
Hospice based staff (Non-Clinical) COVID-19 Procedures Booklet, Version 1

Office staff
Support Services
Lottery



dovehouse
hospice

caring for people with a life limiting illness

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Important websites, telephone numbers and email:

- Guidance: NHS test and trace: how it works <https://www.gov.uk/guidance/nhs-test-and-trace-how-it-works>
- Hospice's absence line: 01482 785754
- Hospice's HR department email: hr@dovehouse.org.uk

Section 1: Introduction

This document has been produced to communicate how we have adapted the workplace in response to the COVID-19 pandemic.

This is in relation to the following work areas and groups of staff that are based at the hospice:

- Office staff
- Support Services staff
- Lottery staff (Collectors and Canvassers who are based is at the hospice)

This document has been produced following guidance:

- Working safely during coronavirus (COVID-19) Offices and contact centres
<https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19/offices-and-contact-centres>
- Guidance: Working safely during coronavirus (COVID-19) Vehicles
<https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19/vehicles>
- Guidance for food businesses on coronavirus (COVID-19)
<https://www.gov.uk/government/publications/covid-19-guidance-for-food-businesses/guidance-for-food-businesses-on-coronavirus-covid-19>

and after conducting our own risk assessments.

The remit of the risk assessments are around risks faced due to COVID-19 and ways to reduce risk to the lowest reasonably practicable level by taking preventative measures.

This booklet and risk assessments can be found and downloaded from our website
www.dovehouse.org.uk

Please note that this document is constantly subject to change due to changes in government guidance.

Please also note that in an emergency, for example, an accident or fire, people do not have to stay 2m apart if it would be unsafe. People involved in the provision of assistance to others should pay particular attention to sanitation measures immediately afterwards including washing hands.

Section 2: Individual circumstances and working from home

Employees: Working from home

For those currently working from home, to continue. Regular reviews will take place and so this is subject to change.

Employees: Those that are in the 'Clinically Extremely Vulnerable Group' (Shielding) - See appendix 3 for more information on definition

Clinical extremely vulnerable individuals have been strongly advised not to work outside the home. Employees in this category, will remain on furlough at this time and we will monitor the advice and guidance going forward. This also applies to volunteers.

Employees: Those that are in the 'Clinically Vulnerable Group' - See appendix 4 for more information on definition

The government advice is for you to undertake your work duties that enables you to stay 2 metres away from others, wherever possible, although employees may choose to take on a role that does not allow for this distance if they prefer to do so. If they have to spend time within 2 metres of other people, we will carefully assess and discuss with you whether this involves an acceptable level of risk. Alternative roles can be considered. Pregnant employees are classed in this category and those who live with someone who is shielding. A risk assessment has been carried out for this group.

For the avoidance of doubt, if an employee lives with someone who is clinically vulnerable, they can attend work as normal. It is only when the staff member lives with someone who is clinical extremely vulnerable (shielding) that the risk assessment completed is applicable (see appendix 8).

Volunteers in this category are encouraged to discuss their return with your line manager. Following this conversation, if volunteer wishes to, they can return to volunteer.

Mental health and support

All staff have access to a confidential telephone counselling service under our employee assistance programme (EAP). If you would like to talk to a trained counsellor about any worries that you may be having about the impact of Coronavirus, whether work related or not, you can access this by calling 0800 107 6147.

You can also access Occupational health and/or independent counsellors if you wish. Please discuss with this with your line manager or HR.

Section 2: Individual circumstances continued

Symptoms of COVID-19

The symptoms detailed by the government in relation to COVID-19 are below. If you have any of the symptoms below, you should isolate and be tested. You would only be referred for a test if you have any of the symptoms below.



Do not leave home if you or someone you live with has any of the following:

- a high temperature
- a new, continuous cough
- a loss of, or change to, your sense of smell or taste

[Check the NHS website if you have symptoms](#)

Employees: Who need to self-isolate

a) When symptoms are associated with COVID-19

If you have any of the symptoms associated with COVID-19, you should follow the normal absence notification procedure by calling the absence line, with the following additions.

