

RISK ASSESSMENT



Workplace	East Grinstead Town FC			Assessment Number	Rev5
	Coronavirus (COVID-19) Risk Assessment				
Date Conducted:	20 th August 2020	Review by Date:	21/11/20	Date Reviewed	21/10/2020
Assessment Team	Barry Bryant & Jordan Beasley & Andy Willis				
Information	<p>The incubation period of COVID-19 is between 2 to 14 days. This means that if a person remains well 14 days after contact with someone with confirmed coronavirus, they have not been infected.</p> <p>The following symptoms may develop in the 14 days after exposure to someone who has COVID-19 infection:</p> <ul style="list-style-type: none"> • cough • difficulty in breathing • fever • anosmia – a loss or change in your sense of smell, it can also affect your sense of taste as the two are closely linked <p>For most people COVID-19 will be a mild infection</p> <p>Generally, these infections can cause more severe symptoms in people with weakened immune systems, older people, and those with long-term conditions like diabetes, cancer and chronic lung disease</p> <p>Children with COVID-19 appear to be less severely affected. It is nevertheless important to do your best to follow this guidance</p> <p>It's good practice for employers to:</p> <ul style="list-style-type: none"> • keep everyone updated on actions being taken to reduce risks of exposure in the workplace • make sure everyone's contact numbers and emergency contact details are up to date • make sure managers know how to spot symptoms of coronavirus (COVID-19) and are clear on any relevant processes, for example sickness reporting and sick pay, and procedures in case someone in the workplace develops the virus • make sure there are places to wash hands for 20 seconds with soap and water, and encourage everyone to do so regularly • provide hand sanitiser and tissues for staff, and encourage them to use them <p>The content of this risk assessment was produced when the UK was at COVID Alert Level 3. This assessment should be reviewed following any changes to the UK government COVID Alert Level, or when new guidance is published.</p>				
Nearest NHS Walk in: Queen Victoria Hospital, Holtye Road, East Grinstead, RH19 3DZ					
0.6 MILES					

HM Government

5 As level four and there is a material risk of healthcare services being overwhelmed

4 A COVID-19 epidemic is in general circulation; transmission is high or rising exponentially

3 A COVID-19 epidemic is in general circulation

2 COVID-19 is present in the UK, but the number of cases and transmission is low

1 COVID-19 is not known to be present in the UK

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E - Employees	1 No Injury, property damage	1 Very Unlikely	Severity X Probability = 1 to 5	Low	Y – acceptable risk, work can start
C - Contractors	2 Minor Injury	2 Unlikely	Severity X Probability = 6 to 14	Med	Y or N – may need further consideration
V - Visitors	3 +7 Day Absence	3 Likely			
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1 Hazard (something with the potential to cause harm, how will it be realised and what is the potential injury?)	2 At Risk	Risk			6 Control Measures	Risk		
		3 Severity	4 Probability	5 Risk		7 Severity	8 Probability	9 Risk
Transfer of disease from being in close proximity to others who are symptomatic of COVID-19 Fever, flu like symptoms	A	5	4	20	<ul style="list-style-type: none"> Employees are to follow advice prescribed by Scientific Advisory Group for Emergencies (SAGE) and UK Chief Medical Officers via gov.uk website Where possible employees are to work remotely, for example administrative staff If someone becomes unwell in the workplace with a new, continuous cough or a high temperature, they should be sent home Everyone should self assess themselves and member of their household for COVID symptoms before every training session and match/ All staff/players to use the FA self-screening table which will be retained at each training session/match Anyone displaying symptoms of a high temperature or a new continuous cough or anosmia should self-isolate at home. If you live alone stay at home for 10 days or until they are no longer symptomatic and have tested negative for COVID19 <ul style="list-style-type: none"> Do not go to a GP surgery, pharmacy or hospital. You do not need to contact 111 unless you feel you cannot cope with your symptoms, your condition gets worse or if you do not get better after 7 days. For a medical emergency dial 999 Stay at least 2m away from other people in your home whenever possible Employees should not be encouraged to return to work during this time however remote working may be possible Employees who have been contacted by the NHS track and trace system are to self isolate following guidance that will be issued during the track and trace process If you live with others and you or one of them have symptoms of coronavirus or someone in your 'support bubble' has symptoms of, then all household members must stay at home and not leave the house for 14 days or until they are no longer symptomatic and have all tested negative for COVID19. The 14-day period starts from the day when the first person in the house became ill. Anyone in the household who starts displaying symptoms, they need to stay at home for 10 days from when the symptoms appeared, regardless of what day they are on in the original 14-day isolation period You should remain at home until 10 days after the onset of your symptoms. After 10 days, if you feel better and no longer have a high temperature, you can return to your normal routine. If you have not had any signs of improvement and have not already sought medical advice, contact NHS 111 online. If you have no internet access, call NHS 111 Public Health England will contact workplaces where confirmed cases of Coronavirus have visited with further advice if required. 	5	1	5

