Juniper Ventures Limited

(Juniper Pursuits Ltd is a subsidiary of Juniper Ventures Limited)

COVID-19

Risk Assessment Pack Updated January 2021



Documents Included

- CJ.1 Updated COVID 19 Full Risk Assessment
- CJ.2 Updated COVID 19 Catering Risk Assessment
- CJ.3 Updated COVID 19 Cleaning Risk Assessment
- CJ.4 Updated COVID-19 Individual Risk Assessment

The advice from the Government and other bodies will change. Information on the virus will change, and versions will be updated, consultation in place with Trade Unions, H&S committee, HR, and shared with all staff. In addition to this risk assessment are the services (catering and cleaning specific risk assessments) and Individual risk assessments.

Description of Activity	COVID 19 risk assessment					
Location	Full Juniper Covid-19 risk assessment cov	Full Juniper Covid-19 risk assessment covering all service areas/activities				
Completed by	Stuart McGregor Head of Health and Safet	iy				
Current Tier level	Tier 5 (Lock down) review date 4 January 2	2021				
Date of Assessment	15 th May 2020	Version	13 July 2020 7 September 2020 5 November 2020 (lock down) 28 December 2020 (Tier 4) 04 January 2021 (Tier 5)			

BUILDING	BUILDING									
What are the hazards?	Who & how might someone be harmed?	What are you currently doing to control risks?	Risk Rating L / M / H	What else do you need to do (if applicable)?	Action by who / when?	Date Completed				
Coronavirus (COVID-19) (CV19)	Employees, agency, visitors	1 Where possible staff that can safely work at home should continue to work at home. Office workers who can work effectively from home will continue to do so								
Exposure in the Office Someone entering the workplace with CV19	An employee / visitor enters the workplace with CV19 and passes it onto others	2 Staff with existing medical conditions that are especially vulnerable to COVID-19, need to be identified and to follow the current Government guidance, such as shielding and specific Tier guidance, see 'People' section for more information/controls. HR will have individual plans for these staff 3 A reduction in the numbers allowed within the office has been	MED							
	Causing severe infection/disease	reviewed and restricted during the increased local Tier controls and lockdowns for only essential front line staff, with a booking and authorisation process in place for workstations, only a very								

limited number of workstations are available and will be		
monitored		
4 A staggered start/finish times to reduce any contact or		
crowding in and out of premises where necessary		
5 Parking permits available for staff that have to travel to sites to		
eliminate/reduce use of public transport for multi-site visits		
6 Based on the premises layout we have increased entry/exit		
points to the premises for the staff members, which is away from		
the public entrance/exit main doors		
7 Hand sanitation at entry and exit points		
8 Office lay-out has implemented all workstations to be at least		
2m to ensure 2m distance assessed and managed and		
Managers to manage staff behaviour		
9 Using floor tapes or paint to mark areas to help staff maintain		
2 metre distance where possible		
10 If the work cannot be completed at home, and staff return to		
work (authorised return) , managers need to plan for the		
minimum number of staff that is required to complete the work		
on site within the building/s, with authorisation from manager		
11 Regular floor walks and inspections by Manager/s to ensure		
the standards remain high and any concerns are rectified		
12 Managers to monitor the use and set up of the new changes		
and how staff are adhering to these		
13 Increased cleaning regime in place, that is managed,		
monitored, with a quality management system in place, including		
spot checks and cleaning audits completed by managers		
14 Desk / IT / telephone sanitiser wipes available for staff to		
complete regular cleans; promote this via use of signage, giving		

assurance and self-ownership for frequent cleaning of office	
items, areas	
15 Control of visitors coming into the building, reduce the need	
to meet face to face, and have telephone/teleconference	
meetings where possible. Advising not to invite visitors into the	
office environment where-ever possible. Keeping a record of all	
staff and contractors for 21 days. Following Tier restrictions and	
lock down measures with only essential service works being	
arranged	
16 If essential front line staff work require off site visits, they	
should be encouraged not to come back into the office or prior to	
the visit where possible, if they are also able to continue to work	
from home to minimise contact so much as possible	
17 Liaison with schools/clients/Newham LA on their building	
specific risk plans, specifically their covid-19 risk management	
and social distancing plan/risk assessment, defined face	
covering areas/plan and sharing of risk assessments and	
ensuring good communication is in place	
18 Cessation of all non-essential face-to-face staff/visitor	
meetings (as appropriate to service needs) i.e. telephone	
contact; use of online access to services; postponement of	
meetings, reduction in frequency of management/staff meetings,	
where possible;	
19 Removal of hot desk set up, staff to be working in their own	
fixed working areas/desk and not to move around and share	
desks or IT equipment – a thorough clean between use is	
required	
20 Mandatory instruction for all persons to wear face covers	
throughout the building except when seated at your workstation,	
following the safe use of coverings (washing/sanitising hands -	

		washing face coverings frequently – use sealed bag when not in use)			
Coronavirus	Employees,	1 Use of stairs to be promoted in a controlled manner, with floor			
(COVID-19) (CV19)	agency, visitors	marking to social distancing of 2 metres			
Exposure from touch points, Corridors and stairs Someone entering the workplace/lifts with CV19	An employee / visitor enters the workplace with CV19 and passes it onto others Causing severe infection/disease	 2 Cleaning regime increased to regularly sanitise and wipe the surfaces that staff may come in contact with i.e. buttons, doors, handrails etc. install sanitiser mobile units within/around lifts/lobbies 3 Leave any doors that are not fire rated and internal doors open where possible, if this is not possible due to security concerns re: town hall, touch points to be cleaned throughout the day, as a planned increased cleaning regime 5 Introduce one-way flow system in office corridors and stairs and throughout the building where reasonable possible 6 Use of face coverings in lifts and all office areas when moving around building 	MED		
Coronavirus	Employees,	1 Keep ventilation systems maintained regularly and adjusting			
(COVID-19) (CV19)	agency, visitors	systems where necessary 2 Ventilation systems maintained	MED		
Poor Circulation of fresh air Someone entering the workplace/offices with CV19, staff fear and concerns of becoming infected by air circulation	An employee / visitor enters the workplace with CV19 and passes it onto others Causing severe infection/disease	 3 Town Hall only has windows for ventilation which must be used (open) to ensure sufficient air change and dilution of air 4 Keep the systems operating continuously, i.e. not shutting down at weekends 5 Switch any air handling units with recirculation to 100% outdoor air 6 Do not use table or ceiling fans unless there is fresh air being circulated, and not circulating stuffy air, and do not face fans directly at people 			

		7 School site staff to follow up with client/school if any concerns with their building ventilation			
Coronavirus (COVID-19) (CV19)	Employees, agency, visitors	1 An increased formal cleaning regime, employees (authorised front line essential staff) are cleaning equipment more often and key areas and touch points are identified and form part of the			
Contaminated workplace	An employee / visitor enters the workplace with CV19 and passes	specified cleaning schedule (keyboards, work surfaces, door handles etc.) There are sanitising units/stations including desk and PC wipes/spray including the shared items such as photocopier 2 Hand sanitisers have been placed in the workplace	MED		
Someone entering the workplace/offices with CV19	it onto others Causing severe infection/disease	 2 Hand sanitisers have been placed in the workplace 3 Extra hygiene requirements that includes the need for more hand washing has been implemented and regular reminders for staff 4 Multi-use handtowels are not used to dry hands 5 This information has been passed onto employees, and staff completed infection control training 6 Confirmed cases of work-related CV-19 to be reported via accident and incident report, usual accident procedure. Potential for RIDDOR report to HSE; if necessary 7 BC planning includes a preparedness for cleaning regime in light of potential outbreaks, and confirmed cases of covid-19 procedure with specific cleaning risk assessment 8 Following the test and trace procedures and ensuring all staff are aware on the procedures 9 Raising the profile and staff behaviour constant reminders to stay at home if they or someone in their household or if a visitor has any cv19 symptoms (persistent cough, high temperature or has lost their sense of taste or smell) 			

Coronavirus	Employees,	1.Social distancing standards marked out clearly around the			
(COVID-19) (CV-19)	agency, visitors	buildings to keep staff at least 2 metres apart at all times			
		2. Fire evacuation advice is for the removal of fire evacuation			
Gatherings, emergency	An employee /	assembly points and to have full dispersal evacuation away from			
evacuation, offices,	visitor enters the	the buildings, if this is supported by full building sweep by fire			
non-school	workplace with	wardens, i.e. no need to gather groups of staff together. Staff	MED		
settings/school	CV19 and passes	should disperse to the surrounding areas, streets and not gather	NED		
settings	it onto others	in groups, ensure a review of the client's fire evacuation			
		changes in any re covid-19 and gathering/assembling in			
		numbers.			
Someone entering the	Causing severe infection/disease	3. PEEPS 'personal emergency evacuation plans' to be			
workplace/offices with	Inection/disease	reviewed with the identified evacuation team/ 'buddy' packs			
CV19		should be installed next to the evacuation transfer/meeting			
		location to include surgical face masks for all parties involved in			
		personal evacuation procedure			
		4. Manage any gathering of people close to the building			
		entrances and disperse groups if necessary, keeping a safe			
		distance themselves			
		5. Ensure all staff are inducted to any evacuation procedures,			
		including fire drills			
Coronavirus	Employees,	1. Review of existing first aid needs analysis in line with Health			
(COVID-19) (CV-19)	agency, visitors	and Safety Executive (HSE) Guidance on First Aid cover			
. , . , .		2 It is accepted that 2m social distancing cannot be maintained			
Provision of first aid in	An employee /	during the delivery of first aid, but physical contact should be			
	visitor enters the	kept to a minimum e.g. injured person can apply cold pack,			
buildings	workplace with	wipe, plaster where able to do so. Remember the 3P model –	LOW		
	CV19 and passes	preserve life, prevent worsening, promote recovery			
Someone entering the workplace/offices with	it onto others	3 Preserve life: CPR			