- To state the date you first experienced symptoms
- A mobile telephone number to contact you on (and to be used for referral for a test)

If you are tested positive for COVID-19, you should remain off for a minimum of 10 days (from the onset of your symptoms)

Section 2: Individual circumstances continued

b) When a member of your household has symptoms associated with COVID-19 (and you do not)

If a member of your household has any of the symptoms associated with COVID-19, you should follow the normal absence notification procedure, with the following additions.

- To state the date they first experienced symptoms
- A mobile telephone number for them to be contacted on (and to be used for referral for a test)

If a member of your household is tested positive for COVID-19, you should remain in household isolation for 14 days from the onset of their symptoms. If the member of your household showing symptoms has a negative COVID-19 test, you would be able to return back to work immediately, without waiting for the 14 days.

Employer referral

All employees based at the hospice site, can be referred for a test via CHCP.

Following notification of your symptoms via the absence line, you will be called back by a member of the HR team to discuss the referral. Once referred by the hospice, you or a member of your household with symptoms will receive call with a date and time for your test.

Please note: a member of your household will only be referred for a test if they are showing symptoms and you are not. If you are showing symptoms, then it will only be you that is referred

We ask that employees go through the hospice to receive a test. This will enable a consistent approach and will allow us to properly support you through this process. We have been advised that testing is more effective when it is within the first 3 days from the onset of symptoms.

Section 2: Individual circumstances continued

Employees: Who need to self-isolate continued

- c) **When called by the NHS Test and Trace team if identified as a 'contact' of someone who has recently been tested positive for COVID-19**

If you are called by the NHS Test and Trace team and informed you are a 'contact' then you should follow their guidance of self-isolating for 14 days from your last contact with them.

Test and Trace

Under the Test and Trace program, if tested positive for COVID-19, you will be contacted by the NHS Test and Trace team by phone from 0300 013 5000, text or email.

In preparation for this call, we ask that you call the hospice's absence line to talk to a member of the HR team. If you leave a message, you will be called back and they will assist you to produce a list of people you have been in contact with, in line with the Government guidelines. If the NHS Test and Trace call you before you have spoken to a member of the HR team, answer their questions but tell them that you will call the HR team to discuss and obtain contact details of any work colleague required.

With social distancing measures in place, and PPE being worn where appropriate, there shouldn't be many circumstances whereby you will have 'close contact' with anyone from work, unless it's a requirement for the role or 'set teams' or 'team bubbles' are in place. NHS Test and Trace will ask:

1. If you have family members or other household members living with you. In line with the medical advice they must remain in self-isolation for the rest of the 14-day period from when your symptoms began
2. If you have had any close contact with anyone other than members of your household. The Test and Trace Team are interested in the 48 hours before you developed symptoms and the time since you developed symptoms. Close contact means:
 - having face-to-face contact with someone (less than 1 metre away)
 - spending more than 15 minutes within 2 metres of someone
 - travelling in a car or other small vehicle with someone (even on a short journey) or close to them on a plane
3. If you work in – or have recently visited – a setting with other people (for example, a GP surgery, a school or a workplace)

Section 2: Individual circumstances continued

They will ask you to provide, where possible, the names and contact details (for example, email address, telephone number) for the people you have had close contact with.

Based on the information you provide; they will assess whether they need to alert your contacts and ask them to self-isolate.

Even if you know contact details of work colleagues you may have had contact with, please speak to HR for assistance with this.

Pay while isolating

Under each scenario (a,b,c above) if required to self-isolate, you will receive full discretionary sick pay (100% of your basic salary). The hospice reserves the right to amend this or remove it at any point in which normal sick pay rules will apply. Normal sickness pay applies to all other forms of sickness absence.

Section 2: Individual circumstances	Actions <ol style="list-style-type: none">1. If you have not already done so, to inform us of your current personal circumstances and keep us updated2. Seek support if your mental health has been affected3. Follow the hospice's normal absence procedure if you develop COVID-19 symptoms, member of your household develops symptoms or you are contacted by the NHS Test and Trace team
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Section 3: Social distancing at work

Coming in and out of the hospice

Due to various shift patterns of staff based at the hospice, we do not believe we will have people crowding into the workplace. Normal shift times will continue.

When arriving at the hospice (at any time) you will need to fob in to access reception (or ring the doorbell if you do not have a fob.) This allows us to better control how many people are in the area at one time.

Offices, meetings rooms and communal areas capacity

Appendix 2 shows the maximum occupancy of each of the areas identified. Signage is displayed outside each area. An example of signage used can be seen below.



