

Risk Assessment – Police Cells (Bodily Fluid Spillage and Virus Disease Cleaning)

1	Site / Location:	Risk Assessment number: No. Covid-19 3.3	Used in Conjunction with RAs:
	Assessor's name:	Signature:	
	Approved by (Manager)' name:	Signature:	Profit Centre:
	Please see sectoin 11 for review dates		

This assessment is to be used during the COVID 19 (Coronavirus) pandemic.
Where necessary, please also refer to the site specific COVID 19 Risk assessment.
Section 9 must be reviewed and completed where local restrictions are in place or the client has provided us with additional instructions e.g. the wearing of face coverings in some settings.

Keep a minimum distance of 2 metres where possible



Wash hands frequently (for at least 20 seconds) or use hand sanitizer with a minimum of 60% alcohol



Clean surfaces frequently including door handles, rails, hoists etc.



Avoid touching your face, nose and eyes



2 Work activity

Bodily Fluid Spillages and Virus Disease within Police Cells and environments.



When carrying out any risk assessment, follow the 5-step process:

- 1. Identify the hazards
- 2. Decide who might be harmed and how
- 3. Evaluate the risk and introduce controls
- 4. Record your findings and implement them
- 5. Review assessment and amend as necessary

In all cases consideration must be given to the following:

- Manual handling requirements
- Hygiene
- Working at height
- Good housekeeping
- Any training, instruction or supervision that may be required
- Use of PPE

3	Potential Hazards						
	Infection	Chemical Hazards	Personal Safety	COVID 19			
	Others:						

4	Who will be affected	Employee	\	Members of Public	✓	Contractor	Visitor	✓
	Others: please specify							

5	Evaluate Risk - Risk Rating Table					
	Probability of Occurrence	Р	Potential Severity	S		
	Common	5	Fatal	5		
	Probable	4	Major	4		
	Occasional	3	Serious	3		
	Possible	2	Minor	2		
	Improbable	1	Slight	1		
Ris	k Rating : (P) Probability x (S) Severity = Risk Ra	ating (1-8 Lo	w) (<mark>9-15 Medium</mark>) (<mark>16-25 High</mark>)			

Risk (R)	Likelihood					
Severity	1	2	3	4	5	Low: Continue but review
	2	4	6	8	10	regularly to ensure controls remain effective.
	3	6	9	12	15	Medium: Continue, as above, but implement additional
	4	8	12	16	20	controls where possible. Monitor regularly.
	5	10	15	20	25	High: Stop the activity and re-
						assess. Identify new controls. Seek advice from manager or Health and Safety team

6	Pre-Controls Risk Rating: HIGH			
	Infection 7 Illness	4 x 4 = 16	Use of vehicles during coronavirus pandemic (If necessary)	4 x 4 = 16
	Chemical Hazards	4 x 3 = 12	Sharps	3 x 4 = 12
	Personal safety	3 x 3 = 9		
	Emergency Issues	4 x 5 = 20		

7	List the existing controls – when choosing your controls ensure you use the hierarchy of controls, eliminating hazards where possible				
	Also refer to the other Cleaning Risk Assessments for general cleaning hazards and to the Method statement and Toolbox talk on bodily fluid spills				

