

## Risk assessment: Risk of Catching COVID-19

<b>Venue:</b> St John's Church and Community Centre, Muxton	<b>Assessor's name:</b> St John's Building Management Team	<b>Date completed:</b> 01.07.20	<b>Review date:</b> 01.08.20
---	---	------------------------------------	---------------------------------

1 large hall  
2 Side Rooms  
5 toilets (Men's (1) Ladies (3) Disabled (1)  
Lounge area  
Kitchen  
Office

Area of Focus	Controls required	Additional information	Action by whom?	Completed - date and name
<b>Access to church buildings</b>	One point of entry to the church building	Hand sanitising on entry	LT/KM	May 2020 LT
	Lone working policy in place.	All who are on duty in church to carry mobile phone with them and able to contact vicar/wardens		
	Buildings have been aired.		LT	Mon and Fri since April 2020 - LT
	Check for cleanliness.	Deep clean carried out end of March and beginning of April	LT/KM	Every Mon and Fri - LT
	Ensure water systems are flushed through before use.	Taps run for 5mins and toilets flushed every Monday and Friday during lockdown	LT	Every Mon and Fri - LT
	Switch on and check electrical and heating systems if needed.		LT	Every Mon and Fri - LT
<b>Preparation of the Church for public worship/community use</b>	Confirm that all steps have been carried out before anyone else accesses the building.		LT	1/7/20 - LT
	Review CofE guide on cleaning church buildings.		LT/KM	
	Choose one point of entry into	Main entrance to be entry and	LT	Is put in place whenever church

## Risk assessment: Risk of Catching COVID-19

Area of Focus	Controls required	Additional information	Action by whom?	Completed - date and name
	the church to manage flow of people and indicate this with notices, keeping emergency exits available at all times. Where possible use a different exit.	where possible exit via doors in main hall and exit passing the kitchen to gate.		is open - LT
	Where possible, doors and windows should be opened temporarily to improve ventilation.	All doors (and windows) be opened when church/community centre open where possible.	LT	LT ongoing
	Remove from use all books (inc. hymn books and Bibles) plus leaflets except single use material that will be removed by user.	Some Bibles available for use - these to be left to self-clean in "recycle bin" after use. Lounge area to be closed off if necessary	LT	June 2020 - LT
	Remove or isolate children's resources and play areas	No access to side rooms where items located - Display Notices on doors to say No Entry	LT	1/7/20
	Walk through the church to plan for physical distancing in seats, aisles, at the altar rail, including safe flow of visitors. Remember 2m in all directions from each person.		Building Management	31/7/20 LT
	Clearly mark out seating areas including exclusion zones to maintain distancing.			
	Clearly mark out flow of movement for people entering and leaving the building to maintain physical distancing requirements.	One way system signage on floor	LT	
	Limit access to places were the public does not need go.	Signage/lock doors. Clear signs	LT	1/7/20 - LT

## Risk assessment: Risk of Catching COVID-19

Area of Focus	Controls required	Additional information	Action by whom?	Completed - date and name
	Determine placement of hand sanitisers available for visitors to use.	Entry and Exit with clear signage when church open.	LT	1/7/20 - LT
	Determine if temporary changes are needed to the building to facilitate social distancing	Chairs Moved as appropriate	LT/KM	Ongoing
	Put up notices to remind visitors about important safe practices e.g. no physical contact, practice hand washing etc.		LT	On going
	If the church has been used in the last 72 hours ensure high-risk surfaces and touch points have been wiped with appropriate sanitiser spray or disposable wipes.	Cleaner booked to attend after high footfall of venue	LT/KM	On going
	Check that handwashing facilities/toilets have adequate soap provision and paper towels, and a bin for the paper towels.	Toilet will be closed except for emergencies. All toilets filled with soap/restocked with handtowels and bins emptied on a regular basis. At least 1 a day when church/community centre is being used	LT/KM	Ongoing
	Ensure all waste receptacles have disposable liners (e.g. polythene bin bags) to reduce the risk to those responsible for removing them.		LT/KM	Ongoing
<b>Cleaning the church before and after general use (no known exposure to anyone with Coronavirus symptoms)</b>	If the church building has been closed for 72 hours between periods of being open then there is no need for extra cleaning to remove the virus from surfaces.		LT	LT

## Risk assessment: Risk of Catching COVID-19

Area of Focus	Controls required	Additional information	Action by whom?	Completed - date and name
	If 72-hour closure is not possible then check all cleaners are not in a vulnerable group or self-isolating.	Extra provision in place to be a lone worker	LT	LT
	Set up a cleaning rota to cover your opening arrangements.	Paid Caretaker/Cleaner	LT/KM	LT/KM On going
	All cleaners provided with gloves (ideally disposable).		LT	LT in place
	Suitable cleaning materials provided, depending on materials and if historic surfaces are to be cleaned.	Stock in cleaning cupboard - replenished as and when	LT/KM	LT/KM ongoing
	Confirm person responsible for removing potentially contaminated waste (e.g. hand towels) from the site.	Paid Caretaker/Cleaner	LT/KM	LT/KM ongoing
	Confirm the frequency for removing potentially contaminated waste (e.g. hand towels) from the site - suggested daily removal.	Daily when building in use or more frequent if large footfall	LT/KM	LT/KM Ongoing
<b>Cleaning the church after known exposure to someone with Coronavirus symptoms</b>	If possible close the church building for 72 hours with no access permitted.	Signage in place to ask those with symptoms not to enter the building. If they develop symptoms while in the building to inform the duty person and go home immediately. The duty person will then contact the vicar and/or the wardens and close the church immediately.	LT	
	If 72-hour closure is not possible then follow Public Health	Paid caretaker to come in after to deep clean. If unavailable BM	LT/KM	