Till point, reception: Encouragement of card payment

While it won't always be possible, at reception and Dulcies, for customers to pay using their debit/credit card. Where customers wish to use cash, for you to wear disposable gloves, followed by washing hands.

Use of shared vehicles

Where possible, we will operate a 'set team' approach. An example of this is in the Caretaking teams when 2 Caretakers are required to share a vehicle.

Section 3: Social distancing at work continued

Maintaining a 2 metre social distance

Everyone must maintain social distancing in the workplace wherever possible. We don't feel a one-way system around the hospice is required, but we ask people to walk down corridors on the left. It is advised that brief, transitory contact, such as passing in a corridor, is low risk.

Pictures from the canteen are below showing a reduced seating/table layout and floor markings as a reminder on social distancing.



<p>Section 3: Social distancing at work</p>	<p>Actions</p> <ol style="list-style-type: none">1. Maintain a 2 metre social distance wherever possible2. Abide by the room capacity numbers
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Section 4: Managing customers, visitors and contractors

Customers: Lottery

For our Lottery Collection Agent to initially make a phone to the householder in preparation for monetary collection to enable them to keep the activity time involved as short as possible and make the players aware of the new process for door to door collections.

For the collector to ask how they will pay and advise the preferred payment method is electronic contactless. If they are to pay by cash envelopes containing the payment should be left for up to 3 days before opening or for the Collector to wear disposable gloves. No collection to be made without the prior agreement of the customer.

To then follow the procedure below:

- Collector to knock on the customer door
- Step away from the door to await it being opened
- Explain the collection process to the customer when answered and then ask the customer to close their door for the first part in the process
- Envelopes to be posted through the customer letter box for householder to pick up and place cash or cheque payment into insisting the envelope is not sealed with saliva and then put back down onto the doorstep for collector to retrieve once the door has been closed again.
- Payment can be placed on doorstep under a mat or pot in readiness for collector to pick up at an appointed time.

Customers: Dulcies

A maximum of 4 persons allowed into Dulcies to form a queue waiting to be served at cash point (takeaway only) Once able to reopen for dine in, a maximum of 5 tables should be available to use.

Contractors

Site guidance on social distancing and hygiene should be explained to visitors on or before arrival.

Section 4: Managing customers, visitors and contractors continued

Visitors to the hospice

Site guidance on social distancing and hygiene should be explained to visitors on or before arrival. We have amended the sign in procedure which will now involve the receptionist asking and recording the name of the visitors electronically. There is also a maximum person capacity of 8 persons in reception for visitors. Additional chairs have been removed to leave 8 remaining.

Section 4: Managing customers, visitors and contractors	Actions <ol style="list-style-type: none">1. For the Lottery Collection Agents to follow the procedure above2. To site guidance on social distancing and hygiene should be explained to visitors/contractor on or before arrival
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Section 5: Hygiene

Keeping the office areas/corridors/communal areas clean

In order to prevent transmission by touching contaminated surfaces, hard surfaces including tables, phones, kitchen worktops, door handles etc to be cleaned down regularly. This will be done by the Domestic team as normal, however additional cleaning equipment and disposable cleaning wipes will be provided for offices and communal areas.

Hand sanitiser stations

We have installed hand sanitiser stations in reception and outside the canteen. We have also put hand sanitiser spray bottles in all meeting rooms and on the hub. Disinfectant wipes and signs to remind people to wipe down surfaces when they leave have been placed around the hospice.

Pictures from the 'Hub' are below showing disposable cleaning wipes, sanitiser spray bottle and signage to remind people to wipe down surfaces.



Keeping vehicles clean

Hospice owned, not personal vehicles (such as the Lottery Vehicles) should be cleaned internally, using disposable cleaning wipes before and after its use at the end of the day. These will be provided.

Section 5: Hygiene continued

Keeping the kitchen area clean

Normal high hygiene standards still apply. In addition, food container boxes should be wiped down before being loaded and after receipt from other areas. In Dulcies, for staff to sanitise all door handles/push panels regularly (Main door as priority) and wipe down chair backs, and table surfaces regularly especially after person's use.