7.1	Infection & Illness	Revised Risk Rating PxS
	Good Hygiene practices are to be observed.	3 x 9 = 9
	Thoroughly wash your regularly and often using the soap provided on site.	
	Principles of general contamination to be reinforced in addition to specific Corvid 19 advice.	
	Given the nature of this virus, this document will be subject to regular review and may be amended should the situation change. Pinnacle will, as a minimum, work to standards and advice laid out by the relevant authority i.e. the government, NHS or Public Health England.	
	Advice available at https://www.nhs.uk/conditions/coronavirus-covid-19/	
	As per RA 265 General Cleaning	
	Potentially hazardous waste e.g. vomit / bodily fluids must be disposed of correctly and surfaces properly disinfected. –	
	Correct PPE to be used which may include disposable gloves and aprons used for all activities that may result in contamination of clothing with blood, body fluids or faeces. Such PPE is double bagged and disposed of appropriately after a single use. —	
	Adequate provision for hand cleansing All wounds on exposed skin are suitably covered - Do not eat whilst carrying out this activity.	
	 Training provided and guidance given via toolbox talk & method statement (Deep Cleaning Custody) (Deep Cleaning Office Cleaning) Potentially hazardous waste e.g. blood, vomit, bodily fluids etc. must be disposed of correctly and surfaces properly disinfected. 	
	 Isolate spillage area so that others cannot approach Disposable gloves and fully body suits to be used for all activities that may result 	
	in contamination of clothing with blood, body fluids, faeces and viruses.Such PPE is to be double bagged after use and disposed of appropriately after a	
	single use.	
	 Waste collections for clinical waste Adequate provision for hand washing (soap and hot water) readily available. 	
	 All wounds on exposed skin are to be suitably covered 	
	 Inoculation strongly recommended to staff to protect against diseases. If immunisations are refused, all duties remain the same. PPE provided on site 	
	should be worn as per the training provided and to prevent risk of infection.	

7.2	Chemical Hazards	Revised Risk Rating PxS
	 Least hazardous chemicals used wherever possible. Material Safety Data Sheet for substances obtained from supplier and guidance followed. 	2 x 3 = 6

- COSHH Assessment completed for all hazardous chemicals and control measures implemented.
- Chlorine based chemicals must not be applied directly to acidic bodily fluids such as urine or vomit as dangerous chlorine vapours will be released.
- Appropriate Personal Protective Equipment (e.g. gloves, goggles etc.) provided and worn where identified in COSHH assessment.
- Chemicals stored / used / transported appropriately and access restricted when in use.
- Immediate cleaning up of any spillage
- All containers clearly labelled
- Always read the labels before using Harmful Substances.

7.3	Personal Safety	Revised Risk Rating PxS
	 All staff are given personal safety awareness training. Staff to leave the area and report incident to manager & police if appropriate. All staff are advised to avoid conflict and not to retaliate. Staff are reminded of the importance of their own conduct. Abusive/aggressive staff or visitors are identified, and details forwarded to the appropriate authority by manager. We do not have full control over a people's behaviour. Staff should always remain vigilant and professional. 	2 x 3 = 6

7.4	Emergency Issues	Revised Risk Rating PxS
	 All staff to know first aiders and location of first aid kits. All staff to be familiar with emergency / evacuation procedures All staff to adhere to advice from emergency services 	2 x 5 = 10
	In the event of a pandemic, endemic, local health scares etc:	
	 Pinnacle Managers and staff to seek guidance from PHE or relevant health authority and adhere to official guidance given. Managers to regularly assess and monitor situation, this may include liaising with the client Staff to wear appropriate PPE depending on advice given. Staff to report any illness to manager. Good hygiene standards always observed 	
	PLEASE SEE SECTION BELOW FOR FURTHER ADVICE	

7.5	Public Health England Guidance to Cleaning (Non-Healthcare settings)	Revised Risk Rating PxS
	https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings	3 x 4 = 12 Med
	Principles of cleaning after the case has left the setting or area	
	Personal protective equipment (PPE)	
	 The minimum PPE to be worn for cleaning an area where a person with possible or confirmed coronavirus (COVID-19) has been is disposable gloves and an apron. Hands should be washed with soap and water for 20 seconds after all PPE has been removed. It must be worn in accordance with this risk assessment and the COSHH assessment. 	
	 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) or there is visible contamination with bodily fluids, then additional PPE to protect the cleaner's eyes, mouth and nose must be considered e.g. the use of a mask or face shield. 	
	 Whilst masks may not be necessary for all scenarios under PHE, an assessment has been carried out by the police / client and Pinnacle will abide by the findings of that assessment i.e. to wear masks in custody suites. Each Covid-19 case is dealt with individually and will be RA assessed seperatley by the operator. 	
	Cleaning and disinfection	
	 Public areas where a symptomatic individual has passed through and spent minimal time, such as corridors, but which are not visibly contaminated with body fluids can be cleaned thoroughly as normal. 	
	 All surfaces that the symptomatic person has come into contact with must be cleaned and disinfected, including: 	
	objects which are visibly contaminated with body fluids	
	 all potentially contaminated high-contact areas such as bathrooms, door handles, telephones, grab-rails in corridors and stairwells 	
	 Use disposable cloths or paper roll and disposable mop heads, to clean all hard surfaces, floors, chairs, door handles and sanitary fittings, following one of the options below: 	
	 use either a combined detergent disinfectant solution at a dilution of 1,000 parts per million available chlorine 	

