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**Wolfson College COVID-19 Risk Assessment**

**Minibus**

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| **Assessment Ref** | WOLF-W-COVID-011 | **Location/Dept:** | Minibus |
| **Assessment date:** | 23/09/20 | **Assessor's name:** | Marie Johnson |
| **Manager/Supervisor:** | Chris Licence | **Next review date:** | 23/10/20 |
| **Brief Description of Task/Area** | The safe use of the minibus, making sure that it is maintained and users are aware of the current COVID procedures. This assessment covers the risk of contracting the COVID-19 virus and the control measures required to reduce this. |
| **To be read and followed in conjunction with any other Risk Assessments, Policies or Procedures; list them here** | WOLF-W-COVID-19-001/002/004/005 and COVID 19 SAFETY PLAN.Minibus – General Risk Assessment |

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| **Hazard Category and Description** e.g. trip, falling objects, fire, explosion, noise, violence etc. |  **Persons affected and how** | **Existing Control Measures** e. g. Guards, Safe Systems of Work, Training, Instruction, Authorised Users, Competent Persons, Personal Protective Equipment (PPE | A.**Severity of injury** **(1 to 5)** | B.**Likely Occurrence (1 to 5)**  | **Risk Rating****(A) x (B)** | **Further Measures Needed** | A.**Severity of injury** **(1 to 5)** | B.**Likely Occurrence (1 to 5)**  | **Risk Rating****(A) x (B)** | **Further measures to be completed when and by whom** |
| ***Infectious disease:****Contracting Covid-19 (Coronavirus)* | ***College Staff / Students /*** ***Members of the Public / Visitors / Family Members of staff****Becoming severely ill by contracting the COVID-19 virus* | *Follow the Wolfson College Home Bursary guidance and procedures (as per above) for controlling the COVID-19 risk on site and ensuring the following general control measures are followed; these have been in place since 23/03/20:****Hand Washing***All the College community are required to follow government guidance on the washing or sanitising of hands before and after contact with communal surfaces. ***General Hygiene***All are advised to limit touching communal surfaces as far as possible and not share equipment. ***Social Distancing***All College community are reminded to maintain social distance from each other around the site and whilst using any facilities.***Symptoms of COVID-19****All of the Wolfson community (users of the facilities) have been asked to self-isolate and not use facilities if they exhibit any of the COVID-19 symptoms. College guidance decrees that they will then self-isolate for 7 days and review.*  | ***5*** | ***3*** | ***15*** | *Follow the Wolfson College Home Bursary guidance and procedures (as per above) for controlling the COVID-19 risk and ensure the following general control measures are followed:****Social distancing reminders***Posters and guidance signs will be made visible in the minibus, to prompt all as reminders about maintaining social distance and following the current COVID-19 control measures.***Cleaning***Drivers are responsible to clean areas of the minibus (Steering wheel, door handles, seatbelts) with anti-bac wipes before and after use and to check/top up of antibacterial gel on the minibus.**Hand Hygiene**All Minibus users must wash/sanitise their hands before they use the minibus.**Face Covering**All users must wear face covering while on the minibus. Signs will be in place.**PPE**Drivers will be provided with appropriate PPE for use where social distancing cannot be maintained. **Seating** Not all seating can be used for social distancing purposes, so to maintain this, seats would need to be taken out of use. Use tape on the seats and signs.***Further risk assessments***The COVID-19 hazard and control measures are to be added to all other Risk Assessments and made available for all College users via the website. | ***5*** | ***1*** | ***5*** | ***All users of facilities****Immediate****Home Bursary****25/09/20****Minibus Drivers****Immediate****Home Bursary****25/09/20****Minibus Drivers****Immediate****All users of facilities****Immediate****Minibus Drivers****Immediate****Home Bursary****25/09/20* |

**Hazard checklist**

The definition of a hazard is "something that has the potential to cause harm" including ill health, injury, loss of product and/or damage to plant and property.

Below is a list of hazards that may be present and may be of assistance in identifying hazards in your task or area. Although not an exhaustive list, please place an **X** in the box if you think the hazard exists in the activity and/or environment and insert in the Description and Location of Hazard Section of the form. Also, include any additional hazards identified and not highlighted below.