Handwashing

Staff are encouraged to regularly wash their hands with soap and water as often as possible and for 20 seconds every time. This should be done on arrival at the setting, before and after eating, and after sneezing or coughing.

Signs and posters (e.g catch it bin it kill it posters) will be displayed to build awareness of good handwashing technique, the need to increase handwashing frequency, avoiding touching your face and to cough or sneeze into a tissue which is binned safely, or into your arm if a tissue is not available.

Section 5: Hygiene	Actions <ol style="list-style-type: none">1. Frequently wash hands2. Frequently clean surfaces
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Section 6: PPE and Face Covering

PPE

PPE is provided to those working in the clinical settings for which Public Health England advises use of PPE. The government advice states that 'workplaces should not encourage the precautionary use of extra PPE to protect against COVID-19 outside clinical settings or when responding to a suspected or confirmed case of COVID-19'

- For the Caretaking team, gloves and face masks will be provided and should be worn when undertaking any work in clinical areas.
- For the Domestic teams, gloves will be provided and should be worn when handling laundry, and gloves safely disposed after use.
- For any team working in public (such as the Lottery Collectors and Canvassers) to use disposable gloves when handling cash.

Face covering

There are some circumstances when wearing a face covering may be marginally beneficial as a precautionary measure. The evidence suggests that wearing a face covering does not protect you, but it may protect others if you are infected but have not developed symptoms.

A face covering may be worn in enclosed spaces where social distancing isn't possible. It just needs to cover your mouth and nose.

A face covering is not the same as a face mask. Face coverings are not the same as the PPE used to manage risks like dust and spray in an industrial context. It is important to know that the evidence of the benefit of using a face covering to protect others is weak and the effect is likely to be small, therefore face coverings are not a replacement for the other ways of managing risk. We would not expect to see employers relying on face coverings as risk management for the purpose of their health and safety. Wearing a face covering is optional and is not required by law, including in the workplace.

Section 6: PPE and Face Covering continued

If you choose to wear one, it is important to use face coverings properly and wash your hands before putting them on and taking them off. The following guidance by the government has been issued:

- Wash your hands thoroughly with soap and water for 20 seconds or use hand sanitiser before putting a face covering on, and after removing it.
- When wearing a face covering, avoid touching your face or face covering, as you could contaminate them with germs from your hands.
- Change your face covering if it becomes damp or if you have touched it.
- Continue to wash your hands regularly.
- Change and wash your face covering daily.
- If the material is washable, wash in line with manufacturer’s instructions. If it is not washable, dispose of it carefully in your usual waste
- Practice social distancing wherever possible.

We will support you in using a face covering safely if you choose to wear one. If you wish to wear a face covering, we will supply this for you.



Section 6: PPE and Face Covering	Actions <ol style="list-style-type: none">1. For those teams identified, to wear the appropriate PPE when needed2. If you choose to, to wear a face covering and follow the guidelines issued by the government
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Section 7: Workforce (Staff and Volunteers)

Travelling to and from work

Public transport to be avoided if possible. If you do have to use public transport to follow the social distancing guidelines where possible.

Staff are encouraged to walk, cycle or drive to work.

Set teams

Where possible, for staff to be assigned to a 'set team'. Where this is possible, we will try and maintain set teams, however due to the nature of the work and staffing levels, this may not always be possible.

Work related travel

We would encourage people to use their own transport when travelling for work related purposes. We will try and ensure any work related travel is done, only when necessary.

Communication

We will keep you updated with latest developments via your line manager, text, phone call and/or letter.

Training

Training will be conducted in small groups if required and e-learning is not suitable. If you have any questions relating to this booklet or training needs in relation to COVID-19 that have not been addressed in this booklet, please ask your line manager, or contact the HR team.

Section 7: Workforce (Staff and Volunteers)	Actions 1. Keep yourself updated on latest guidance
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Section 8: Inbound and outbound

Incoming post

Following the sorting of the incoming post, for individual to wash their hands. Disposable gloves can be worn if they wish.

Outgoing post

Normal procedures to be followed.