CV19, giving first aid to	Causing severe	Call 999 immediately – tell the call handler if the patient
staff/others	infection/disease	has any COVID-19 symptoms
		Ask for help. If a portable defibrillator is available, ask for it
		 Before starting CPR, to minimise transmission risk, use a cloth or towel to cover the patient's mouth and nose, while still permitting breathing to restart following successful resuscitation If available, use:
		 a fluid-repellent surgical mask disposable gloves
		 eye protection apron or other suitable covering
		Only deliver CPR by chest compressions and use a defibrillator (if available) – don't do rescue breaths (for CPR in paediatric
		settings see specific guidance from the Resuscitation Council UK)
		Prevent worsening, promote recovery: all other injuries or illnesses -
		If you suspect a serious illness or injury, call 999 immediately – tell the call handler if the patient has any COVID-19 symptoms
		If giving first aid to someone, you should use the recommended equipment listed above if it is available

		 You should minimise the time you share a breathing zone with the casualty and direct them to do things for you where possible After delivering any first aid Ensure you safely discard disposable items and clean reusable ones thoroughly Wash your hands thoroughly with soap and water or an alcohol-based hand sanitiser as soon as possible 			
		 3 Supported and followed up with hand hygiene where necessary 4 Ensure the level of first aid trained staff are covering the office and building rota's 5 Ensure the first aid training is reviewed and renewed 			
Coronavirus (COVID-19) (CV-19)	Employees, agency, visitors	 Social distancing in place with signage Zip taps/Kettles to be cleaned before and after use with appropriate cleaning material/wipes 			
Office/Kitchen break out areas Someone entering the workplace/offices with CV19	An employee / visitor enters the workplace with CV19 and passes it onto others	 3 Staff behaviour staying alert to others around them and keeping to the 2 metre rule as a minimum wherever possible 4 Staff to be encouraged to wash their hands before / after eating for at least 20 seconds 5 Staff to dispose of their food waste into the bins provided, and clean their cutlery and put away 	MED		
	Causing severe infection/disease	 6 Staff not to share cups and cutlery 7 Staff to be encouraged to go outside during breaks 8 These areas to have an increased cleaning regime in place 9 Staff are not to make other staff tea/coffee's/drinks 			

Coronavirus	Employees,	1 Social distancing in place with signage			
(COVID-19) (CV-19)	agency, visitors	2 Staff to stay alert as these are single door access and egress			
		and potential non 2 metres meeting points, therefore proceed	MED		
Toilet areas and locker	An employee /	with caution and be prepared to take a step back to allow others	MED		
rooms	visitor enters the	to keep the 2 metre rule wherever possible			
	workplace with	3 Washing hands is paramount, thoroughly for at least 20			
Compose ontoning the	CV19 and passes	seconds			
Someone entering the workplace/offices with	it onto others	4 There is an increased cleaning regime in these areas,			
CV19	Causing severe	systematic more frequent cleaning, verified and documented			
0015	infection/disease	and emphasis on hand touch surfaces			
		5 Closed off sinks to create social distancing			
		6 Review foot or elbow door opening options to reduce hand			
		touching surfaces/doors access egress points, or discuss with			
		Newham FM to have these doors wedged open to prevent			
		touch points			
		7 Limit use to one person at time in smaller toilet areas			
		8 Ensure the ventilation is sufficient			
		9 Any changes to use of toilets such as opening to the public			
		should be reviewed with Juniper in terms of increasing potential			
		risk of covid transmission and required control measures			
		10 Use of face coverings when moving around buildings, except			
		when working at your desk			
Coronavirus	Employees,	1 All meetings for those staff working in the office should be			
(COVID-19) (CV-19)	agency, visitors	completed virtually to keep and prevent the gathering of different			
. , , ,		staff members coming together within an enclosed room			
Meeting rooms	An employee /	environment			
meeting rooms	visitor enters the	2 Keep meeting room doors open and maintain the allotted			
	workplace with	numbers allowed	MED		

Someone entering the	CV19 and passes	3 Do not use rooms that are not well ventilated			
workplace/offices with	it onto others	4 Avoid sharing pens and any other items			
CV19		5 Hand sanitiser is provided in meeting rooms			
	Causing severe	6 Meeting etiquette while entering and leaving to ensure			
	infection/disease	distancing			
		7 Meetings dates and attendance recorded re potential tracking requirements			
		8 Small meeting rooms should be avoided unless you can social			
		distance to 2m and has good ventilation			
Coronavirus	Employees,	1 Increased cleaning regime in place, this is a detailed and			
(COVID-19) (CV-19)	agency, visitors	managed/monitored regime, with identified touch points, and			
		times of cleaning/increased cleaning, this schedule should be			
Hygiene Control	An employee /	available for inspection			
	visitor enters the	2 To include ongoing detailed cleaning specification which is	MED		
Someone entering the workplace/offices with	workplace with	managed and monitored as a quality management system			
CV19	CV19 and passes	3 Specified cleaning material to be used for virus infection			
	it onto others	control, COSHH data sheets and risk assessments updated			
		4 Frequent cleaning of work areas and equipment is an absolute			
	Causing severe	requirement such as IT equipment, and touch points			
	infection/disease	5 Cleaning products as per no.3 being left out in cleaning			
		stations/defined desk areas, for staff to use and clean their			
		desks, chairs, telephone, IT equipment prior and after use where			
		necessary and having increased adequate disposal			
		arrangements			
		6 Cleaning to be reviewed and altered to change any increasing			
		risk factors, confirmed COVID-19 cases within specific areas of			
		the building/s			

		 7 Pre-use, and after-use cleaning of shared items such as photocopier 8 Signage and posters installed around the buildings to build good awareness of increased hand washing, washing hands on commencement of work, avoidance of touching face and to cough or sneeze into a tissue which is binned or into your arm if no tissue available 9 Increase of waste removal from bins during the day 10 Shower and changing areas must be kept clear of staff personal items and that social distancing is achieved as much as possible 11 Cleaning of items, goods, deliveries entering the buildings, and increasing cleaning facilities for staff in these areas 12 Cleaning procedure for vehicles as well as buildings, cleaning with appropriate approved cleaning products, in a well-ventilated area, bringing the door windows down when cleaning 13 No personal staff deliveries allowed to site 14 Staff not to bring in shopping and other items at lunch time, to restrict the items brought into the workplace that could potentially be contaminated 			
Coronavirus (COVID-19) (CV19) Statutory Compliance	Employees, agency, visitors An employee / visitor enters the	 Manage and review school Kitchen statutory compliance to ensure the equipment is up to date re service/maintenance, managed and monitored and any 'start-up' programmes for service items and equipment are completed, this includes PA Testing for all Juniper related equipment Control of all contractor re: COVID-19 pre assessment before 	LOW		
Someone entering the workplace/offices with CV19	workplace with CV19 and passes it onto others	allowing anyone in the buildings, and a review of their risk assessment against current COVID-19 risk assessments and to			

		ensure inductions are in place that includes our COVID-19 control measures and social distancing requirements 3 Ensure any flushing of little used outlets re 'legionella' management is completed in line with the site premises management controls			
Coronavirus	Employees,	1 Working at home for all non-essential non-front line staff, as			
(COVID-19) (CV19) Social distancing Someone entering the workplace/offices with CV19	agency, visitors An employee / visitor enters the workplace with CV19 and passes it onto others Causing severe infection/disease	 this isolates and protects the person completely and reduces crowding/numbers within the office, and following the government guidance for local Tier levels and systems of control re isolation from people. Tier levels may change, and Juniper continue to follow government guidance with front line essential staff only continuing to work 2 Social distancing planning completed in liaison with Landlords, Schools, clients. Knowing the numbers of staff required allowed per floor/building with the 2metre distance rule wherever possible 3 It should be understood that the exposure time of spending time in close proximity forms part of the risk assessment, and control measure 4 Where social distancing of at least 2 metres cannot be followed this should be alerted to managers and the Head of Health and Safety to ensure the 1m plus mitigation is agreed and implemented 5 Screens (sneeze screens) used at some sites as an additional control measure at the set identified social distancing areas, 	MED		
		servery, desks, lifts, meeting rooms, work locations where there is a closer than 2 metre distance or have face to face set up (not advised) or if work conditions (specific locations) cannot be			

		 altered or managed by work changes (one person in this area, rotation of work area, limit and control etc. 6 Reduce the time spent in the office if the work can be completed at home, or if the work involving other aspects such as site visits and continue home to complete working from home. If homework is not available for front line workers then managers should review the staff rota and work activities in relation to being in close contact with other staff to reduce potential exposure time 7 Although the 2 metre or the 1m plus mitigation rule is now very much known, the assessment of risk of moving and working further apart should be considered and not just the minimum, although this is the set standard 8 All areas of the work place should aim to keep the social distancing and minimise contact at all times wherever possible 			
Coronavirus (COVID-19) (CV19) Accidents, Security incident, emergency Someone entering the workplace/offices with CV19	Employees, agency, visitors An employee / visitor enters the workplace with CV19 and passes it onto others Causing severe infection/disease	 1 It is important to understand and make clear that in the event of any emergency situation, staff do not have to stay 2 metres apart if it the event of an unsafe 'event' such as a terrorist attack, fire, explosion risk where large numbers may have to move fast to evacuate 2 Staff involved in emergency situations that may bring them into close contact to ensure that you pay particular attention to sanitation measures immediately afterwards including washing of hands 3 A review of security in relation to any areas, doors being open more has been completed and monitored, with communication a key control measure on our shared sites 	MED		