## Risk assessment: Risk of Catching COVID-19

Area of Focus	Controls required	Additional information	Action by whom?	Completed - date and name
	England guidance on cleaning in non-healthcare settings.	to step in.		
	If the building has been quarantined for 72 hours, then carry out cleaning as per the normal advice on cleaning.	Normal weekly routine will apply	LT/KM	
<b>Advice on Face Masks</b>	Advice that anyone entering the building must wear facemasks	<b>Sig na ge in pla ce an d ind ivi du als ad vis ed</b>	LT	LT 31/7/20

Inc. How to clean after a possible COVID infection

LT Lesley Trotman – Administrator and Weekend Caretaker/Cleaner

KM Kelly MacKay – Midweek Caretaker/Cleaner

BM Building Management Team

General cleaning guidance copies given to LT/KM and BM

## Risk assessment: Risk of Catching COVID-19

### Cleaning after a possible COVID scare

#### What you need to know

- cleaning an area with normal household disinfectant after someone with suspected coronavirus (COVID-19) has left will reduce the risk of passing the infection on to other people
- wear disposable or washing-up gloves and aprons for cleaning. These should be double-bagged, then stored securely for 72 hours then thrown away in the regular rubbish after cleaning is finished
- using a disposable cloth, first clean hard surfaces with warm soapy water. Then disinfect these surfaces with the cleaning products you normally use. Pay particular attention to frequently touched areas and surfaces, such as bathrooms, grab-rails in corridors and stairwells and door handles
- if an area has been heavily contaminated, such as with visible bodily fluids, from a person with coronavirus (COVID-19), use protection for the eyes, mouth and nose, as well as wearing gloves and an apron
- wash hands regularly with soap and water for 20 seconds, and after removing gloves, aprons and other protection used while cleaning

### Principles of cleaning after the case has left the setting or area

#### Personal protective equipment (PPE)

The minimum [PPE](#) to be worn for cleaning an area where a person with possible or confirmed coronavirus (COVID-19) is disposable gloves and an apron. Hands should be washed with soap and water for 20 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 unwell individuals have slept such as a hotel room or boarding school dormitory) 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. The local Public Health England (PHE) Health Protection Team (HPT) can advise on this.

Non-healthcare workers should be trained in the correct use of a surgical mask, to protect them against other people's potentially infectious respiratory droplets when within 2 metres, and the mask use and supply of masks would need to be equivalent to that in healthcare environments.

## **Risk assessment: Risk of Catching COVID-19**

### **Cleaning and disinfection**

Public areas where a symptomatic individual has passed through and spent minimal time, such as corridors, but which are not visibly contaminated with body fluids can be cleaned thoroughly as normal.

All surfaces that the symptomatic person has come into contact with must be cleaned and disinfected, including:

- objects which are visibly contaminated with body fluids
- all potentially contaminated high-contact areas such as bathrooms, door handles, telephones, grab-rails in corridors and stairwells

Use disposable cloths or paper roll and disposable mop heads, to clean all hard surfaces, floors, chairs, door handles and sanitary fittings, following one of the options below:

- use either a combined detergent disinfectant solution at a dilution of 1,000 parts per million available chlorine

or

- a household detergent followed by disinfection (1000 ppm av.cl.). Follow manufacturer's instructions for dilution, application and contact times for all detergents and disinfectants

or

- if an alternative disinfectant is used within the organisation, this should be checked and ensure that it is effective against enveloped viruses

Avoid creating splashes and spray when cleaning.

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

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

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

### **Laundry**

## **Risk assessment: Risk of Catching COVID-19**

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

Do not shake dirty laundry, this minimises the possibility of dispersing virus through the air.

Clean and disinfect anything used for transporting laundry with your usual products, in line with the cleaning guidance above.

## **Waste**

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

1. Should be put in a plastic rubbish bag and tied when full.
2. The plastic bag should then be placed in a second bin bag and tied.
3. It should be put in a suitable and secure place and marked for storage until the individual's test results are known.

Waste should be stored safely and kept away from children. You should not put your waste in communal waste areas until negative test results are known or the waste has been stored for at least 72 hours.

- if the individual tests negative, this can be put in with the normal waste
- if the individual tests positive, then store it for at least 72 hours and put in with the normal waste

If storage for at least 72 hours is not appropriate, arrange for collection as a Category B infectious waste either by your local waste collection authority if they currently collect your waste or otherwise by 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.