

COVID-19 Sanitisation General RA								
SERIAL	TASK	AT RISK	HAZARD	LIKELIHOOD	DEGREE OF HARM	RATING	ACTION	NOTES
1	RISK ASSESSMENT	RHC Staff, Pensioners, Support staff (MOD)	Design and layout	POSSIBLE	NEGLECTIBLE	TOLERABLE	Barriers and signage can direct pedestrian and traffic flows and the shrewd location of appropriate facilities can help spread personnel densities more evenly.	The building layout is fixed, but the functionality can be managed. Small entrances may control crowd flow into cramped areas, but may result in dangerous build-ups on the other side, impinging upon Social Distancing (SD) measures.
			Behaviour is affected by the provision of information	POSSIBLE	MINOR	MODERATE	Clear signposting and simple personal management and direction where appropriate are vital.	Poor communications can lead to people bunching up, moving against the traffic flow, blocking passages or making frequent demands on staff for directions. Personnel without information, or given contradictory information, can become frustrated and aggressive.
			Behaviour of individuals is influenced by those around them	POSSIBLE	MINOR	MODERATE	Implementing measures to prevent dangerous situations evolving must be taken before the activity.	Individuals within a crowd usually behave in a rational and goal-oriented manner. Someone whose aim is to access a service such as getting fed may circumvent established protocols if they are perceived to be inefficient or simply not user friendly. Others may follow, leading to more people adopting unsafe procedures leading to higher incidences of potential contamination.
			Physical, structural or process related issues	POSSIBLE	MAJOR	MODERATE	Identify physical features of a space that may lead to overcrowding, diminution of SD protocols and possible cross contamination.	Uneven or slippery flooring, steps, restricted thoroughfares. Dual use routes; Service personnel and equipment and end user!
			Cross Contamination by infected persons	POSSIBLE	POTENTIALLY FATAL	HIGH	Scrupulous & frequent attention to Handwashing including but NOT restricted to the following: As soon as possible after entering a clean space After touching any exposed surface or handle Before and after handling foodstuffs After sneezing or coughing Sanitisation of hands before or upon entering any building Maintaining Social Distancing (SD) of 2m minimum Self Isolation upon onset of any symptoms Dynamic Risk Assessment by RHC Management	Maintain adequate hygiene facilities across the site, signpost where necessary, all to display Handwashing Aide Memoires Provision of adequate Sani-Gel supplies and signage Mark out areas where queuing is anticipated Establish a protocol for notification and subsequent care A full review of potential interfaces in terms of the RHC site as a whole was conducted and resulted in the existing Sanitisation deployment plan. This document is to specifically address the detail of the Feeding delivery to onsite personnel.

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2	Meals taken in communal spaces of Great Hall and CPC complex	RHC Staff, Pensioners, Support staff (MOD)	Cross Contamination through touching potentially contaminated surfaces	PROBABLE	POTENTIALLY FATAL	HIGH	Minimise the potential for any such interface  Maximise the use of single use items  Maintain high level hygiene standards  A core cleaning programme across the site.  Central message to all personnel: Handwashing and regular sanitisation of hands  Hand sanitisation stations are located at the entrances to the CPC bar and the Reading Room which  Education; signs where appropriate to warn of the dangers or to indicate safe handling protocols	The following serial 3 is an initial list of potential interfaces between persons and equipment or materials that represent sources for cross contamination in the delivery of the feeding service to In Pensioners and staff  Stock level maintenance issues aside; use existing crockery and cutlery until the situation demands otherwise as these items are regularly cleaned. Consumables should be in single use packs rather than multi-use containers. Not perceived to be an issue, but it is necessary to be additionally aware of the potential for cross contamination as a distinct probability NOT possibility.  The cleaning protocol is to deal with the key areas of potential contamination in the communal areas. Personal living space is to be controlled by individual hygiene measures as below.  The conduct of individuals in protecting themselves bolsters the centralised efforts of housekeeping staff who are concentrating on the communal areas ensuring that despite the potential for contact with surfaces touched by others (who are also doing their own hygiene protocols) they all remain safe, 'double bagging' approach.  Signage must also be dynamic, change the method of delivery whilst maintaining the core message. Change signs regularly to prevent sign blindness!