Coronavirus	Employees,	1 Refer to specific covid-service risk assessment			
(COVID-19) (CV19)	agency, visitors	2 All relevant staff will be inducted on the service risk	MED		
		assessment in addition to the overall covid risk assessment			
Activity/Kitchen and	An employee /	3 Kitchen to have individual site assessments			
Cleaning service	visitor enters the	4 Cleaning assessment is reviewed and amended where			
	workplace with	necessary, and site specific if needed			
	CV19 and passes				
Someone entering the	it onto others				
workplace/offices with					
CV19					
	Causing severe				
	infection/disease				

What are the hazards?	Who & how might someone be harmed?	What are you currently doing to control risks?	Risk Rating L / M / H	What else do you need to do (if applicable)?	Action by who / when?	Date Completed
Coronavirus (COVID-19) (CV19)	Employees, agency, visitors	1 Staff that are <u>clinically extremely vulnerable</u> who would have received a letter confirming this or have been told directly by your GP or hospital to shield should still follow the current				
Staff with existing medical conditions (Protecting staff at higher risk of covid-19)	An employee being asked to come into work that have existing medical	government guidance, and update their individual risk assessment if any changes. A fourth tier of restrictions was introduced on 20 December 2020, and fifth tier on 4 January, meaning this groups continues to not come into work 2 Juniper will follow specific guidance on what will happen <u>if</u> <u>there is a local lockdown</u> including any direct or national advice	MED			

Someone entering the	are clinically	for any changes to shielding. Upper tier local authorities		
workplace/offices with	extremely	(UTLAs) are leading local outbreak planning, within a national		
CV19	vulnerable, or	framework, and with the support of NHS Test and		
	clinically	Trace, PHE and other government departments. You could be		
	vulnerable	advised to shield again in the future if the situation changes and		
		there is an increase in the transmission of COVID-19 in the		
	Causing severe	community.		
	infection/disease	3 Staff who are clinically vulnerable should follow the same		
		control measures to work from home wherever possible, and		
		must follow the covid secure building control measures if your		
		role is a front line role and the work cannot be completed at		
		home, including observing good hand and respiratory hygiene,		
		adults being able to social distance from each other wherever		
		possible, and avoiding wherever possible time spent within One		
		metre of others (people who live with those who are clinically		
		extremely vulnerable or clinically vulnerable can attend the		
		workplace)		
		4 Juniper workplaces have been confirmed as covid-secure		
		workplaces, a covid-secure assessment was completed on the		
		Town Hall, this guidance and sharing of risk assessments with		
		Newham LA, and requesting their covid-19 secure risk		
		assessment on the Town Hall		
		5 Pregnant staff are in the 'clinically vulnerable' category and		
		follow the above control measures, in addition to this an		
		individual pregnant/expectant mother risk assessment should be		
		completed		
		6 Staff who may be otherwise be at increased risk from		
		coronavirus such as factors including		
		age/sex/deprivation/ethnicity all are able to at work as the		
		control measures of having buildings covid-secure, with controls		

measures identified within this risk assessment and supported	
further controls within the individual risk assessment	
7 Juniper have an individual risk assessment for every member	
of staff	
8 For any workplace sites including schools, the individual risk	
assessment takes account of the specific duties to those with	
protected characteristics, this should part of the detailed	
individual risk assessment before any changes or return to work	
9 Support for staff with mental health and wellbeing concerns,	
following your individual risk assessment completion	
10 All school staff are advised that the control measures within	
this assessment, will reduce the risk of transmission, but is an	
ongoing behaviour action that includes observing good hand	
and respiratory hygiene and maintaining social distancing as set	
out in this risk assessment wherever possible	
11 Managers and supervisors and all staff must be able to	
'remind' staff to social distance and wear the necessary PPE or	
face coverings when needed without the fear or concern. The	
'behaviour watch' is a supportive ongoing dynamic risk control,	
and the awareness of the potential transmission of CV-19 and	
the potential severity becomes a very control measure with	
close monitoring	
12 Communication with staff and managers is vital to ensure the	
risks and control measures are implemented, including any	
changes to the individual staff member and changes to the risk	
*Note - National Annual flu programme	
As part of the 2020 to 2021 flu vaccination programe, all other	
members of households of those who are identified as clinically	
extremely vulnerable at the time of the flu programme delivery	
are eligible for free flu vaccinations.	

		Most people who are clinically extremely vulnerable will already be eligible for a free flu vaccination.			
Suspected case of Coronavirus (COVID-19) (CV19) Someone becomes ill within the workplace/those with symptoms at work or at home	Employees Visitors Contracted CV19 by any means Causing severe infection/disease	 Ensure staff with COVID-19 symptoms stay at home, a high temperature, new and persistent cough, or anosmia (change in taste or smell) self-isolate for at least 10 days from when the symptoms started and undertake a COVID-19 test. Managers and supervisors to ensure this is part of your teams health and safety training and awareness, via one to ones, team meetings, sharing of risk assessment Staff that have tested positive for COVID-19 should self- isolate for at least 10 days starting from the day of when the test was taken Where staff have tested positive whilst not having symptoms but develop symptoms during the isolation period, should then restart the 10 day isolation period from the day of the symptoms Ensure that staff living in a household or support bubble with someone who has symptoms and those who are advised to self- isolate as part of the government's test and trace service stay at home Enable staff that are self-isolating the option to work from home if appropriate, ensure good communication is in place and support where required, this may mean a review of their current workload or work concerns at this time 	MED		
Coronavirus (COVID-19) (CV19) temporary change to work environment	Employees, agency, visitors	 Staff to follow the working from home guidance Manager to complete working at home risk assessment Manager and staff to ensure communication is in place for any concerns with DSE, wellbeing Homeworking staff to complete DSE self-assessment form 	LOW		

Staff working at home	Staff working at	5 Individual user tries to mimic the set-up of the working			
	home that are not	arrangement			
	set up for	6 Communication between individuals / teams and Managers is			
	homeworking,	clear			
	DSE, posture,	7 Staff giving clear guidance on wellbeing and contact details for			
	MSD, stress,	support			
	anxiety	8 Those that do not have appropriate DSE set up at home,			
		should be offered to work from the covid-secure office, or further			
		guidance support to enable them to work at home safely			
Coronavirus	Employees,	1 Only necessary contractors to be allowed on site, and			
(COVID-19) (CV19)	agency, visitors	approved/authorised, reduced at higher tier levels with stricter			
		control and reduction to ensure only necessary contractor works	MED		
.	An employee /	taking place			
Contractors	visitor enters the	2 Agency staff and contractors to be inducted to the normal			
	workplace with	health and safety induction processes, including the current			
Someone entering the	CV19 and passes	COVID-19 risk assessments and social distancing requirement,			
workplace/offices with	it onto others	and promotion of hand cleaning and hygiene			
CV19		3 Pre-communicated to ensure a health check question-set is			
		asked regarding any symptoms of COVID-19, and information			
	Causing severe	given to them before they get to site on the social distancing			
	infection/disease	and COVID-19 management standards in place			
		4 Normal risk assessment, method statements review,			
		considering if the works will compromise social distancing for			
		others, such as increasing of numbers of people by contractors			
		working in staff areas breaking the social distancing			
		requirements			
		5 Normal management and monitoring of contractor works,			
		wellbeing on site			
		6 Consideration of changing times of contractor works, out of			
		hours, during less busy times			

		7 Working together with any shared sites, employers, landlords			
		sharing risk assessment, COVID-19 social distancing			
		management, and sharing information concerning visitors that			
		may affect their own risk management and social distancing			
		standards			
Coronavirus	Employees,	1 Continue to wear/use any PPE that is normally used as part of			
(COVID-19) (CV19)	agency, visitors	your workplace activities			
		2 COVID-19 infection risk is managed by working at home			
		wherever possible; staying at least 2 metres away from each	MED		
Personal Protective	An employee /	other in the workplace wherever possible, increased hygiene	MED		
Equipment (PPE)	visitor enters the	measures, fixed teams and removal of hot desk environment			
	workplace with	and not through the use of PPE			
Someone entering the	CV19 and passes	3 We do not encourage the precautionary use of extra PPE to			
workplace with CV19	it onto others	protect against COVID-19 outside clinical settings, in kitchens			
		where the risk assessment has identified concerns with social			
	Causing severe	distancing to 2m it has been agreed that the use of PPE/Face			
	infection/disease	coverings are to be worn following the face covering guidance			
		on use below			
		4 Managers need to review their current COVID-19 risk			
		assessment and if PPE is identified as a control measure to			
		ensure an adequate supply is available and monitored; staff			
		should know the correct use of this including disposal methods			
Coronavirus	Employees,	1 It is important to note that coronavirus (COVID-19) needs to			
(COVID-19) (CV19)	agency, visitors	be managed based on hierarchy or system of control. It includes			
		social distancing, high standards of hand hygiene, increased			
		surface cleaning, fixed teams or partnering, and other measures			
Face Coverings	An employee	such as using screens or barriers to separate people from each	MED		
Someone entering the	/agency staff	other. Some buildings/clients will have face coverings enforced			
workplace with CV19	commuting and	as a control measures, such as secondary school corridors, all			
	using public	staff should follow the sites covid-control measures.			
	transport				