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					<ul style="list-style-type: none"> Visitors to work areas are to confirm they are not symptomatic, or live with anyone who is symptomatic Once symptomatic, all surfaces that the person has come into contact with must be cleaned with particular attention on touch points 			
<p>Transfer of disease from being in close proximity to those infected with COVID-19 who are asymptomatic or presymptomatic during training</p> <p>Fever, flu like symptoms</p>	A	5	3	15	<ul style="list-style-type: none"> All playing/non-playing staff are to follow advice prescribed by Scientific Advisory Group for Emergencies (SAGE) and UK Chief Medical Officers via gov.uk website When not playing or training, everyone is to maintain 2m distance from others wherever possible Toilet facilities will be made available pre-training and up to 30 minutes after the session ends. Toilets will be cleaned and disinfected after use. Toilet facilities may only be used by one person at a time Training is limited to groups of 30 including coaches Additional hand washing/ hand sanitiser stations to be made available to all during sessions Attendance for all personnel to be recorded for each training session including full names, addresses and contact numbers. This is to facilitate NHS Track and Trace. This information should be stored securely in line with GDPR measures for 21 days before it can be destroyed Increased cleaning regime with particular care on contact points such as door handles, light switched etc All equipment to be handled such as balls, cones, nets etc to be disinfected before and after each training session and at regular intervals during the session such as during breaks. Ball handling kept to a minimum, ball retrieval should be via feet if possible. Balls are to be disinfected during breaks Spitting is not permitted. Sneezing or coughing should be into the elbow or into a tissue Huddles are not permitted – social distancing should be in place for instructions. These should be held outdoor if possible Set plays should be taken promptly to minimise prolonged close contact marking All players/staff to be temperature checked prior to the training session. A temperature of over 37.8° will result in the player/staff member to follow the guidance on self-isolation and must not take part in the training session Spectators at training including parents/carers are restricted to 6-person gathering limits and must be spread out in line with government guidance ensuring space for officials, coaches and substitutes where relevant Water bottles or other refreshment containers must not be shared. Players are encouraged to bring their own drinks or refreshments in a labelled container Participants should take kit home to wash themselves. Where kit is shared such as spares, each person handling it should wash or sanitise their hands immediately after sanitising Training sessions to be staggered to allow for disinfecting areas between groups Coaches to limit persistent close proximity participants, this may be more prevalent in youth teams where players are likely to cluster around the ball 	5	1	5