- or
- a household detergent followed by disinfection (1000 ppm av.cl.). Follow manufacturer's instructions for dilution, application and contact times for all detergents and disinfectants
- or
- if an alternative disinfectant is used within the organization, this should be checked and ensure that it is effective against enveloped viruses
- Avoid creating splashes and spray when cleaning.
- Any cloths and mop heads used must be disposed of and should be put into waste bags as outlined below.
- When items cannot be cleaned using detergents or laundered, for example, upholstered furniture and mattresses, steam cleaning should be used.
- Any items that are heavily contaminated with body fluids and cannot be cleaned by washing should be disposed of.
- If possible, keep an area closed off and secure for 72 hours. After this time the amount of virus contamination will have decreased substantially, and you can clean as normal with your usual products.

Waste

- Waste (including aprons, gloves, wipes etc.) from possible cases and cleaning of areas where possible cases have been:
- Should be put in a plastic rubbish bag and tied when full.
- The plastic bag should then be placed in a second bin bag and tied.
- It should be put in a suitable and secure place and marked for storage until the individual's test results are known.
- Waste should be stored safely and kept away from children. You should not put
 your waste 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 put in with the normal waste
- if the individual tests positive, then store it for at least 72 hours and put in with the normal waste
- If storage for at least 72 hours is not appropriate, arrange for collection as a Category B infectious waste either by your local waste collection authority if they currently collect your waste or otherwise by a specialist clinical waste contractor. They will supply you with orange clinical waste bags for you to place your bags into so the waste can be sent for appropriate treatment.

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.
 Laundry must be double bagged for 72 hours before being sent off.
- Do not shake dirty laundry, this minimizes the possibility of dispersing virus through the air.
- Clean and disinfect anything used for transporting laundry with your usual products, in line with the cleaning guidance above.

7.6	Use of vehicles during coronavirus pandemic (If necessary)	Revised Risk Rating PxS
	 Wherever possible, we must observe the social distancing advice and one person per vehicle must be our standard position. If this is not possible: Each crew with their manager will need to complete the 'site specific – vehicle sharing' risk assessment for each vehicle. No more than two people per vehicle and only if necessary If any staff member has concerns regarding sharing a vehicle during the coronavirus outbreak, they must speak with their manager before the activity begins. Face coverings should be considered by all members of staff in the vehicle, unless they are exempt from wearing one or if the wearing of a covering impedes a driver's vision or causes a distraction 	3 x 4 = 12

7.7	Additional Controls during COVID 19	Revised Risk Rating PxS
	 Any member of staff that shows symptoms of COVID 19 – high temperature, constiunal coughing and /or anosmia (change in taste / smell sensation) must stay at home and observe the appropriate self-islation period for their household. Staff must inform us if they feel they are within a 'vulnerable or at risk' group and an individual assessment will need to be carried out Is the work necessary? Consider whether start / break / finish times can be staggered PPE must be worn as per existing COSHH and risk assessments. If masks are to be worn, i.e. bodily spills they must be worn as per manufacturers instructions. All staff must regualrly wash their hands. If hand washing facilities are not available, sanitising gel or simialr must be available Avoid sharing equipment or handling other people's equipment. If this is necessary, equipment should be wiped down and 'drop off' zones created to 	3 x 4 = 12

try and meet the social distancing guidance

- Avoid splitting teams up. Where possible keep the same two people in a team.
- Keep the activity as short as possible without compromising any other safety issues e.g. don't rush the work.
- Wherever possible maintain social distancing
- Work back to back or side to side but avoid face to face work activities
- Wearing of Face Coverigns see 7.7 a