In the town hall and any Newham office building, the wearing of	
face coverings is required everywhere except when seated at	
your work station	
2 In England, you must wear a face covering in the following	
indoor settings (a list of examples for each is included in the	
brackets):	
• public transport (aeroplanes, trains, trams and buses)	
 transport hubs (airports, rail and tram stations and 	
terminals, maritime ports and terminals, bus and coach	
stations and terminals)	
 shops and supermarkets (places which offer goods or 	
services for retail sale or hire)	
 shopping centres (malls and indoor markets) 	
auction houses	
premises providing professional, legal or financial	
services (post offices, banks, building societies, high-	
street solicitors and accountants, credit unions, short-	
term loan providers, savings clubs and money service	
businesses)	
 premises providing personal care and beauty 	
treatments (hair salons, barbers, nail salons, massage	
centres, tattoo and piercing parlours)	
 premises providing veterinary services 	
 visitor attractions and entertainment venues 	
(museums, galleries, cinemas, theatres, concert halls,	
cultural and heritage sites, aquariums, indoor zoos and	
visitor farms, bingo halls, amusement arcades,	
adventure activity centres, indoor sports stadiums,	

funfairs, theme parks, casinos, skating rinks, bowling	
alleys, indoor play areas including soft-play areas)	
 libraries and public reading rooms 	
places of worship	
funeral service providers (funeral homes, crematoria	
and burial ground chapels)	
 community centres, youth centres and social clubs 	
exhibition halls and conference centres	
public areas in hotels and hostels	
 storage and distribution facilities 	
- Storage and distribution facilities	
You are expected to wear a face covering before entering any of	
these settings and must keep it on until you leave unless there	
is a reasonable excuse for removing it. More detailed advice on	
the application of these requirements in different settings can be	
found in the Government's guidance for working safely.	
You should also wear a face covering in indoor places not listed	
here where social distancing may be difficult and where you will	
come into contact with people you do not normally meet.	
The Department for Education has updated its guidance on the	
use of face coverings for schools and other education	
institutions that teach people in Years 7 and above in England.	
3 How to wear a face covering	
A face covering should:	

cover your nose and mouth while allowing you to
breathe comfortably
fit comfortably but securely against the side of the face
be secured to the head with ties or ear loops
be made of a material that you find to be comfortable
and breathable, such as cotton
ideally include at least two layers of fabric (the World
Health Organisation recommends three depending on
the fabric used)
unless disposable, it should be able to be washed with
other items of laundry according to fabric washing
instructions and dried without causing the face
covering to be damaged
When wearing a face covering you should:
wash your hands thoroughly with soap and water for
20 seconds or use hand sanitiser before putting a face
covering on
avoid wearing on your neck or forehead
avoid touching the part of the face covering in contact
with your mouth and nose, as it could be contaminated
with the virus
change the face covering if it becomes damp or if
you've touched it
avoid taking it off and putting it back on a lot in quick
succession (for example, when leaving and entering
shops on a high street)
When removing a face covering:
wash your hands thoroughly with soap and water for
20 seconds or use hand sanitiser before removing

		 only handle the straps, ties or clips 			
		 do not give it to someone else to use 			
		• if single-use, dispose of it carefully in a residual waste			
		bin and do not recycle			
		 if reusable, wash it in line with manufacturer's 			
		instructions at the highest temperature appropriate for			
		the fabric			
		wash your hands thoroughly with soap and water for			
		20 seconds or use hand sanitiser once removed			
		For recommendations and requirements in specific settings			
		please check the Government's workplace settings guidance			
Coronavirus	Employees,	1 As far as possible managers have split teams that cannot			
(COVID-19) (CV19)	agency, visitors	work from home into small groups working together following			
		the social distancing set up, this is further reduced during any			
		lock down period wherever possible	MED		
Working in Groups	An employee / visitor enters the	2 Managers to identify materials, commonly shared items to			
		assess the need to share, and how these items can be safely	MED		
Someone entering the	workplace with CV19 and passes	used to reduce direct contact and cleaning of items, consider			
workplace/lifts with CV19	it onto others	zoned areas, pick up areas that are supported by cleaning			
	it onto others	material and hand sanitiser			
		3 Although the social distancing is at least 2 metres wherever			
	Causing severe	possible it is the time spent together that should also be			
	infection/disease	minimised as far as possible, following the principles of			
		prevention rule, eliminate / reduce / isolate / control			
		4 During higher tier work areas/conditions of increased risks,			
		where the schools may remote learn and have less pupils and			
		staff in the school the Juniper staff numbers will be reviewed			
		and a rota implemented to reduce the numbers of staff within			
		the setting and minimise contact wherever possible			

Coronavirus	Employees,	1 Working at home where possible is still a key control measure			
(COVID-19) (CV19)	agency, visitors	in managing the risk of covid and serious sickness, if they can't			
() ()		do the work from home, they come into work following the risk			
	An employee /	controls within this assessment	MED		
Work related travel		2 Minimise non-essential travel, considering and preferring to			
	agency catches	have remote options			
Being in close proximity of	the virus travelling	3 Minimise number of staff travelling together in any one			
people infected with		vehicle, using fixed partners, increasing ventilation and avoiding			
CV19 and/or increased	Causing severe	sitting face to face, wearing of face coverings, sitting at least 1m			
time spent in this	infection/disease	apart			
environment		4 Cleaning regime programme and in between shifts for			
		vehicles			
		5 Avoid public transport wherever possible, review has been			
		completed where front line staff who have to use public			
		transport have been able to change their work location to			
		reduce the amount of public transport travelling to a minimum to			
		reduce risk of transmission			
		6 Stagger working times to avoid busier times			
		7 Follow government advice for face coverings			
Coronavirus	Employees,	1 Providing clear consistent and regular communication to			
(COVID-19) (CV19)	agency, visitors	improve understanding for all staff throughout the pandemic			
		2 Providing early information instruction before any changes to			
		working practices	LOW		
Change management	An employee /	3 Managers risk assess if any changes to current risk	2011		
/communication/training	visitor enters the	assessments and update/include staff			
	workplace with	4 Guidance to staff on changes to work environment and			
Lack of awareness of risk	CV19 and passes	procedures in advance of any physical changes			
	it onto others				
Stress and anxiety					

	Sickness related	5 Increased staff communication to raise awareness of potential	
	to stress due to	risks; directing staff to Government, NHS, PHE and local	
	lack of	guidelines and resources:	
	communication	NHS guidance, <u>how to wash your hands video</u> (20 second	
		rule)	
		 NHS <u>advice on CV19</u>; risks, symptoms, how CV19 is 	
		spread, how to avoid catching or spreading germs	
		 Juniper face book pages and newsletter 	
		Information posters displayed at key points and throughout	
		premises	
		Visual messages, use of pictures, in addition to written	
		information	
		Hygiene requirements (handwashing etc.) and practise of	
		social distancing (2 metres) wherever possible	
		Newham PH information	
		 Infection control training and updates on risk control 	
		6 Additional consideration is given to those employees who may	
		be deemed to be at increased risk in the planning of work	
		activities	
		7 Advice on risks, symptoms and control measures	
		implemented relevant to the specific service / team	
		8 Employees to adhere to the 2m rule at work sites wherever	
		possible	
		9 Follow signage of egress and access to premises	
		10 Having clear guidance on trace and track measures and	
		clear guidance to managers and staff on actions required and	
		support available	
Coronavirus	Employees,	1 Managers to identify staff with stress or anxiety and complete	
(COVID-19) (CV19)	agency, visitors	a follow up stress risk assessment	
		2 Ongoing clear communication between individuals / teams	
		and Managers is clear	

Stress and anxiety	An employee /	3 Individual or team stress risk assessments to be completed			
	agency catches	4 For staff who have to come into work whether this is an			
Chance of catching	COVID-19 or	essential worker or they cannot work from home need to be			
COVID-19 by travelling or	concern of	communicated with by manager sharing risk assessments and	MED		
returning to work	catching virus	control measures for COVID-19 controls			
returning to work	causing stress	5 Ongoing clear communication between individuals / teams			
	and anxiety	and Managers is clear:			
	affecting the body	Agreed work activities			
	causing illness	Scheduled calls / contact time			
	and sick ness	 Access to Juniper resources e.g. Employee Assistance 			
		Programme (EAP)			
	Sickness related	Wellbeing and Health information			
	to stress				
Coronavirus	Employees,	1 Change management and information sharing is vital			
	agency				
(COVID-19) (CV19)	ugonoy	2 Support for staff wellbeing as some staff may be particularly	LOW		
		anxious about returning to work.			
	Causing severe	3 Juniper wellbeing support for mental health and wellbeing for			
Staff wellbeing	infection/disease	staff with Covid-19 related concerns			
		4 Regular meetings, and checks on staff including any concerns			
Coronavirus		or further support that may be required			
(COVID-19) (CV19)		5 Remember to take care of your mind as well as your body and			
		get support if you need it. There are many sources of support			
		and information, such as guidance on looking after your mental			
Someone entering the		health and wellbeing and on supporting children and young			
school/workplace/offices		people.			
with CV19		Every Mind Matters provides simple tips and advice to take			
		better care of your mental health, including a COVID-19 hub			
		with advice for those staying at home.			