<p>Section 8: Inbound and outbounds goods</p>	<p>Actions</p> <ol style="list-style-type: none">1. After sorting incoming post at reception, for individual to wash their hands.
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Appendix 1: COVID 19 RISK ASSESSMENT FOR OFFICE BASED STAFF AT THE HOSPICE

Date of Assessment: 26/05/2020. Assessed by: Dave Carrick, Health and Safety Manager

Hazards	Appointing staff with unknown health problems (High risk persons)	Section of Covid-19 Booklet	2
Who is at risk of catching the virus	All staff based at the hospice		
Controls	<ol style="list-style-type: none"> Any staff returning back to work must not be a high risk to the COVID virus Check if staff invited in have any persons in their household who may have the virus or have had the virus recently. Volunteers in 'vulnerable' groups could be asked to consider not volunteering until Govt advice changes 		
Further controls	<ol style="list-style-type: none"> Staff to be asked if they have any underlying issues, or any symptoms of the Virus. Testing can be arranged if any staff show symptoms. Volunteers in shielded groups should be supported in staying at home as per Govt guidelines 		
Risk	Low		

Hazards	Risk of catching COVID 19	Section of Covid-19 Booklet	2,3,5
Who is at risk of catching the virus	Returning office staff, other Hospice staff, any contractor staff required in the areas, volunteers who may be called back from lockdown		
Controls	<ol style="list-style-type: none"> Meeting room seating re-arranged to reduce numbers. Hand gel on reception for all staff. Staff returning reminded to wash hands for 20 secs regularly during the day. Staff must adhere to the Govt guide of 2 mts distancing rule at all times. 		
Further controls	<ol style="list-style-type: none"> Staff to report any symptoms of COVID-19 to not attend work, call the absence line and attend a test. If positive for COVID-19 to then self-isolate for 10 days. 		
Risk	Low		

Hazards	Safe environment	Section of Covid-19 Booklet	2
Who is at risk of catching the virus	All staff based at the hospice		
Controls	<ol style="list-style-type: none"> Line managers to check daily with staff if any COVID symptoms may be present. Any staff showing signs must be sent home and referred for testing. HR Dept can give help to any staff member who may have increased anxiety levels or have suffered personal loss as a result of the virus. 		

Further controls	<ol style="list-style-type: none"> 1. HR Dept must be informed of any concerns by line managers and if any staff are sent home. 2. Line managers must be kept up to date with any changing guidance from Govt by way of HR Dept, H&S Manager and via Senior Managers. If employees do not follow safe guidance, HR must be informed.
Risk	Med

Hazards	Travelling to/from the hospice, risk of catching virus	Section of Covid-19 Booklet	7
Who is at risk of catching the virus	All staff based at the hospice		
Controls	<ol style="list-style-type: none"> 1. Public transport to be avoided if possible. 2. Consider staff still working from home if possible 		
Further controls	<ol style="list-style-type: none"> 1. Social distancing (2 mts) to be honoured at all times. 2. Advise walk to work and home/cycle if possible 		
Risk	Low		

Hazards	Contractor control	Section of Covid-19 Booklet	4
Who is at risk of catching the virus	All staff based at the hospice		
Controls	1. Contractors to be asked if any virus symptoms are present. They are advised to wash hands before work.		
Further controls	<ol style="list-style-type: none"> 1. Senior Manager who has organised contractor on site, must ensure contractors and staff are always 2mts apart (Contractors should be working away from staff in a safe environment). 2. Area cleaned after work and contractors advised to wash hands 20 secs before eating or when leaving the hospice. 		
Risk	Med		

Appendix 2: Assessment of the following rooms using guidance 'capacity Overlay Process' COVID

19. Date of Assessment: 19/05/2020 and updated * on 24/06/2020. Assessed by: Dave Carrick,
Health and Safety Manager

• Chief Executive's office	5 persons
• Volunteer's Office	3 Persons
• ICT Office	2 Persons
• Support Development Office	3 Persons
• Hub	10 Persons
• Meeting Room	4 Persons
• Lottery Funding Office	2 Person
• Fundraising Office	5 Persons
• Board Room	10 Persons
• Quiet Room	1 Person
• Education Office Room	4 Persons
• Echo Meeting Room	3 Persons
• Echo Room	1 Person
• Music Room	3 Persons
• York Room	5 Persons
• Family Support Team Offices	2 Persons Per Room
• Director of Business and Income Development's Office	5 persons
• *Reception area	8 persons

Appendix 3: COVID 19 RISK ASSESSMENT SUPPORT SERVICES

Date of Assessment: 26/05/2020. Assessed by: Dave Carrick, Health and Safety Manager

