor mark on either side of the pass to then stand behind so that the 2-metre social distancing rule is maintained whilst serving staff collect it. In return serving staff should stand behind their line until the chef has stepped back.
- Kitchen and food area ventilation systems should operate during
 working hours on the highest setting practicable to ensure effective
 ventilation. Systems that are on automatic timing should remain on for
 a minimum period of 60 minutes after the food production has ended.
 Where practicable ventilation systems should always remain on .
 [Please note that ventilation systems may be critical to other health &
 safety requirements such as gas safety and should not be adjusted
 without advice from Engineeringl.
- Doors that can be kept open in food preparation and storage areas, without compromising fire safety or security, should be so as this minimises the need for hand contact.
- Only disposable sterile paper towel should be used on food and hand contact surfaces.
- When using sanitary facilities, food handlers must remove their
 protective clothing and should not enter WC areas wearing food
 protective clothing. Hands should be thoroughly washed before
 putting protective clothing back on and should then be re-washed on
 entry to the food preparation areas.

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity	Persons Affected (group categories where hotel operation has duty of care and potential control of hazard)			azard Reference No.
	Bar areas – bar operations	Groups 3, 4, 5 & 10			Covid-19 v6 - 32
RISK RATING	Consequence (1-5)	Χ	Likelihood (1 - 5)	=	Risk Rating (1-25)
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		3		12
	Control Action Required		Person Responsible		Date of Completion
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. Employees entering bar areas must always maintain 2-metre separation unless with mitigation measure such as avoiding face to face contact, limiting time, no speaking, wearing face covering Bar stools must be removed as guests using these will not be able to maintain a 2-metre separation from staff working behind the bar and only table service is currently permitted. Hand sanitiser must be provided in the bar area. Non-contact soap dispensers and taps should be provided, where practicable, in bar areas. Hand washing must be increased in frequency. It is recommended that as a minimum an hourly alert is considered so that all bar staff wash their hands. Signage should be used throughout the food & beverage areas reminding staff to wash their hands more regularly during this period of heightened risk. Supervisors should monitor how often hand washing is being undertaken and should intervene and re-train staff who are noted to be compromising hand washing rules, both in terms of frequency and effectiveness. Bar areas should be sanitised regularly, and food handlers should be trained so that they are aware that the hotel is operating in a heightened period of risk and that sanitising is a key control that must be adhered to. General hand contact points such as door handles, taps, ice machine doors, light switches, coffee machine controls etc. should be sanitised regularly. Wash crockery, glassware, cutlery trays and small equipment in a hot wash where practicable. Minimise interaction between bar staff and other workers, including when on breaks. Break periods for bar staff should be scheduled when they do not have to come into contact with non-food staff where practicable. Only 1 person is permitted inside walk in chillers, freezers, and dry stores at any time. Signage shou				

- Only disposable sterile paper towel should be used on beverage and hand contact surfaces. The use of cotton cloths and tea towels must be strictly prohibited.
- When using sanitary facilities, hands should be thoroughly washed and should then be re-washed on entry to the bar areas.
- Bar menus and drinks lists should be laminated so that they can be wiped clean. They should be sanitised after each use.
- Bar seating areas must be set up so that there is 2-metre space between each table where possible. This includes between each table and behind and in front of each table.
- All guests should provide their name and telephone number using the QR code provided on the tables
- Before a guest sits down in the bar, staff should use the standard sanitiser and should spray the table and hard surfaces of the chair(s) (e.g. arms) and wipe dry with disposable paper towel.
- Hand sanitiser to be provided at bar entrances. Signage should be used to recommend guests use hand sanitiser before entering the bar.
- During serving guests the 2-metre social distancing rule should be maintained where practicable, and the period of placement of drinks on the bar should be minimised so that it is as short as possible.
- Key touch points in guest facing areas, such as door handles, switches etc. should be disinfected at minimum 2 hourly intervals with 1,000 ppm available chlorine disinfectant (or approved product with supporting evidence from the supplier that it is effective against SARS-CoV-2).
- Tipping by guests must not involve direct contact at any time.
- When the guest leaves the table and hard surfaces of the chair(s) (e.g. arms) should be disinfected and wiped dry with disposable paper towel.
- Contactless payment should be encouraged, where possible
- If a guest pays by cash the staff member should wash their hands immediately after the transaction is completed.
- Where card machines have to be used, these should be disinfected
 with an approved product, or if it is sensitive equipment that may be
 damaged by wet spray they can be cleaned using an alcohol based
 cleaner (e.g. minimum 60% alcohol or 70% isopropyl alcohol). This
 should be done in front of the guest before the terminal is handed
 over so that the guest can see that the unit has been disinfected.
 Following the transaction the unit is to be disinfected again (this can
 be done away from the guest) and staff to be instructed to then
 immediately wash hands.
- Guests should be asked if they require a receipt and should not automatically be required to accept one if they do not wish to do so.