6 Many people find it helpful to remind themselves why what	
they are doing is so important. By staying at home, you are	
helping to protect your friends and family, other people in your	
community and the NHS.	
7 Things that you can do to help make staying at home easier:	
• keep in touch with friends and family over the phone or	
through social media	
• remember that physical exercise can be good for your	
wellbeing. Look for online classes or courses that can	
help you take light exercise in your home	
 plan ahead and think about what you will need to be 	
able to stay at home for the full duration	
ask your employer, friends and family for help to	
access the things you will need while staying at home	
 think about and plan how you can get food and other 	
supplies, such as medication, that you will need during	
this period	
check if your neighbourhood or local community has a	
volunteer system that could help bring you supplies or	
provide other support	
 ask friends or family to drop off anything you need or 	
order supplies online or by phone, making sure these	
are left outside your home for you to collect	
think about things you can do during your time at home	
such as cooking, reading, online learning and watching	
films	

		If you need help for a mental health crisis, emergency or breakdown, seek immediate advice and assessment. Even during the COVID-19 pandemic, urgent mental health support is available to adults and children around the clock. Find your <u>local</u> <u>NHS helpline</u> by searching for your postcode or home town in a new service finder, and or seeking direct help from your line manager, Hr, health and safety, senior management.			
Coronavirus (COVID-19) (CV19) Particular needs of different groups/risks increased due to changes and lack of consideration	Employees, agency, visitors	 Managers to review and make reasonable adjustments to avoid disabled workers being put at risk Assessing the health and safety risks for new or expectant mothers Completion of the individual risk assessment and making reasonable adjustments Ensure good communication is in place, sharing risk assessments and control measures in a timely manner 	MED		
Someone entering the workplace/offices with CV19					
Coronavirus (COVID-19) (CV19) Refusal of vaccinations Someone entering the	Employees, agency, visitors Virus moves from person to person Causing mild to	1 Awareness of vaccination to form part of the staff training programme, aligning to government, Newham PH guidance 2 Updating the individual risk assessment with the details of dates, confirming vaccinations or if staff have refused vaccination. Reviewing the risk to others, and the individual if not having the vaccination and updating individual risk	MED		
workplace/offices with CV19	severe infection and death	assessment, control measures and if the work activities can be safely be completed 3 Follow Hr guidance			

Test and Trace – Planning Response to any Infection								
	What are the hazards?	Who & how might someone be harmed?	What are you currently doing to control risks?	Risk Rating	What else do you need to do (if applicable)?	Action by who / when?	Date Completed	

			L/M/		
			н		
(Test and Trace)	Employees,	1 Juniper and staff must ensure they understand the NHS test			
	agency, Pupils,	and trace requirements and that staff members understand			1
Coronavirus	visitors	that they will need to be ready and willing to:	LOW		
(COVID-19) (CV19)	Causing severe	book a test if they are displaying symptoms. Staff			
	infection/disease	and must not come into work if they have symptoms,			
		and must be sent home to self-isolate if they develop			1
Someone entering the		them in work.			1
school/workplace/offices with CV19		provide details of anyone they have been in close			
013		contact with if they were to test positive for			
		coronavirus (COVID-19) or if asked by NHS Test and			
		Trace			
		self-isolate if they have been in close contact with			1
		someone who develops coronavirus (COVID-19)			
		symptoms or someone who tests positive for			
		coronavirus (COVID-19)			1
		2 Anyone who displays symptoms of coronavirus (COVID-19)			
		can and should get a test. Tests can be booked online			1
		through the NHS testing and tracing for coronavirus website,			
		or ordered by telephone via NHS 119 for those without access			1
		to the internet. Essential workers, which includes anyone			1
		involved in education or childcare, have priority access to			
		testing.			
		3 If someone tests negative, if they feel well and no longer			
		have symptoms similar to coronavirus (COVID-19), they can			
		stop self-isolating. They could still have another virus, such as a cold or flu – in which case it is still best to avoid contact with			
		a colu of hu – in which case it is still best to avoid contact with			

		other people until they are better. Other members of the th			
		other people until they are better. Other members of their			
		household can stop self-isolating.			
		4 If someone tests positive, they should follow the 'stay at			
		home: guidance for households with possible or confirmed			
		coronavirus (COVID-19) infection' and must continue to self-			
		isolate for at least 10 days from the onset of their symptoms			
		and then return to work only if they do not have symptoms			
		other than cough or loss of sense of smell/taste. This is			
		because a cough or anosmia can last for several weeks once			
		the infection has gone. The 10 day period starts from the day			
		when they first became ill. If they still have a high temperature,			
		they should keep self-isolating until their temperature returns			
		to normal. Other members of their household should continue			
		self-isolating for the full 10 days.			
(Confirmed cases)	Employees,	1 Juniper must take swift action when they become aware			
	agency, Pupils,	that someone who has attended has tested positive for			
Coronavirus	visitors	coronavirus (COVID-19).	LOW		
		2 Based on the advice from the health protection team, Local			
(COVID-19) (CV19)	Causing severe	Authority Public Health Juniper must send home those people			
	infection/disease	who have been in close contact with the person who has			
Someone entering the		tested positive, advising them to self-isolate for 10 days since			
school/workplace/offices with		they were last in close contact with that person when they			
CV19		were infectious. Close contact means:			
		 direct close contacts - face to face contact with an 			
		infected individual for any length of time, within 1			
		metre, including being coughed on, a face to face			
		conversation, or unprotected physical contact (skin-			
		to-skin)			

proximity contacts - extended close contact (within 1
to 2 metres for more than 15 minutes) with an
infected individual
travelling in a small vehicle, like a car, with an
infected person
3 Household members of those contacts who are sent home
do not need to self-isolate themselves unless the child, young
person or staff member who is self-isolating subsequently
develops symptoms. If someone in a group that has been
asked to self-isolate develops symptoms themselves within
their 10-day isolation period they should follow <u>'stay at home:</u>
guidance for households with possible or confirmed
coronavirus (COVID-19) infection'. They should get a test,
and:
if the test delivers a negative result, they must remain
in isolation for the remainder of the 10 day isolation
period. This is because they could still develop the
coronavirus (COVID-19) within the remaining days.
if the test result is positive, they should inform their
setting immediately, and must isolate for at least 10
days from the onset of their symptoms (which could
mean the self-isolation ends before or after the
original 10 day isolation period). Their household
should self-isolate for at least 10 days from when the
symptomatic person first had symptoms, following
stay at home: guidance for households with possible
or confirmed coronavirus (COVID-19) infection'

		Further guidance is available on <u>testing and tracing for</u> <u>coronavirus (COVID-19)</u> .			
(Outbreak)	Employees,	1 A plan of communication with staff and others forms part of			
	agency, Pupils,	our risk control and our outbreak preparedness, this is			
Coronavirus	visitors	detailed and supported by the manager's checklist and toolkit			
(COVID-19) (CV19)		2 If Juniper or the sites staff are working at have two or more	LOW		
Notification of confirmed	Causing severe	confirmed cases within 14 days, or an overall rise in sickness			
Covid-19/	infection/disease	absence where coronavirus (COVID-19) is suspected, they			
Outbreaks in the		may have an outbreak, and <u>must</u> continue to work with their local health protection team/Public Health who will be able to			
workplace		advise if additional action is required.			
		In some cases, health protection teams may recommend that			
		a larger number self-isolate at home as a precautionary			
Someone entering the		measure, Juniper will follow the professional guidance			
school/workplace/offices with		3 If you are notified that someone who has Covid-19 visited			
CV19		the setting during the infectious period (48 hours prior to, and			
		10 days after, the onset of symptoms or date of the test if			
		asymptomatic) please contact the London Coronavirus			
		Response Cell (LCRC): <u>LCRC@phe.gov.uk</u> or 0300 303			
		0450 and/or PH at Newham Council.			
		https://www.gov.uk/guidance/contacts-phe-health-			
		protection-teams			
		4 Also let London Borough of Newham know by emailing them			
		direct – Public Health			
		The following is helpful information to provide if you have it:			

 Your PHE London Coronavirus Response Cell (LCRC) reference if you have one The number of positive cases, their age and if they are household contacts. The date of positive test(s), of symptom onset and when they last visited the workplace If any of the cases have been admitted to hospital 	
a nursery) 5 Do not do anything else until you have spoken to the London Coronavirus Response Cell (LCRC). They will help you to undertake a risk assessment on what to do next	

Overall Residual Risk for Activity (L / M / H):

MEDIUM

Level of Risk	Suggested Action
LOW	Control measures are adequate but continue to monitor and review; ensure that they remain satisfactory and appropriate
MEDIUM	Control measures need to be introduced within a specified time period; continue to monitor and review
HIGH	Unless control measures can be immediately introduced to reduce the risk so far as is reasonabl practicable, the task or activity should be suspended

This Risk assessment has been prepared to assist the Juniper service areas to identify any potential risks plus to maintain a safe place of work during the Covid-19 Pandemic planning, specifically for school kitchen areas, with each school kitchen reviewing and making site specific. This is in addition to the catering risk assessments, catering FSMS, and the full Juniper Covid-19 risk assessment and individual risk assessment. The INDIVIDUAL ACTION CARD SHOULD BE COMPLETED TOGETHER WITH THIS RISK ASSESSMENT FOR EACH SITE.

