

COVID-19 – EMPLOYER CHECKLIST 1 - PLANNING AND PREPARATION

| NO. | CONTROL | YES | NO | DETAILS | ACTION REQUIRED |
|-----|--|-------------------------------------|--------------------------|---|-----------------|
| 1. | Do you have a system in place to keep up to date with the latest Government advice and to adjust your plans and procedures in line with that advice? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Active monitoring | |
| 2. | Have you prepared / revised your business COVID-19 response plan? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Reviewed regularly | |
| 3. | Do you have a system in place to provide your employees with information and guidance on the measures you have to put in place to help prevent the spread of the virus and what is expected of them? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Safe Systems of Work document | |
| 4. | Have you consulted with your employees on measures, provided a system for employees to raise issues or concerns and to have them responded to? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | SSoW – Reporting Concerns section | |
| 5. | Have you identified the control measures you will need to put in place to minimise the risk of employees being exposed to COVID-19? (See Checklist 2) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | SSoW | |
| 6. | Have you reviewed and updated your risk assessments and safety statement to take account of any controls to help prevent the spread of COVID-19? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Reviewed regularly | |
| 7. | Have you updated your emergency plans, in particular to take account of social distancing? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Liaised with CG for updated plan | |
| 8. | Have you sent each employee a COVID-19 Return to Work form to be completed and returned 3 days before they return to the workplace? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | On the knowledgebase for completion after period of absence as per SSoW | |
| 9. | Have you sent each employee information on the NHS guidance on people at higher risk and asked them to tell you if they fall into any of these categories? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Guidance on knowledgebase and Medical information form | |
| 10. | Have you assessed who can do their work from home and given them the facility to do so, in particular at-risk or vulnerable employees? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Assessed by Medical information form submissions | |
| 11. | Have you told employees they must stay at home if unwell or if they have any symptoms of COVID-19 and informed them of their entitlements if they are unwell or need to self-isolate? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | SSoW - Checks to carry out before leaving for work section | |

| NO. | CONTROL | YES | NO | DETAILS | ACTION REQUIRED |
|-----|---|-------------------------------------|--------------------------|---|--|
| 12. | Have you appointed and trained an Employee Representative to help advise employees and to monitor compliance with COVID-19 control measures in the workplace? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Alicia Hammersley-Fenton and Kerry Povey | |
| 13. | Have you agreed with employees about any adjustment of staff rosters, organising of teams, breaks etc. needed to reduce the number of people in the workplace at any one time and to maintain social distancing? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | SSoW, Office rota, Office seating plan on knowledgebase and email communication with staff | |
| 14. | Have you updated your workplace induction / familiarisation training to include all information relating to COVID-19? (See Checklist 3) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | SSoW issued | |
| 15. | Have you organised to carry out meetings, training and information sessions online or by phone as far as possible? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | SSoW – Meetings section Microsoft Teams | |
| 16. | Have you identified the activities that involve interacting with clients / visitors and put in place measures to prevent physical contact, as far as possible? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | SSoW - Meetings section | |
| 17. | Have you contacted suppliers and arranged contactless delivery, invoicing and payment? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | SSoW - Receiving supplies or deliveries | |
| 18. | Have you stopped all non-essential business / work travel? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | SSoW – Meetings section Microsoft Teams | |
| 19. | Are the number of employees sharing a vehicle kept to a minimum, are face coverings provided and are employees informed of the need for interior touch points to be cleaned / wiped at the start and end of each shift? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | SSoW - Travelling to and from work section | |
| 20. | Have you advised employees to clean their hands before and after using public transport before arriving to work? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | SSoW - Travelling to and from work section – discouraged from travelling on public transport. | |
| 21. | Have you set up workstations, desks and tables to help with social distancing? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | SSoW, Office rota, Office seating plan on knowledgebase | |
| 22. | Have you put in place supports for employees who may be suffering from anxiety or stress and told your staff about these supports? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Recognition days off, WFH, flexibility offered with childcare etc. Regular communication with staff. Opening office to provide options for staff. | Developing a mental health strategy for launch in January 2021 |

| NO. | CONTROL | YES | NO | DETAILS | ACTION REQUIRED |
|-----|---|-------------------------------------|-------------------------------------|---|-----------------|
| | Personal Protective Equipment (PPE) | | | | |
| 23. | Have you identified, selected and sourced the PPE needed for your employees and arranged enough supplies of it? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | SSoW – PPE section for guidance and Support Team daily checklist for monitoring supplies | |
| 24. | Have you arranged to train your employees in the proper fitting, use, removal, cleaning, storing and disposal of PPE? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Guidance in SSoW | |
| 25. | Have your first aiders been given updated training on infection prevention and control re hand hygiene and use of face masks? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Guidance sent to EG and KP and disposable aprons and surgical masks bought. | |
| 26. | If you have mechanical ventilation does it need cleaning or maintenance before the workplace reopens? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | We don't have mechanical ventilation at the office | |
| 27. | Does your hot water system need flushing at outlets e.g. showers, backwashes etc. following low usage to prevent Legionnaire's Disease? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No as the water was run throughout office closure. | |
| 28. | Have you lifting or other equipment (e.g. lifts, forklifts, tail-lifts, autoclaves, etc.) due a statutory examination and have you arranged for a competent person to do this before the workplace reopens? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not applicable | |
| 29. | Has this competent person provided you with details of how they plan to do this task safely and what they require from you to do so? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not applicable | |
| 30. | Have you visually checked, or had someone check, all vehicles and equipment in the workplace for signs of deterioration or damage before employees use it again? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not applicable | |
| 31. | Has the workplace, including all equipment, workstations, benches, doors and frequently touched surfaces, been thoroughly cleaned? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | The office is professionally cleaned twice a week and the Support Team are responsible for cleaning facilities etc throughout the day as per the office daily checklist | |

SIGNED:



Name:

Alicia Hammersley-Fenton

Position:

Director

Date:

27 Nov 2020