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| --- | --- | --- | --- | --- | --- | --- |
| a. Condition of the: | Floor. |  | Stairs. |  | Furniture. |  |
| b. Extremes of: |  Light. |  | Noise. |  | Humidity / temperature. |  |
| c. Abnormal levels of:  | Dust. |  | Fumes / aerosols. |  | Smells. |  |
| d. Animals:  | Kicking / scratching. |  | Biting. |  | Crushing. |  |
| e. Flammables:  | Solvents. |  | Paper / board. |  | Wood. |  |
| f. Radiation: | X-ray / radioactivity. |  | Ultraviolet. |  | Laser. |  |
| g. Equipment training:  | Inadequate training. |  | No training. |  | Needs re-training. |  |
| h. Equipment: | Sparks / generates static.  |  | Has a flame. |  | Uses flammable liquids. |  |
| I. Electrical equipment: | Damaged / exposed wires  |  | Trailing leads / adapters. |  | PAT tested. |  |
| j. Equipment with: | Sharp / fast moving parts  |  | Emergency cut out. |  | Extreme temperatures. |  |
| k. Manual handling: | Dragging/moving/lifting. |  | Heavy. |  | Awkward. |  |
| l. Vehicles: | Buggies. |  | Passenger. |  | Lorries/vans. |  |
| m. Pressure systems: | Autoclaves. |  | Gas cylinders. |  | Liquefied gases. |  |
| n. Word processing / computing. | DSE/VDU.  |  | Program / software. |  | Workstation. |  |
| o. Working: | Lone-working. |  | Over-crowding.  |  |  Housekeeping - bench / floor.  |  |
| p. Working: | Above 2m off ground. |  | On ladders / scaffolds. |  | Below ground level. |  |
| q. WRULD – work related upper limb disorders | RSI – keyboard, pipette. |  | Hand Arm Vibration. |  |  |  |
| r. Outside buildings, roads | Falling objects. |  | Swinging doors |  | Obstructions / low beams. |  |
| s. Infectious Diseases  | COVID-19 / Flu | **X** | Ebola / Hemorrhagic Fever  |  | HIV |  |

**Risk Rating Guide**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Score** | **5** | **4** | **3** | **2** | **1** |
| **Column A: Severity of injury:** | Very High -Multiple Deaths | High - Death, serious injury, permanent disability | Moderate - RIDDOR over 3 days | Slight - First Aid treatment | Nil - Very Minor |
| **Column B: Likely occurrence:** | Inevitable | Highly Likely | Possible | Unlikely | Remote Possibility |

|  |  |  |  |
| --- | --- | --- | --- |
| **Risk Rating Score** | **Action**  | **Risk Rating Score** | **Action**  |
| 1-4 | Broadly Acceptable - No action required | 5-9 | Moderate - Reduce risks if reasonably practicable |
| 10-15 | High Risk - Priority Action to be undertaken | 16-25 | Unacceptable -Action must be taken IMMEDIATELY |

**Additional Control Measures Action Plan**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Ref No.** | **Further action required** | **By whom** | **By when** | **Completed** |
| AC1 | ***Social distancing reminders*** | Lodge Manager | 25/09/20 |  |
| AC2 | ***Communication*** | Home Bursary | 25/09/20 |  |
| AC3 | ***Cleaning supplies*** | Lodge Manager | 25/09/20 |  |
| AC4 | ***Further Risk Assessments*** | Home Bursary | 25/09/20 |  |
| **Explain how you will monitor and review the additional control measures?**Frequency: Monthly once past the deadline for implementationMethod: Daily checks of the minibus and liaising with the minibus drivers by the Lodge ManagerTo be carried out by: Lodge Manager |

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| **COMMUNICATION OF RISK ASSESSMENT FINDINGS TO STAFF** |
| **Reference of formal and additional communication to staff**  | **METHOD** | **YES** | **DATE** | **COMMENTS** |
| Copy of risk assessment issued to staff |  |  |  |
| Controls covered in team procedure issued to staff |  |  |  |
| Induction |  |  |  |
| Team Meeting, Toolbox Talk  |  |  |  |
| E-mail circulation |  |  |  |
| Available on website / intranet  | X | 28/09/20 |  |
| Other – |  |  |  |
| **Review Tracker** |
| Reassessment due: **25/10/20** | Reassessment due: | Reassessment due: | Reassessment due: | Reassessment due: |
| Assessed by: (Name) | Assessed by: (Name) | Assessed by: (Name) | Assessed by: (Name) | Assessed by: (Name) |
| Signature | Signature | Signature | Signature | Signature |
| Date | Date | Date | Date | Date |
| Job Title | Job Title | Job Title | Job Title | Job Title |
| Approved by: | Approved by: | Approved by: | Approved by: | Approved by: |