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity		Persons Affected (group categories where hotel operation has duty of care and potential control of hazard)		azard Reference No.
	Restaurant areas – restaurant operations		Groups 3, 4, 5 & 10		Covid-19 v6 - 33
RISK RATING	Consequence (1-5)	Χ	Likelihood (1 - 5)	=	Risk Rating (1-25)
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		3		12
	Control Action Required		Person Responsible	[Date of Completion
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. Employees entering restaurant areas must always maintain 2-metre separation unless with mitigation measure such as avoiding face to face contact, limiting time, no speaking, wearing face covering. Hand sanitiser must be provided in the restaurant area by the point of sales terminals/display screen equipment. Protective disposable gloves should be provided by the sales terminals/display screen equipment where these cannot be allocated to an individual user. Hand washing must be increased in frequency. It is recommended that as a minimum an hourly alert is considered so that all restaurant staff wash their hands. Signage should be used throughout the food & beverage areas reminding staff to wash their hands more regularly during this period of heightened risk. Restaurant staff must wash their hands after taking and placing each order. Restaurant service areas should be sanitised regularly, and staff should be trained so that they are aware that the hotel is operating in a heightened period of risk and that sanitising is a key control that must be adhered to. General hand contact points such as door handles, taps, ice machine doors, light switches, coffee machine controls etc. should be disinfected at minimum 2 hourly intervals, with 1,000 ppm available chlorine disinfectant (or approved product with supporting evidence from the supplier that it is effective against SARS-CoV-2) used. Wash crockery, glassware, cutlery trays and small equipment in a hot wash where practicable. Doors that can be kept open without compromising fire safety or security, should be so as this minimises the need for hand contact. When using sanitary facilities, hands should be laminated so that they can be wiped clean. They should be disinfected after each use. Restaurant menus, wine lists etc. sh				

- back seating. This includes between each table and in front of each table
- All guests should provide their name and telephone number using the QR code provided on the tables
- Signage should be considered at entrances to restaurants to advise that 2-metre social distancing is required.
- Before a guest sits down the restaurant staff should use the standard sanitiser and should spray the table and hard surfaces of the chair(s) (e.g. arms) and wipe dry with disposable paper towel.
- Hand sanitiser to be provided at restaurant entrances. Signage should be used to recommend guests use hand sanitiser before entering the restaurant.
- During serving guests staff the 2-metre social distancing rule or mitigation should be maintained and the period of placement of food and drinks on the table should be minimised so that it is as short as possible.
- Key touch points in guest facing areas, such as door handles, switches etc. should be disinfected at minimum 2 hourly intervals with 1,000 ppm available chlorine disinfectant (or approved product with supporting evidence from the supplier that it is effective against SARS-CoV-2).
- Tipping by guests must not involve direct contact at any time.
- When the guest leaves the table and hard surfaces of the chair(s) (e.g. arms) should be disinfected and wiped dry with disposable paper towel.
- Contactless payment should be encouraged, where possible.
- If a guest pays by cash the staff member should wash their hands immediately after the transaction is completed.
- Where card machines have to be used, these should be disinfected
 with an approved product, or if it is sensitive equipment that may be
 damaged by wet spray they can be cleaned using an alcohol based
 cleaner (e.g. minimum 60% alcohol or 70% isopropyl alcohol). This
 should be done in front of the guest before the terminal is handed
 over so that the guest can see that the unit has been disinfected.
 Following the transaction the unit is to be disinfected again (this can
 be done away from the guest) and staff to be instructed to then
 immediately wash hands.
- Guests should be asked if they require a receipt and should not automatically be required to accept one if they do not wish to do so.