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3	Self Service Feeding	RHC Staff, Pensioners, Support staff (MOD)	...potentially contaminated surfaces	CERTAIN	POTENTIALLY FATAL	HIGH	Remove incidences of contact with such surfaces...	Simple statement BUT hard to achieve with limited manpower resources. The overriding message is that of the core procedures of Handwashing and Sanitisation of hands throughout the day. Whilst all of the contact points below exist the risk needs to be considered within the whole site control measure and NOT to be seen in isolation.
3a			Jug handles				Have a staff/volunteer server to dispense?	Coffee, tea, milk, juice, water all have both a handle to lift and pour and usually a twist or flip control to release the contents.
3b			Serving Tongs				Either have a staff server or all users have their own serving tools for hotplate items	Both options have issues; manpower resources or cleaning regimes.
3c			Cereal dispenser controls				Source alternate means of dispensing, single serving packets OR have a staff/volunteer server to dispense	Requires rotating a handle to dispense which for some users may be an issue anyway.
3d			Chaffing dish lids				Have a staff/volunteer server to dispense?	Porridge/Oatmeal container, lid is kept on to keep contents warm so must be lifted to access the food! Leaving the lid on means providing the user with the means to safely remove it or leaving it off means food goes cold and unpalatable.
3e			Bread Bags				Have a staff/volunteer server to dispense?	
3f			Condiment and Sauce bottles				Remove all multi use containers and replace with single use sachets, until situation has resolved itself.	This includes sauces, vinegar, mustard, honey and jam
3g			Plates in plate warmer				Ensure action is adjusted to bring stack of plates to the top.	Some plates are 'deep' inside the unit meaning user has to fumble around to retrieve plates.
3h			Chair backs, table tops, screen partitions				Include in cleaning protocol, especially those on the route to and from the servery.	All places where people unsteady on their feet lean on to help their stability.
3i			Communal mobility frame (Zimmer)				Include in cleaning protocol, especially after use OR remove from use and personnel needing such aides to be fed in their berths	2 units in Great Hall. Increased isolation for personnel when not medically warranted is a bad idea. Manage the situation in place, hand grips and brake controls at a minimum need to be cleaned
3j			Handrails on Octagon and Long ward stairs				Regular cleaning and disinfecting throughout the day.	Pensioners are encouraged to use handrails as a safety measure so must be maintained. It is impossible to disinfect after every use, there is insufficient staff and materials to do so.
3k			Lift buttons, handrails and doors				Regular cleaning and disinfecting throughout the day.	It is impossible to disinfect after every use, there is insufficient staff and materials to do so.
			ALL				ALL of the above rest upon the core protocol of regular handwashing and sanitisation as the best means of defence.	Sourcing alternate practices that reduce the multi-use of implements or controls will remain a priority and implemented where possible.

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4	Meal delivery to MTI	RHC QM staff, porters	...potentially contaminated surfaces on heated trolleys	POSSIBLE	POTENTIALLY FATAL	HIGH	QM Staff Hands washed, sanitised and gloved beforehand  MTI Staff 1st Action- disinfect handles after unloading  Catering staff, 1st Action- disinfect handles upon receipt  QM Staff disinfects handles and controls, disposes of gloves then washes hands and sanitises	The assumption is that the kitchen is a CLEAN environment maintained to high EHO standards. Trolleys are loaded from Main kitchen into truck by QM Staff. (CLEAN)  QM Staff unload at MTI (Handle potentially DIRTY after contact with vehicle) Trolley transferred to MTI staff (DIRTY) Trolleys (CLEAN) for meal delivery Vehicle remains at MTI until empty trolleys returned by MTI staff. The trolley and its dishes etc are all CLEAN but the handle must be considered as DIRTY. QM Staff load empty trolleys at MTI (DIRTY) QM Staff returns vehicle to College Court unloads trolleys (DIRTY) directly into the Kitchen where the handle is then disinfected. (CLEAN) Trolleys are then plugged in and prepared for the next meal service
5	Meal delivery to Long Wards	RHC Staff, Pensioners, Support staff (MOD)	...potentially contaminated surfaces	POSSIBLE	POTENTIALLY FATAL	HIGH	QM Staff Hands washed, sanitised and gloved beforehand  Disinfect trolley handle before starting meal delivery on ward  Minimise contact with potentially contaminated surfaces or persons  If there is any chance contact, then disinfect and sanitise hands before continuing  Transfer of infection from ward to ward	The assumption is that the kitchen is a CLEAN environment maintained to high EHO standards. Trolleys are taken from Main kitchen by QM Staff. (CLEAN)  All points raised in serial 3 where appropriate still stand. Starting from a CLEAN position and maintaining it throughout is the safest method of work Rather than knocking on doors, call to the occupant and place meal on threshold to room for pickup or get occupant to open door and then place meal on a flat surface for them to retrieve. Do not hand direct to the person as that increases the chance of contact. All trolleys to carry Sani-Gel and Spare Gloves This is so as not to spread any potential infection. All trolleys to carry Sani-Gel and Spare Gloves.

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6	General domestic & recreational activity	RHC Staff, Pensioners, Support staff (MOD)	Cross Contamination by infected persons	POSSIBLE	POTENTIALLY FATAL	HIGH	Comply with Social Distancing at all times. Maintain a 2m gap between people and park benches!  Remove all surplus chairs from communal areas. MTI Café Patio, Visitor Centre,  Long Ward furniture should remain in situ but group and self discipline required to maintain SD and not to congregate.  CPC and Great Hall are supervised spaces when in use and so extra chairs can be left in situ BUT SD MUST still be adhered to.	Don't be a Space Invader! Benches around the Courts and MTI must remain separated. In communal areas where people need to be, chairs must be spaced appropriately, 1 to a table unless it is a huge table that can accommodate 2m spacing! CPC and Great Hall are supervised spaces when in use and so extra chairs can be left in situ BUT SD MUST still be adhered to.