Description of Activity	Catering Coronavirus Risk Assessment		
Location	Service areas		
Completed by	Enter Kitchen School Name and Name of	assessor	
Date of Assessment	15 th May 2020	Review Dates	13 July 2020 6 September 2020 19 September 2020 added face covering 06 January 2021

	Who & how		Risk	What else do you need to	Action	
What are the hazards?	might someone	What are you currently doing to control risks?	Rating	do	by who /	Date
	be harmed?		L / M / H	(if applicable)?	when?	Completed
Suspected case of	Employees	1 Floor markings installed to ensure 2m separation where				
Coronavirus	Visitors, Pupils	there is queuing (servery, till points etc.) this should be				
(COVID-19) (CV19)		reviewed with the school/client				
		*Note: Juniper Kitchens are following the guidance for food				
	Contracted CV19	businesses on coronavirus updated 6 January 2021, to	MED			
Transmission of COVID-19,	by any means	ensure we comply with the most current Government				
and lack of social	Working in close	guidance				
distancing in Kitchens	proximity with	2 Behaviour reminders for staff to keep to the social distancing				
	colleagues and	and working as a team wherever possible				
	others	3 Posters to be displayed to promote the awareness of social				
		distancing				

Breathing in	4 Area managers have reviewed kitchen layouts, numbers of
droplets, touching	staff, size of kitchen and agree changes to be implemented, in
contaminated	liaison with the school/client, all in relation to achieving social
surfaces	distancing within kitchen work areas, in relation to changes in
	Tiers and lockdown where we will implement more social
	distancing and operating rotas/teams, this may include
Causing severe	staggered work times, no face to face working if less than 2m
infection/disease	distance, avoiding shoulder to shoulder working (close
	working)
	5 Staff working zones to be marked out, that includes servery,
	cooking, dining hall areas, with staff having areas/zones to be
	working in wherever possible to limit and minimise close
	contact wherever possible
	6 Area manager, and local managers to complete checks on
	the social distancing requirement and remind staff when
	needed, where increased Tier local risks are higher only
	essential site visits are advised in discussion with the Head of
	Catering
	7 Staff to be focused on the achievement of maintaining the
	2m rule throughout their day wherever possible. Wherever
	possible social distancing of 2 metres between staff and
	others must be facilitated, both when working alongside each
	other and when working face to face. If this cannot be
	implemented in areas, then face coverings/Full face shields is
	required
	8 Increased hand washing periodically during the day, in
	addition to the normal hygiene kitchen requirements
	9 Installation of physical screens if kitchen areas are too small
	to maintain the 2m rule, this includes servery areas where
	large numbers of pupils will present themselves at the servery,
	this should be reviewed with managers and school

premises/managers, installation of physical screens should
not replace a hazard with another hazard
10 A review of the kitchen risk assessment if any changes to
the working environment, any concerns contact area manager
to review and update where necessary
11 The creation of flow work operation considered if the
kitchens are small and constrained, this will be individual staff
working in a small area and limited to only one person in that
area, who would complete the work task for that area then
pass on to other kitchen staff keeping 2m distance wherever
possible
12 A kitchen planner to be used at the start of the day/week to
carefully review the set up and working to ensure 2m
distancing is achievable, reflection on areas of concerns and
corrections required to be completed
13 Supervisor to manage and monitor the staff in order to
keep to the 2m rule wherever possible
14 Contractor works to be completed when the kitchen has
low or no staff within the required areas of work
15 Restriction and control of visitors to the kitchen and
management of delivery drivers so far is reasonably
practicable to keep to the 2m distance
16 An assessment of the restricted areas within the kitchen,
included W/C, rest rooms, offices, fridge rooms, as these
rooms are normally small areas in comparison to the kitchen
area, and therefore planning is required to ensure staff do not
come close together whilst entering and using these area
17 You should also wear a face covering in indoor places
where social distancing may be difficult and where you will
come into contact with people you do not normally meet.
Newham buildings and schools have specific face coverings

		procedures to follow. The face covering should be clean,			
		hands washed before and each time you touch/use the face			
		covering, and stored in a sealed bag when not in use, not to			
		be left laying around. FSMS and Kitchen risk assessment			
		updated to reflect the changes of hygiene and risk			
		management around food safety and face coverings, including			
		the training and rules of use and storage of face coverings.			
Suspected case of	Employees	1 Increased cleaning, sanitising/disinfecting objects and			
Coronavirus	Visitors	surfacing, with the focus on the frequent touch areas,			
(COVID-19) (CV19)		including table-tops, light switches, keypads, grab rails, door			
		handles and any other surface that has high likelihood of	MED		
	Contracted CV19	being touched. Areas to be cleaned between user groups.			
Infection control	by any means	2 Normal PPE to be continued to be used, re kitchen risk			
		assessents/coshh risk assessments			
	Causing severe	3 A system in place for the awareness of potential			
	infection/disease	contamination on delivery items, packaging. Removal and			
		disposal of outer packaging where possible and handwashing			
		directly afterwards			
		4 Equipment cleaned after use, and/or before use			
		5 Disposable gloves to be worn whilst working on the tills			
		6 Chip and Pin/Contactless payment is preferred to reduce			
		touching of money where possible, if not, enhanced hand			
		cleaning, and disposable gloves to be disposed of safety			
		7 Increased handwashing, as soon as staff arrive, frequently			
		during the day, and after task work, and for at least 20			
		seconds, supervisors to monitor, and promote these hygiene			
		control measures as much as possible			
		8 Behaviour change and reminders for the staff, for each			
		other, not to touch your face, nose, eyes, mouth, and wash			
		hands if you do, on a very regular basis to ensure the control			
		behaviour change is embedded and fully understood			

9 Handwashing with hot water and soap is available	
10 Avoiding direct working or direct contact with other staff	
and others (pupils, school staff, delivery drivers etc.)	
11 Behaviour change, Behaviour watch, to promote the	
infection control requirements of 'Catch it, Bin it, Kill it' -	
respiratory hygiene must be promoted at all times, coughing	
and/or sneezing into a tissue and disposing of it immediately	
or coughing and sneezing into the crook of the elbow followed	
by hand washing	
12 Face coverings (visors) are issued and used in areas, but	
do not replace all of the systems of controls detailed within	
this risk assessment. They should be cleaned and worn	
correctly. The main control measure is to ensure social	
distancing and high level of hand/respiratory hygiene in place	
and to minimise contact wherever possible	
13 Kitchen staff working in small groups each day and not	
mixed with other sites/staff where possible, this doesn't mean	
you are working in a bubble and remove any system of	
controls such as the importance of social distancing wherever	
possible	
14 Staying at home if having any symptoms of covid-19 or if	
any of your family members have symptoms of covid-19,	
following Junipers Full CV19 risk assessment systems of	
controls. If anyone develops symptoms of CV19 at work they	
should be sent home and advised to follow the stay at home	
guidance.	
15 Informing you manager, area manager of sickness, and	
confirmed date of positive result or negative result	
16 Area managers completing 'manager's checklist' process	
and procedure that includes contacting Health and Safety,	
and procedure that moluces contacting realth and Salety,	

		completing accident report and contacting PH, and Hr etc			
		following checklist process			
		17 Limit opportunities for contact between the main			
		permanent kitchen staff and transient staff/visitors such as			
		area managers, delivery drivers, school contact staff, pupils,			
		contractors			
		18 Record of all staff working and any visitors keeping for at			
		least 21 days making them available for test and trace and/or			
		internal investigations			
		19 Staff to have weekly rapid covid-19 testing following the			
		school procedures and risk assessment. Those staff who work			
		at non-school sites or schools that do not including Juniper on			
		weekly testing should complete weekly testing at the LBN hub			
		sites if working as front line staff. Book a test go to:			
		www.newham.gov.uk/rapidtesting It should be on an			
		individual review basis on frequency of rapid testing, as many			
		staff are working at home for a large proportion of the week.			
		Those staff that are working out and about everyday should			
		follow the LBN rapid testing for front line staff.			
Suspected case of	Employees	1 Ensure social distancing plan and risk assessment is shared			
Coronavirus	Visitors	with schools/clients, and they share theirs			
(COVID-19) (CV19)		2 If any physical markings, assessments, installations re			
		social distancing to be reviewed with the school/client	LOW		
	Contracted CV19	3 Communication with school/client re covid-19 sickness			
School/client lack of	by any means	procedures in place to ensure that the both parties informed of			
communication		any covid-19 related staff/agency sickness, without delay,			
	Causing severe	including BC plan if the whole kitchen crew have to self-			
	infection/disease	isolate, and test and trace procedures in place			

4 Concerns with pupils/staff not social distancing to be raised
up via the school contact, management, and internal Juniper
managers
5 Reviewing the changes to local and National Tier changes
in risk must be reviewed for each kitchen area to include the
management of numbers, cleaning regime between servery

Overall Residual Risk for Activity (L / M / H):	MEDIUM
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Level of Risk	Suggested Action
LOW	Control measures are adequate but continue to monitor and review; ensure that they remain satisfactory and appropriate
MEDIUM	Control measures need to be introduced within a specified time period; continue to monitor and review
HIGH	Unless control measures can be immediately introduced to reduce the risk so far as is reasonabl practicable, the task or activity should be suspended

INDIVIDUAL KITCHEN ADDITIONAL ACTION CARD

Checklist Kitchens Covid-19 Risk Assessment	Yes	No
Social distancing assessment		
Social distancing checklist		
Social distancing signage/markings		
Cleaning regime covid-19		
COVID-19 posters		
Shared risk management – client		

Additional measures	Ву	When
Actions required		

This Risk assessment has been prepared to assist the Juniper service areas to identify any potential risks plus to maintain a safe place of work during the Covid-19 Pandemic planning, specifically for site cleaning areas, to be made site specific, reviewed to ensure control measures are suitable and sufficient. This is in addition to the full Juniper Covid risk assessment, staff should ensure both assessments are read and followed.