SUPPORT Services staff			
Hazards	Risk of catching COVID 19	Section of Covid-19 Booklet	2,3,5,6
Who is at risk of catching the virus	Caretaker staff, any volunteer staff called back to assist caretakers. Other DHH staff, visitors, or contractors who may be asked to work in the Hospice.		
Controls	<ol style="list-style-type: none"> 1. Caretaker staff are reminded to wash hands regularly throughout the day, after most tasks. 2. PPE is provided to them-gloves face masks and full PPE covering for any work in Needler Unit. 3. Caretaker staff and others must adhere to the Govt guide of 2 mts distancing rule 		
Further controls	<ol style="list-style-type: none"> 1. Staff to report any symptoms of COVID-19, attend for a test and self-isolate for 10 days if tested positive for COVID-19. 2. Advised to wipe interior of any Hospice vehicle they may use before any journey and afterwards. 		
Risk	Med		

KITCHEN areas			
Hazards	Risk of catching COVID 19	Section of Covid-19 Booklet	2,3,5
Who is at risk of catching the virus	The catering staff, other Hospice staff, delivery personnel, any contractors called in to maintain the kitchen area.		
Controls	<ol style="list-style-type: none"> 1. Catering staff must adhere to the Govt guide of 2 mts distancing rule at all times. 2. They are also informed to wash hands regularly during the day especially before any break for eating food, drinking or smoking. 3. Hand wash recommended for 20 second per wash session 		
Further controls	<ol style="list-style-type: none"> 1. Food container boxes must be wiped down before being loaded and after receipt from other areas. 2. Staff to report any symptoms of COVID-19, attend for a test and self-isolate for 10 days if tested positive for COVID-19. 		
Risk	Low		

Dulcies			
Hazards	Risk of catching COVID 19	Section of Covid-19 Booklet	2,3,5
Who is at risk of catching the virus	The catering staff, other Hospice staff, delivery personnel, any contractors called in to maintain the kitchen area.		
Controls	<ol style="list-style-type: none"> 1. Staff to sanitise all door handles/push panels regularly (Main door as priority) 2. Wipe down chair backs, and table surfaces regularly especially after person's use 		

Further controls	<ol style="list-style-type: none"> 1. Maximum of 4 persons in a queue waiting to be served at cash point. 2. 5 tables only when we open again for seated persons.
Risk	Low

DOMESTIC staff			
Hazards	Risk of catching COVID 19	Section of Covid-19 Booklet	2,3,5,6
Who is at risk of catching the virus	The Domestic staff, any contractor called into the laundry, other Hospice staff.		
Controls	<ol style="list-style-type: none"> 1. Domestic staff must adhere to the Govt guide of 2 mts distancing rule at all times. 2. They are also informed to wash hands regularly during the day especially before any break for eating food, drinking or smoking. 3. Hand wash recommended for 20 second per wash session. 		
Further controls	<ol style="list-style-type: none"> 1. Staff to report any symptoms of COVID-19, attend for a test and self-isolate for 10 days if tested positive for COVID-19. 2. Gloves to be worn when handling dirty laundry, and gloves safely disposed of after use. 		
Risk	Low		

Gardening risk assessment -return to work volunteer gardeners			
Hazards	Risk of catching COVID 19	Section of Covid-19 Booklet	2,3,5
Who is at risk of catching the virus	Any volunteer gardener returning to work.		
Controls	<ol style="list-style-type: none"> 1. Gardeners must adhere to the Govt guide of 2 mts distancing rule at all times. 2. Gardeners informed to wash hands regularly during the day especially before any break for eating food, drinking or smoking. 3. Hand wash recommended for 20 second pers wash session 		
Further controls	<ol style="list-style-type: none"> 1. Volunteer Gardeners informed to report any COVID 19 symptoms and refer themselves for a test. To self-isolate for 10 days if tested positive for COVID-19. 2. Staff to report any symptoms of COVID-19, attend for a test and self-isolate for 10 days if tested positive for COVID-19. 3. Canteen facility is closed off to gardening staff temporarily. 4. They can use reception welfare facilities. 		
Risk	Low due to area of working means social distancing is easier to maintain		