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	operation has duty of care and		(group categories where hotel		azard Reference No.
	Room service		Groups 3 & 4		Covid-19 v6 - 34
RISK RATING	Consequence (1-5)	X	Likelihood (1 - 5)	=	Risk Rating (1-25)
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		3		12
	Control Action Required		Person Responsible		Date of Completion
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. When delivering food to a guest room the employee should follow the procedures for hand washing. Hands must be washed before each room service delivery. The food tray, box, bag etc. should be placed on the floor by the threshold to the room. The employee should knock on the guest door or ring a bell, where provided. The employee should immediately stand back from the door to ensure the 2-metre separation guidance is followed. When the guest answers the door the employee is to indicate the food location and should then leave the guest to collect and take the food into their room. Guests should be requested to leave trays, waste items etc. outside their room and to call Room Service to advise that the tray can be collected, which should be done as soon as the call is received. Room Service staff should only enter a guest room to collect a tray, waste etc. when the room is unoccupied. No waste should be left outside of a room for more than ½ hour. All items collected by Room Service from a guest room should be considered to be contaminated. Gloves should be work when handling items collected. Waste should be treated as per the waste handling procedure and risk assessment. Trays, utensils, plates, cutlery, and glassware should be placed through a hot wash. Tipping by guests must not involve direct contact at any time. 				

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity		Persons Affected (group categories where hotel operation has duty of care and potential control of hazard)		azard Reference No.
	Setting up meeting spaces		Groups 3, 4, 5 & 10		Covid-19 v6 - 35
RISK RATING	Consequence (1-5)	Χ	Likelihood (1 - 5)	=	Risk Rating (1-25)
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		2		8
	Control Action Required		Person Responsible		Date of Completion
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. Signage must be used at the entrance to all hotel meeting rooms to advise that 2-metre social distancing should be followed. For non-work meetings the rule of 6 applies and no booking should be taken for a group larger than 6 persons. Where groups work together meetings can be hosted for work, and voluntary or charitable services and for education & training. Bottled water and glassware, if required, should be set up by each chair so that items do not need to be shared. Hand sanitiser to be provided at the entrance/or inside to each meeting area. Meeting rooms should be disinfected daily and always immediately after a meeting has been held, with 1,000 ppm available chlorine disinfectant (or approved product with supporting evidence from the supplier that it is effective against SARS-CoV-2) used on chairs, tables, door handles and door plates. Shared workstations in meeting rooms should be removed where possible and if this is not practicable then mouse and keyboard should be disinfected using an alcohol based (e.g. minimum 60% alcohol or 70% isopropyl alcohol) before and after each use. Pens and other objects must never be shared during meetings. Remove pens from meeting rooms unless they are disinfected and in individual sealed bags for single use. Meeting and Events staff setting up a room should wash their hands thoroughly before setting up and immediately afterwards. Meeting and Events staff clearing a room post meeting should wear protective gloves and should immediately wash their hands after clearing the room. Glassware, bottles etc. should be sterilised after use through a hot wash. Waste should be handled in accordance with the waste handing risk assessment. 				

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Persons Affected (group categories where hotel operation has duty of care and potential control of hazard) Hazard/Activity potential control of hazard)			azard Reference No.	
	First aid and security		Groups 3, 4, 5, 6, 7, 8, 9 & 10		Covid-19 v6 - 36
RISK RATING	Consequence (1-5)	X	Likelihood (1 - 5)	=	Risk Rating (1-25)
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	5		3		15
	Control Action Required		Person Responsible		Date of Completion
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. All first aiders should be given training in accordance with the guidance published by HM Government. This can be found via the following link: 				

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity		Persons Affected (group categories where hotel operation has duty of care and potential control of hazard)		azard Reference No.
	Use of personal protective equipment (PPE)		Groups 3, 6, 7 & 8		Covid-19 v6 - 37
RISK RATING For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	Consequence (1-5) 4	X	Likelihood (1 - 5)	=	Risk Rating (1-25)
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. Training must cover the safe and effective use of personal protective equipment. Existing risk assessments have considered the use of PPE and where already provided this must always be used. PPE is required to minimise risk in many activities and the risk of Covid-19 should not detract from existing controls. Additional levels of PPE will be provided, and the individual departmental Covid-19 risk assessments identify where PPE is mandatory. PPE is not a replacement for maintaining the 2-metre social distancing rule. Face covering must now be worn by guests in all public areas, other than when they are eating or drinking. Employees must wear a face covering when moving around the Resort (this includes guest and staff communal areas). Face coverings are not required in staff areas whilst eating or drinking in the canteen or at a workstation or in a team meeting provided 2 metre social distancing, or 1 metre with mitigation is in place. The minimum PPE to be worn for cleaning an area where a person with confirmed Covid-19 is a facemask (The HSE has stated that FFP2 and N95 respirators (filtering at least 94% and 95% of airborne particles respectively) offer protection against Covid-19, disposable gloves, eye protection and an apron. Hands should be washed with soap and water for 40 seconds after all PPE has been removed. If a risk assessment of the setting indicates that a higher level of virus may be present (for example, where confirmed cases have slept such as a hotel room) or there is visible contamination with body fluids, then the need for additional PPE to protect the cleaner's eyes, mouth and nose might be necessary. NHS Track and Trace may advise on this in the event of confirmed cases. Wearing a mask is just one way to help prevent respiratory tract infections. Most important is to observ		Person Responsible		Date of Completion