Description of Activity	COVID 19 Cleaning Risk Assessment				
Location	Service areas				
Completed by	Stuart McGregor Head of Health and Safe	ty			
Date of Assessment	15 th May 2020	Review Date And	On-going* reviewed 13 July 2020 2 September 2020 5 Nov 2020 (lock down) 20 December 2020 Tier 4 4 January 2021 Tier 5 (lock down)		

What are the hazards?	Who & how might someone be harmed?	What are you currently doing to control risks?	Risk Rating L / M / H	What else do you need to do (if applicable)?	Action by who / when?	Date Completed
Suspected case of	Employees	1 All Cleaners are to ensure they social distance themselves				
Coronavirus	Visitors	from all staff/adults and children wherever possible, aiming for				
(COVID-19) (CV19)	Contracted CV19	at least 2m distance wherever possible 2 Cleaners normally work remotely, and are able to continue with this, checking on areas/rooms re: numbers of occupants,	MED			
Transmission of COVID-19,	by any means	before going in and dynamically managing social distancing				
and lack of social	Working in close	as a strict control measure				
distancing in	proximity with	3 Area managers have reviewed areas of workplace re: social				
schools/client premises	colleagues	distancing, and follow up with client/staff with any concerns				
		4 Staff working in zones, areas of the school to separate the cleaning works				

	Breathing in	5 Staff to be focused on the achievement of maintaining the			
	droplets, touching	2m rule throughout their shift wherever possible			
	contaminated	6 Increased hand washing periodically during the day, in			
	surfaces	addition to the normal hygiene requirements			
		7 A review of the cleaning risk assessment if any changes to			
	Causing severe	the working environment, any concerns contact the area			
	infection/disease	manager to review and update where necessary			
	intection/disease	8 The creation of flow work operation will be considered if the			
		school areas/rooms are small and constrained, this will be			
		individual staff working in a small area and limited to only one			
		person in that area to strictly minimise contact wherever			
		possible			
		9 An assessment of the restricted areas within the stock			
		rooms/rest rooms, as these rooms are normally small areas,			
		and therefore planning is required to ensure staff do not come			
		close together whilst entering and using these area			
Suspected case of	Employees	1 Increased cleaning, sanitising/disinfecting objects and			
Coronavirus	Visitors	surfacing, with the focus on the frequent touch areas			
(COVID-19) (CV19)		2 Normal PPE to be continued to be used, re following			
		Cleaning risk assessments/coshh risk assessments	MED		
	Contracted CV19	3 A system in place for the awareness of potential			
Infection control	by any means	contamination on delivery items, packaging. Removal and			
		disposal of outer packaging where possible and handwashing			
	Causing severe	directly afterwards			
	infection/disease	4 Equipment cleaned after use, and/or before use where			
		necessary			
		5 Increased handwashing, as soon as staff arrive, frequently			
		during the shift, and for at least 20 seconds, promote these			
		hygiene control measures as much as possible			

6 Behaviour change and reminders for the staff, for each		
other, not to touch your face, nose, eyes, mouth, and wash		
hands if you do		
7 Handwashing with hot water and soap is available		
8 Avoiding direct close working or direct contact with other		
staff and others (pupils, school staff) wherever possible		
9 Behaviour change, Behaviour watch, to promote the		
infection control requirements of 'Catch it, Bin it, Kill it'		
10 Cleaning staff working in small groups, and if multi-sites		
workers, minimum of a strict 2m social distancing must be		
adhered to wherever possible, further than 2m wherever		
possible		
11 Face coverings are required in areas within client sites		
including schools, this should not take away the focus and		
main control measures being based on the ability to maintain		
social distancing throughout, if there are sites that you cannot		
social distance, or if the schools risk assessments identifies		
face coverings as a requirement, then this should be followed,		
in discussion with the specific schools, staff to ensure they		
have clean face coverings and a sealable bag, together with		
safe use and handling of face coverings/Juniper training		
requirements, including washing of hands before, and after		
touching face covering		
12 Staff to ensure they follow their individual risk assessment		
control measures		
13 Follow the weekly rapid testing at our school sites in		
included or LBN hub sites.		
Those staff who work at non-school sites or schools that do		
not including Juniper on weekly testing should complete		
weekly testing at the LBN hub sites. Book a test go to:		
www.newham.gov.uk/rapidtesting It should be on an		

		individual review basis on frequency of rapid testing, as many			
		staff are working at home for a large proportion of the week.			
		Those staff that are working out and about everyday should			
		follow the LBN rapid testing for front line staff.			
Suspected case of	Employees	1 Ensure social distancing plan and risk assessment is shared			
Coronavirus		with schools/clients, and they share theirs with you			
	Visitors	2 Communication with school/client re covid-19 sickness			
(COVID-19) (CV19)		procedures in place to ensure that the both parties informed of	LOW		
	Contracted CV19	any covid-19 related staff/agency sickness, without delay,			
School/client lack of	by any means	including BC plan if the staff having to self- isolate, and track –			
communication		trace procedures in place			
	Causing severe	4 Concerns with social distancing to be raised up via the			
	infection/disease	school contact, management, and internal Juniper managers			
		5 Confirmed cases must be communication without delay			
		following the LA Public Health and School and Juniper			
		procedures			
		6 A cleaning protocol is established with the schools via the			
		normal contact process, re contract managers, and Head of			
		Cleaning to implement a confirmed covid-19 clean, this will			
		include a review of the areas required cleaning, and an			
		update on when the confirmed case was last in the building			
		and if any of the areas can be closed off. This is in addition to			
		the enhanced CV-19 cleaning regime already in place.			
Suspected case of	Employees	1 Checking to see if the area can be kept closed and secure			
Coronavirus	Visitors	for 72 hours before going in, as the amount of virus living on	LOW		
(COVID-19) (CV19)		surfaces will have reduced significantly by 72 hours			
		2 Public areas where a symptomatic person has passed			
	Contracted CV19	through and spent minimal time but which are not visibly			
Cleaning/Deep	by any means	contaminated with body fluids, such as corridors, can be			
cleaning/Covid-19		cleaned thoroughly as normal			
confirmed areas					

Causing severe	3 All surfaces that the symptomatic person has come into	
infection/disease	contact with should be cleaned and disinfected, including all	
	potentially contaminated and frequently touched areas such	
	as toilet areas/bathrooms, door handles, telephones, grab	
	rails in corridors and stairwells	
	4 Use disposable cloths or paper roll and disposable mop	
	heads, to clean all hard surfaces, floors, chairs, door handles	l
	and sanitary fittings – think one site, one wipe, in one	
	direction.	
	5 Using Jangro disinfectant (disinfectant is used within the	ł
	organisation ensuring that it is effective against enveloped	
	viruses) for cleaning an area after someone with suspected	
	coronavirus (COVID-19) has left will reduce the risk of passing	ł
	the infection on to other people, following Safe working	ł
	procedure as detailed here;	
	Wear disposable gloves and aprons for cleaning	
	These should be double bagged, then stored	1
	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	
	Pay particular attention to frequently touched areas	
	and surfaces, such as bathrooms, grab-rails in	
	corridors and stairwells and door handles	
	Spray generously onto surfaces and allow contact to	
	remain for at least 5 minutes, spray and walk away,	
	try and work in a ventilated area	
	• Staff to use protection for the eyes by using googles,	
	and a P1 mask for the mouth and nose as well as	
	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
Staff trained on this process, internal tool box training
Staff uniform/PPE footwear – non slip
Use a combined detergent disinfectant solution at a
dilution of 1000 parts per million (ppm) available
chlorine (av.cl.) or a
neutral purpose detergent followed by disinfection
(1000 ppm av.cl.). PHE advice the COVID-19:
cleaning of non-healthcare settings guidance
6 Laundry - 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. To minimise the possibility of dispersing virus
through the air, do not shake dirty laundry prior to washing.
Clean and disinfect anything used for transporting laundry with
your usual products, in line with the cleaning guidance above.
7 Waste - Personal waste from individuals with symptoms
of COVID-19 and waste from cleaning of areas where they
have been (including PPE, disposable cloths and used
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. This should be put in a suitable and secure place and
marked for storage until the individual's test results
are known

This waste should be stored safely and kept away from	
children. It should not be placed 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 disposed of	
immediately with the normal waste.	
If COVID-19 is confirmed this waste should be stored for at	
least 72 hours before disposal with normal waste.	
If during an emergency you need to remove the waste before	
72 hours, it must be treated as Category B infectious waste.	
You must:	
keep it separate from your other waste	
arrange for collection by a specialist contractor as	
hazardous waste	
8 Personal protective equipment (PPE)	
The minimum PPE to be worn for cleaning an area after a	
person with symptoms of COVID-19, or confirmed COVID-19,	
has left the setting, is disposable gloves and an apron. Wash	
hands 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 someone unwell	
has spent the night such as in a hotel room or boarding school	
dormitory) then additional PPE to protect the cleaner's eyes,	
mouth and nose may be necessary. The local Public Health	
England (PHE) <u>Health Protection Team</u> can advise on this.	

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	Overall Residual Risk for Activity (L / M / H):	MEDIUM		
Level of Risk	Suggested Action			
LOW	Control measures are adequate but continue to monitor and review; ensure that they remain satisfactory and appropriate			
MEDIUM	Control measures need to be introduced within a specified time period; continue to monitor and review			
HIGH	Unless control measures can be immediately introduced to reduce	the risk so far as is reasonabl practicable, the task or activity should be suspended		

JUNIPER VENTURES - CV19 Individual Risk Assessment Version 5.1 12/01/2021

This checklist has been devised as a way to record individual-specific adjustments for named individuals on a case-by-case basis. Any details about the employee or worker's medical condition must be kept confidential. Employees are required to complete section one and return to their Manager who will review and complete the remaining sections in consultation with the employee, or alternatively the staff and manager's can complete this together.