Appendix 4: COVID 19 RISK ASSESSMENT FOR LOTTERY COLLECTOR-COVID 19

Date of Assessment: 19/05/2020. Assessed by: Dave Carrick, Health and Safety Manager

Hazards	Risk of catching COVID 19	Section of Covid-19 Booklet	2,3,4,5,6
Who is at risk of catching the virus	The Dove House Lottery collector, the house holder, other members of the household.		
Controls	<ol style="list-style-type: none"> 1. Consider electronic contactless payment from householder 2. Phone call can be made to householder in preparation for monetary collection. 3. Collector to knock on the customer door, step away from the door to await it being opened and then explain the collection process to the customer when answered. 4. Consider envelope given to householder for cash to be put inside, but not sealed by saliva. 5. Envelope can be posted through the customer letter box for householder to pick up and place cash or cheque payment into and then put back down onto the doorstep for collector to retrieve. 6. Cash can be placed in doorstep in readiness for collector to pick up at appointed time. 7. Collector must wash hands regularly and use sanitizer for hands. 8. Minimum 2 metres must be followed as social distancing guidelines at all times. 9. Staff to report any symptoms of COVID-19, attend for a test and self-isolate for 10 days if tested positive for COVID-19. 		
Further controls	<ol style="list-style-type: none"> 1. Advice on safe distancing, washing of hands and reporting of any concerns must be given to all collectors. Physical contact must be avoided, eg shaking hands, hugs etc. 2. Disposable gloves should be issued to collectors. 3. Vehicle should be cleaned internally, by wipes before and after its use at end of day. Cash should be safely deposited at the Post Office. 		
Risk	Low		

Appendix 5: Extremely Vulnerable (Shielded Group)

Clinically extremely vulnerable people may include the following people. Disease severity, history or treatment levels will also affect who is in the group.

1. Solid organ transplant recipients.
2. People 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
3. People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe chronic obstructive pulmonary disease (COPD).
4. People with rare diseases that significantly increase the risk of infections (such as SCID, homozygous sickle cell).
5. People on immunosuppression therapies sufficient to significantly increase risk of infection.
6. Women who are pregnant with significant heart disease, congenital or acquired.

People who fall in this group should have been contacted to tell them they are clinically extremely vulnerable.

Taken from <https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>

Appendix 6: Clinically Vulnerable Group

Clinically vulnerable people are those who are:

1. aged 70 or older (regardless of medical conditions)
2. under 70 with an underlying health condition listed below (that is, anyone instructed to get a flu jab each year on medical grounds):
3. chronic (long-term) mild to moderate respiratory diseases, such as asthma, chronic obstructive pulmonary disease (COPD), emphysema or bronchitis
4. chronic heart disease, such as heart failure
5. chronic kidney disease
6. chronic liver disease, such as hepatitis
7. chronic neurological conditions, such as Parkinson's disease, motor neurone disease, multiple sclerosis (MS), or cerebral palsy
8. diabetes
9. a weakened immune system as the result of certain conditions, treatments like chemotherapy, or medicines such as steroid tablets
10. being seriously overweight (a body mass index (BMI) of 40 or above)
11. pregnant women

Those in this group are advised to stay at home as much as possible and, if you do go out, take particular care to minimise contact with others outside your household.

Taken from <https://www.gov.uk/government/publications/staying-alert-and-safe-social-distancing/staying-alert-and-safe-social-distancing#clinically-vulnerable-people>

Appendix 7: COVID 19 RISK ASSESSMENT: Extremely vulnerable group (Shielding)

Date of Assessment: 09/06/2020

Assessed by: David Carrick, Health & Safety Manager, and Andrew Walker, Director of HR