- Facemasks may help limit the spread of germs. When someone talks, coughs, or sneezes they may release tiny drops into the air that can infect others. If someone is ill a face masks can reduce the number of germs that the wearer releases and can protect other people from becoming sick. A face mask also protects the wearer's nose and mouth from splashes or sprays of body fluids.
- Disposable face masks should be used once and then put into waste bag. You should also remove and replace masks when they become moist
- Always follow product instructions on use and storage of the mask, and procedures for how to put on and remove a mask. If instructions for putting on and removing the mask are not available, then follow the steps below.
- How to put on a face mask:

Clean your hands with soap and water or hand sanitizer before touching the mask.

Remove a mask from the box and make sure there are no obvious tears or holes in either side of the mask.

Determine which side of the mask is the top. The side of the mask that has a stiff bendable edge is the top and is meant to mould to the shape of your nose.

Determine which side of the mask is the front. The coloured side of the mask is usually the front and should face away from you, while the white side touches your face.

Follow the instructions below for the type of mask you are using. Face Mask with Ear loops: Hold the mask by the ear loops. Place a loop around each ear.

Face Mask with Ties: Bring the mask to your nose level and place the ties over the crown of your head and secure with a bow. Face Mask with Bands: Hold the mask in your hand with the nosepiece or top of the mask at fingertips, allowing the headbands to hang freely below hands. Bring the mask to your nose level and pull the top strap over your head so that it rests over the crown of your head. Pull the bottom strap over your head so that it rests at the nape of your neck.

Mould or pinch the stiff edge to the shape of your nose.

If using a face mask with ties: Then take the bottom ties, one in each hand, and secure with a bow at the nape of your neck.

Pull the bottom of the mask over your mouth and chin.

When wearing a surgical mask, ensure that:

The mask fits snugly over the face.

The coloured side of the mask faces outwards, with the metallic strip uppermost.

The strings or elastic bands are positioned properly to keep the mask firmly in place.

The mask covers the nose, mouth, and chin.

The metallic strip moulds to the bridge of the nose.

Try not to touch the mask once it is secured on your face as frequent handling may reduce its protection. If you must do so, wash your hands before and after touching the mask.

 When taking off the mask, avoid touching the outside of the mask as this part may be covered with germs. How to remove a face mask:
 Clean your hands with soap and water or hand sanitizer before touching the mask. Avoid touching the front of the mask. The front of the mask is contaminated. Only touch the ear loops/ties/band. Follow the instructions below for the type of mask you are using.
 Face Mask with Ear loops: Hold both ear loops and gently lift and remove the mask.
 Face Mask with Ties: Untie the bottom bow first then untie the top bow and pull the mask away from you as the ties are loosened.
 Face Mask with Bands: Lift the bottom strap over your head and then pull the top strap over your head.
 After taking off the mask, fold the mask outwards (i.e. the outside of the mask facing inwards), then put the mask into a plastic or paper bag before putting it into a rubbish bin with a lid.
 A surgical mask should be discarded after use and under no circumstances should it be used for longer than a day. Replace the mask immediately if it is damaged or soiled.

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hub operation has duty of care		(group categories where Home		azard Reference No.
	Double person working		Groups 3 & 6		Covid-19 v6 - 39
RISK RATING	Consequence (1-5)	X	Likelihood (1 - 5)	=	Risk Rating (1-25)
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		3		12
	Control Action Required		Person Responsible		Date of Completion
CONTROL MEASURES	 All employees must receive Covid-19 awareness training so that they are aware of the actions that they can personally take to reduce risk. When possible, employees should work alone (please note separate rules regarding lone working and safety). In certain circumstances if a job requires two people for reasons of safety (e.g. manual handling, working at height etc.) then this should only be with your nominated buddy (each employee will be partnered with one other person who should not change). If work does need to be done together then time limit this. Always try and complete the task in less than 15 minutes. Plan task in advance to ensure it is as short as possible during the period when social distancing cannot be achieved. Where possible during the task revert to the 2-metre social distance whenever possible to reduce the overall close contact time. Avoid working face to face. Wear face covering at all times. Avoid touching face – reinforce through training. Maintain good ventilation in the area where the work is being undertaken. Wash hands thoroughly as soon as task has been completed. Use hand sanitiser if soap and water are not available. 				·