Name		Job title	
Work location		Manager	
Brief description	of role		

Section One: Employee Status

Q1: Are you in a clinically extremely vulnerable group?	Yes	No
Q2: Are you in a clinically vulnerable group?	Yes	No
Q3: Any health issues to consider?	Yes	No
Q4. Are you aged 60 plus?	Yes	No
Q5: Have a mental health condition or other specific condition?	Yes	No
Q6: Are you Black, Asian or of another Minority Ethnicity (BAME)?	Yes	No
Q7: Do you have care responsibilities e.g. for children?	Yes	No
Q8: Do you live with or care for other vulnerable people?	Yes	No
Q9: Do you drive into work?	Yes	No
Q10: Will you use public transport to travel to / from work or as part of your role?	Yes	No
Q11: Do you perform an Essential front-line role?	Yes	No
Q12: Does the work involve dealing with visitors, contractors or members of the public?	Yes	No
Q13: Is your role a front facing role such as dealing with large numbers of people, members	Yes	No
of the public, exposed to a high numbers of people during your work activities?		
Q14: Can you continue to work at home safely i.e. Display Screen Equipment (DSE) set-up	Yes	No
is suitable?		
Are there any additional considerations you wish to share that may assist in the risk assessm	ent?	

Clinically Extremely Vulnerable (CEV)

Is the staff member clinically extremely vulnerable (CEV)?				
If YES:				
• They must work from home during National lockdown, and following local Tier guidance (Tier 4 and 5)				
 If they cannot complete their work from home, they must remain at home following the current 				

government guidance – this will change as infection rates change and this risk assessment requires monitoring both by the staff member and the manager

You may have to follow up with HR

Clinically Vulnerable (CV)

Is the staff member clinically vulnerable (CV)?	Yes	No			
If YES:					
 They must work from home wherever possible consistent with Gov LIK advice 					

They must work from home wherever possible consistent with Gov.UK advice
 If they cannot complete their work from home, it is possible that they may return to the workplace providing strict COVID-19 guidance is adhered too. EXPAND below:

If the individual cannot work from home, explain why: e.g. service requirement, manual job role etc.

Additional Considerations for employees who cannot work from home (except CEV group)?

Q1: Have you completed and shared your service risk assessment with the individual?	Yes	No
Q2: Is the building they work from COVID-19 secure? (a covid-19 secure risk assessment in place and shared with staff/Juniper management)	Yes	No
Q3: Can social distancing (2m) be maintained wherever possible during work activities? (wherever possible and managed/monitored)	Yes	No
Q4: Does the employee have to come into work every day i.e. minimise exposure?	Yes	No
Q5: Can the employee work with the same cohort (small group of people) i.e. minimise exposure?	Yes	No
Q6: Can the start / finish times be staggered to assist, reduce the risk of exposure? (public transport)	Yes	No
Q7: Does the premises have measures in place to support social distancing / promote hand and respiratory hygiene etc.	Yes	No
Q8: Does the role normally involve the use of Personal Protective Equipment (PPE)? Or require any further Covid-19 PPE?	Yes	No
Q9: Is there any requirement or scope/need to take up an alternative role or change in working patterns temporarily?	Yes	No
Q10: Are they aware of the free flu vaccination for vulnerable groups	Yes	No
Q11: If they have to use public transport can the numbers of trains/buses be reduced if site location was changed?	Yes	No
Q12: Is there any other control measures required to reduce the risk, such as physical changes to the site/environment, such as screens/barriers, or change to work process, review of ventilation?	Yes	No
Q13: Are they having weekly testing at the school premises? If not, are they using the LBN Hub testing sites?	Yes	No

Control Measures to mitigate exposure / transmission of COVID-19

Based on the information above, supported by the service COVID-19 risk assessment and control measures (and any risk assessment associated with job activities) review the specific hazards/concerns and required support/agreed actions.

Agreed Actions	By whom / when	Completed date

Consult with the employee and discuss control measures in place

Employee (signed)	Date	
Manager (signed)	Date	

Vaccination Record

Vaccination	
Q14: Have you discussed and have confirmation of staff agreeing to have the vaccinations	
against CV19? Updating the dates of first and second vaccinations to be updated and a	
review of this risk assessment completed (below)	
Q15: Have they informed you that they have refused the vaccination? Vaccination refusal	
section to be completed if necessary, and a review of this risk assessment and follow up	
action following HR/HS/PH advice/policy/guidance	

Dates of Vaccination and review of current risk assessment

First vaccination date:	Review of risk assessment date:
Second vaccination date:	Review of risk assessment date:

Confirmation of Vaccination refusal

Employee (signed)		Date		
Manager		Date		
Review of risk assessment and further action to be taken:				

Updates and control measures below following risk assessment review;

Appendix 1: Description of risk groups

People in the higher risk categories from coronavirus listed below (1 and 2), are likely to be more susceptible to developing more serious symptoms of COVID-19, which is potentially life-threatening.

The individual should be supported to follow all current government guidance such as shielding.

1. Extremely clinically vulnerable category includes:

- Solid organ transplant recipients.
- Individuals with specific cancers:
 - people with cancer who are undergoing active chemotherapy
 - people with lung cancer who are undergoing radical radiotherapy
 - people with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
 - people having immunotherapy or other continuing antibody treatments for cancer
 - people having other targeted cancer treatments which can affect the immune system, such as
 - protein kinase inhibitors or PARP inhibitors
 - people who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs
 - Individuals with severe respiratory conditions including all cystic fibrosis, severe asthma, severe COPD.
 - Individuals who have a condition that means they have a high risk of infections (such as SCID or sickle cell)
 - Individuals on immunosuppression therapies sufficient to significantly increase risk of infection (such as high doses of steroids or immunosuppressant medication)
 - Women who have a serious heart condition and are pregnant
 - Other people who have also been classed as clinically extremely vulnerable, based on clinical judgement and an assessment of their needs. GPs and hospital clinicians have been provided with guidance to support these decisions

The NHS in England will contact people with these conditions to provide further advice. If staff feel they should be in this category but have not received a letter from the NHS, they should contact their GP for guidance.

2. Clinically Vulnerable category includes:

- Individuals with significant health conditions such as chronic (long-term) respiratory diseases that's not severe, such as asthma that requires an inhaler; chronic obstructive pulmonary disease (COPD), emphysema or bronchitis)
- Individuals with significant health conditions that means they have a high risk of getting infections
- Individuals with significant health conditions such as chronic heart disease, such as heart failure
- Individuals with significant health conditions such as chronic kidney disease
- Individuals with significant health conditions such as chronic liver disease, such as hepatitis
- Individuals with significant health conditions such as chronic neurological conditions, such as Parkinson's disease, motor neurone disease, multiple sclerosis (MS), a learning disability or cerebral palsy
- Individuals with Diabetes
- Individuals with significant health conditions who are taking medication that can affect the immune system (such as low doses of steroids)
- Individuals over the age of 70
- Individuals who are pregnant (please see advice about coronavirus and pregnancy from the Royal College of Obstetrics and Gynaecologists)
- Individuals who have a body mass index (BMI) of 40 or above.

Appendix 2: Further Guidance

- <u>Working safely government guides</u> detailed information on risk assessment considerations for different types of workplaces and sectors.
- Current government guidance on protecting extremely vulnerable people
- NHS Guidance on who is at higher risk from coronavirus
- <u>Health and Safety Executive guidance in protecting vulnerable workers</u> provides further information on groups and controls to be considered including:
- Supporting workers in higher risk groups
- Clinically extremely vulnerable workers
- Supporting clinically extremely vulnerable workers returning to work
- Pregnant workers

Appendix 3: Description Asymptomatic testing for staff who are in attendance at the workplace. (LBN Guidance, <u>note we aim to be included within the schools rapid testing</u> regime, the guidance below supports any gaps in school testing)

Lateral Flow - rapid tests.

Who is being tested and why?

Testing is important because staff without symptoms could be carrying the virus and may spread it to others. Testing staff, who are in attendance at the workplace, will support our services to operate as safely as possible. The rapid tests are not available to staff who are working from home. These new, simple and quick tests, known as Lateral Flow Device (LFD) tests, enable us to rapidly test staff without the need for a laboratory.

Where can I get tested?

Vicarage Lane Community Centre E15 4HW Katherine Road Community Centre E7 8PN Jeyes Community Centre E13 9BB Jack Cornwell Community Centre E12 5NN Ascot Community Centre E16 4PL

Please check at <u>www.newham.gov.uk/rapidtesting</u> for current and new sites. The Council are looking to set up 'on site' testing for staff, with 2-3 sites under consideration. Further information will be made available but in the meantime please use the community sites, or we can book services and teams to go to UEL Dockside campus if you email <u>rapidcovidtest@newham.gov.uk</u>

How do I book a test?

Book a test go to: www.newham.gov.uk/rapidtesting

What happens if I test positive?

- Inform your line manager and immediately return home in a safe manner;
- book a normal swab test immediately to confirm the results. Book online at

https://www.gov.uk/get-coronavirus-test - or call 119;

- isolate for 10 full days and only return to work when you are well enough and have not had a high temperature or diarrhoea for 48 hours;
- the people you live with must isolate for 10 days. This means staying at home;
- tell the people you've been close to and don't go to work.

Regular staff testing and maintaining our safer working practices will keep our residents and colleagues safe.

The test results are available in approximately 30 minutes, once you've registered the test takes 5 minutes to complete after which time you can return to your workplace. The results are sent directly to you by text or email – whichever method you have specified.

Staff are encouraged to have a Lateral Flow test twice a week – at least three days apart.