7.7 a Use of face coverings within work settings

https://www.gov.uk/government/publications/face-coverings-when-to-wear-one-and-how-to-make-your-own/face-coverings-when-to-wear-one-and-how-to-make-your-own

In England, you must wear a face covering in the following indoor settings. A face covering is not PPE. If your Risk Assessments states a mask must be worn, then you would wear a mask. You are expected to wear a face covering before entering any of these settings below and must keep it on until you leave unless there is a reasonable excuse for removing it or you are exempt:

- public transport
- taxis and private hire vehicles
- transport hubs
- shops and supermarkets
- shopping centres
- auction houses
- premises providing hospitality
- post offices, banks, building societies, high-street solicitors and accountants, credit unions, short-term loan providers, savings clubs and money service businesses
- estate and lettings agents
- theatres
- premises providing personal care and beauty treatments
- premises providing veterinary services
- visitor attractions and entertainment venues
- libraries and public reading rooms
- places of worship
- funeral service providers
- community centres, youth centres and social clubs
- exhibition halls and conference centres
- public areas in hotels and hostels
- storage and distribution facilities
- You should also wear a face covering in indoor places not listed here where social distancing
 may be difficult and where you will <u>come into contact* with</u> people you do not normally
 meet.
- In situations where a Pinnacle colleague is <u>meeting with a customer face-to-face in an</u>
 <u>enclosed space</u> where social distancing is not possible, colleagues must wear a face covering
 for the duration of the meeting
- Face coverings are needed in NHS settings, including hospitals and primary or community care settings, such as GP surgeries. They are also advised to be worn in care homes.
- * A 'contact' is a person who has been close to someone who has tested positive for COVID-

19 anytime from 2 days before the person was symptomatic up to 10 days from onset of symptoms (this is when they are infectious to others). For example, a contact can be:

- people who spend significant time in the same household as a person who has tested positive for COVID-19
- sexual partners
- a person who has had face-to-face contact (within one metre), with someone who has tested positive for COVID-19, including:

being coughed on

having a face-to-face conversation within one metre

having skin-to-skin physical contact, or

contact within one metre for one minute or longer without face-to-face contact

- a person who has been within 2 metres of someone who has tested positive for COVID-19 for more than 15 minutes
- a person who has travelled in a small vehicle with someone who has tested positive for COVID-19 or in a large vehicle or plane near someone who has tested positive for COVID-19

In addition, your client may wish to implement additional controls. These should be discussed with the Contract Manager and Section 9 completed accordingly. These premises are likely to include, but not limited to, the following settings:

- Care and Support
- Independent living
- Sheltered accommodation
- Hostels

Post control Risk Rating:

- NHS settings
- Joint Services
- Police cells and surrounding environments

Medium

And the appropriate risk rating applied per setting

7.8	Sharps	
	Staff not to pick up any sharps – but alert others to hazards	2 x 4 = 8
	 Staff to remove sharps bins to clinical waste store where appropriate 	Low

8 Are the existing control measures adequate? Yes

If No: go to 9 If Yes: go to 10

9.1	Identify and list the additional	Please also refer to 7.7
	control measures required for safe	
	working using the following	
	hierarchy:	
	1 Eradicate the hazard	
	2 Reduce the hazard	
	3 Isolate the hazard	
	4 Contain the hazard	

9.2	Local issues – restrictions and additional client controls (Consider: Site/ Equipment & PPE /Employees /Specific issues)	Revised Risk Rating PxS

10	Final risk rating (To be completed)	

11	Risk assessment sheet completed	Have all relevant employees signed awareness sheet to say they have been informed/trained in controls
	Signed	Signed
	Date	Date
	Risk assessment sheet reviewed	Have all relevant employees signed awareness sheet to say they have been informed/trained in controls
	Signed	Signed
	Date	Date
	Risk assessment sheet reviewed	Have all relevant employees signed awareness sheet to say they have been informed/trained in controls
	Signed	Signed
	Date	Date
	Risk assessment sheet reviewed	Have all relevant employees signed awareness sheet to say they have been informed/trained in controls
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