Hazards	Risk of catching virus
<p>Who is at risk of catching the virus</p>	<ol style="list-style-type: none"> 1. Solid organ transplant recipients. 2. People with specific cancers: <ul style="list-style-type: none"> • 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 3. People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe chronic obstructive pulmonary disease (COPD). 4. People with rare diseases that significantly increase the risk of infections (such as SCID, homozygous sickle cell). 5. People on immunosuppression therapies sufficient to significantly increase risk of infection. 6. Women who are pregnant with significant heart disease, congenital or acquired.
<p>Controls</p>	<ol style="list-style-type: none"> 1. To work from home if possible. <p style="color: red;">At the current time, the guidance remains that this group is strongly advised to stay at home at all times and avoid any face to face contact. All below to apply when the government guidelines change to advise those in this group that they may return to work.</p> <ol style="list-style-type: none"> 2. Before returning to work, following government guidelines, to attend a welfare meeting with line manager. 3. To discuss a possible phased return to work over a few shifts/weeks. 4. To consider moving individual to a lower risk work area within work setting to enable them to stay 2 metres away from others. If this isn't possible, to assess whether this involves an acceptable level of risk taking individual and role specific factors into account. Alternative roles to be considered. 5. Given priority in accessing COVID-19 testing if showing symptoms. 6. If on medication, to inform your line manager of this, any side effects experienced and if any changes are made.

	7. To follow the COVID-19 risk assessment generated for your work area which applies to all staff.
Further controls	1. For individuals to bring to the attention of their line manager, any health concern they have that may affect their safety at work. If line manager is unavailable, to contact a member of the HR team.
Risk	Med

Appendix 8: COVID 19 RISK ASSESSMENT: Clinically vulnerable group

Date of Assessment: 09/06/2020

Assessed by: David Carrick, Health & Safety Manager, and Andrew Walker, Director of HR

Hazards	
Who is at risk of catching the virus	<p>Risk of catching virus</p> <ol style="list-style-type: none">1. aged 70 or older (regardless of medical conditions)2. chronic (long-term) mild to moderate respiratory diseases, such as asthma, chronic obstructive pulmonary disease (COPD), emphysema or bronchitis3. chronic heart disease, such as heart failure4. chronic kidney disease5. chronic liver disease, such as hepatitis6. chronic neurological conditions, such as Parkinson’s disease, motor neurone disease, multiple sclerosis (MS), or cerebral palsy7. diabetes8. a weakened immune system as the result of certain conditions, treatments like chemotherapy, or medicines such as steroid tablets9. being seriously overweight (a body mass index (BMI) of 40 or above)10. pregnant women
Controls	<ol style="list-style-type: none">1. To work from home if possible.2. To consider moving individual to a lower risk work area within work setting to enable them to stay 2 metres away from others. If this isn’t possible, to assess whether this involves an acceptable level of risk taking individual and role specific factors into account. Alternative roles to be considered.3. Given priority in accessing COVID-19 testing if showing symptoms.4. If on medication, to inform your line manager of this, any side effects experienced and if any changes are made.5. To follow the COVID-19 risk assessment generated for your work area which applies to all staff.
Further controls	<ol style="list-style-type: none">1. For individuals to bring to the attention of their line manager, any health concern they have that may affect their safety at work. If line manager is unavailable, to contact a member of the HR team.
Risk	Med

If you do not have any of the medical conditions listed above, however live with someone who does, normal social distancing and hygiene measures should be adhered too.

If you do not have any of the medical conditions listed above, however live with someone is ‘Extremely Vulnerable’ (Shielding), this risk assessment will also apply to you (where applicable)

Appendix 9: COVID 19 RISK ASSESSMENT: Black, Asian or Minority Ethnic (BAME) individuals

Date of Assessment: 09/06/2020

Assessed by: David Carrick, Health & Safety Manager, and Andrew Walker, Director of HR

Hazards	Risk of catching virus
Who is at risk of catching the virus	<ol style="list-style-type: none">1. Black, Asian or Minority Ethnic (BAME) individuals Emerging evidence shows that black and minority ethnic (BME) communities are disproportionately affected by COVID-19. https://www.nhsemployers.org/covid19/health-safety-and-wellbeing/risk-assessments-for-staff
Controls	<ol style="list-style-type: none">1. For individual to inform their line manager if they have any underlying health conditions as outlined in the 'Extremely vulnerable group' or 'Clinically vulnerable group' and that the associated control measures (as described in the risk assessment for both groups) are adhered too.2. Given priority in accessing COVID-19 testing if showing symptoms.3. To follow the COVID-19 risk assessment generated for your work area which applies to all staff.4. For individuals in a clinical setting, to receive PPE training as a priority.
Further controls	<ol style="list-style-type: none">1. For individuals to bring to the attention of their line manager, any health concern they have that may affect their safety at work. If line manager is unavailable, to contact a member of the HR team.
Risk	Med