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity		Persons Affected (group categories where hotel operation has duty of care and potential control of hazard)		(group categories where hotel operation has duty of care and		azard Reference No.
	Noise levels	G	Groups 1, 2, 3, 4, 5, 6, 7, 8, 9 & 10		Covid-19 v6 – 44		
RISK RATING	Consequence (1-5)	X	Likelihood (1 - 5)	=	Risk Rating (1-25)		
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		3		12		
CONTROL MEASURES	Control Action Required There is an additional risk of infection in environments where singing, chanting, shouting, or conversing loudly occurs. This applies even if others are at a distance to you. Amplified noise, including background music, should be set at levels that do not require guests, visitors, or staff to raise their voice to communicate with anyone.		Person Responsible		Date of Completion		

HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Persons Affected (group categories where hotel operation has duty of care and potential control of hazard) Hazard Reference operation has duty of care and potential control of hazard)			azard Reference No.	
	Recording data for NHS Test and Trace purposes	G	roups 1, 2, 3, 4, 5, 6, 7, 8, 9 & 10		Covid-19 v6 – 45
RISK RATING	Consequence (1-5)	X	Likelihood (1 - 5)	=	Risk Rating (1-25)
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls.	4		3		12
	Control Action Required		Person Responsible		Date of Completion
CONTROL MEASURES	 Contact details should be obtained from all customers and visitors to the hotel. This includes walk in customers, non-resident guests/visitors, contractors, and other visitors. Walk in non-resident guests must be recorded when they arrive if they have not previously been so. A temporary record of all customers and visitors must be kept for 21 days. Records must be held securely, and the guest or visitor must be made aware of the purpose for keeping the record, as required by GDPR. Staff shift and attendance records must be kept for 21 days. This must include agency workers. Records can be held electronically or in paper form but should include definitive contact details such as telephone number and email to assist NHS Test and Trace with requests for that data if needed. This could help contain clusters or outbreaks.)			

RISK RATING For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls. Control Action Required Control Action Required The full results of the hotel risk assessment must be shared with all employees. If possible, this should be by way of an employee communications portal or by publication within each department. Staff must be encouraged to raise any concerns about the Covid-19 protection procedures and an ability to report concerns anonymously should be in place through a secure suggestion box.	HAZARD IDENTIFICATION Hazard - something with the potential to cause harm within the process, task etc. assessed.	Hazard/Activity		Persons Affected (group categories where hotel operation has duty of care and potential control of hazard)		group categories where hotel peration has duty of care and		azard Reference No.
For further detail on calculation of risk rating please see table below. Rating calculation based on implementation of all listed controls. Control Action Required Person Responsible		Staff Consultation		Groups 1, 2 & 3		Covid-19 v6 – 48		
rating please see table below. Rating calculation based on implementation of all listed controls. Control Action Required Person Responsible	RISK RATING	Consequence (1-5)	Х	Likelihood (1 - 5)	=	Risk Rating (1-25)		
The full results of the hotel risk assessment must be shared with all employees. If possible, this should be by way of an employee communications portal or by publication within each department. Staff must be encouraged to raise any concerns about the Covid-19 protection procedures and an ability to report concerns anonymously	rating please see table below. Rating calculation based on implementation of	3		3		9		
	CONTROL MEASURES	 The full results of the hotel risk assessment must be shared with all employees. If possible, this should be by way of an employee communications portal or by publication within each department. Staff must be encouraged to raise any concerns about the Covid-19 protection procedures and an ability to report concerns anonymously)	Person Responsible		Date of Completion		

ASSESSME	NT APPROVAL & REVIEW		
Assessment Reviewed		Manager's Signature	
By (Manager's Name)		Manager 3 Orginature	
Date Assessment		Next Date of Review	
Approved		Next bate of Neview	
Copies of Assessment to: (please identify)			

Risk Rating Table

		CONSEQUENCE								
LIKELIHOOD	1 Insignificant	2 Minor	3 Moderate	4 Major	5 Catastrophic					
1 - Rare	1	2	3	4	5					
2 - Unlikely	2	4	6	8	10					
3 - Possible	3	6	9	12	15					
4 - Likely	4	8	12	16	20					
5 - Almost Certain	5	10	15	20	25					