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<p>Transfer of disease from being in close proximity to those infected with COVID-19 who are asymptomatic or pre-symptomatic during matches</p> <p>Fever, flu like symptoms</p>	A	5	3	15	<p>In addition to all of the controls listed under training the following control measures are also to be followed for matches;</p> <ul style="list-style-type: none"> Contact details retained for all opposition players/staff for the purposes of NHS Track and Trace All players to be made aware of the FA Code of Behaviour regarding COVID 19 Match officials are to observe the FA's guidance on social distancing Team sheets to be exchanged by all parties placing them on a table for each Club Official and Referee to collect the information they each required Both side are to produce a signed declaration that all players and staff have undergone a temperature check and are non-symptomatic of COVID. Three separate areas on the pitch will be outlined with cones for the pre match warm up; one for each team and one for officials Social distancing measures to be observed at all times within the dressing rooms Dressing rooms to operate in a bubble of 6 for changing and showering purposes. Only 6 personal at anytime to be in the dressing room at all times unless it is a team talk. Where possible 11 players and management should be in the dressing rooms only if team talks cannot take place on the pitch Where possible all members of the dressing room to wear masks Referee's also where possible to wear masks in the dressing rooms Where possible players should avoid shouting or raising their voice Teams to enter the field of play separately, from separate entrances if at all possible Players and staff to observe social distancing before the match, during breaks in play and following the match. This will include not taking part in pre/post match hand shakes Goal celebrations are to be discouraged Match preparation meetings to be held via video call where possible Where indoor spaces must be used for example for meetings they should be well ventilated, used for short duration and numbers minimised for example manager and starting 11 only Each club is to use their own electronic substitution board and nominate one person from the Technical Area to use the board. If a club misplaces their board or their board malfunctions, then the nominated person from the opposition is to operate on behalf of both teams Technical areas to be extended and marked out with additional seating so players and coaches can adhere to social distancing 	5	1	5

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<p>Transfer of disease from being in close proximity to those infected with COVID-19 who are asymptomatic or pre-symptomatic to and from medical staff/physios etc</p> <p>Fever, flu like symptoms</p>	A	5	3	15	<ul style="list-style-type: none"> Medical staff to be made aware of the FA Guidance for First Aid for returning to outdoor competitive grass roots football Ver 1.0 Injuries during play should still be treated as participant health and safety is of utmost importance. In all cases but particularly where medical treatment is needed, the best form of protection is through rigorous cleaning, personal hygiene and regular hand hygiene. An increased frequency of cleaning and disinfection of all surfaces and equipment, using standard household cleaning and disinfection products, will be recommended in The FA's supporting medical guidance If a participant gets injured, a member of their household can assist if present and appropriate, but others (including match officials and teammates and coaches) will still need to socially distance unless a life- or limb-threatening injury necessitates compromising guidelines to provide emergency care. If there is a first-aider or other medical personnel present, they should be equipped with the appropriate PPE (including face coverings) to protect themselves and others if they need to compromise social-distancing guidelines to provide medical assistance. After contact with an injured participant, the person who has administered first aid should clean their hands thoroughly with soap and water or alcohol hand sanitiser at the earliest opportunity. This advice is applicable to all situations, regardless of whether there was close contact or social distancing was maintained. The first aider should also avoid touching their mouth, eyes and nose. Physios or their equivalent or anyone who is administering any form of treatment, should keep a record of each participant they have come into contact with for NHS test and trace purposes. If a participant becomes Covid-19 symptomatic during the activity, they should immediately remove themselves from the session and return home as soon as possible. NHS guidance on further management of symptoms should be followed. See below for cleaning procedures in this scenario 	5	1	5
<p>Cleaning areas where a symptomatic individual has left or passed through</p> <p>Fever, flu like symptoms</p>	A	5	3	15	<ul style="list-style-type: none"> If required referee changing room 2 is to be used as an area to quarantine those who are symptomatic of COVID19 though they should leave the premises and isolate at home at the earliest opportunity Cleaning an area with normal household disinfectant after someone with suspected coronavirus (COVID-19) has left will reduce the risk of passing the infection on to other people If an area can be kept closed and secure for 72 hours, wait until this time has passed for cleaning as the amount of virus living on surfaces will have reduced significantly by 72 hours Wherever possible, wear disposable or washing-up gloves and aprons for cleaning. These should be double-bagged, then stored securely for 72 hours then thrown away in the regular rubbish after cleaning is finished 	5	1	5

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				<ul style="list-style-type: none"> Using a disposable cloth, first clean hard surfaces with warm soapy water. Then disinfect these surfaces with the cleaning products you normally use. Pay particular attention to frequently touched areas and surfaces, such as bathrooms, grab-rails in corridors and stairwells and door handles If an area has been heavily contaminated, such as with visible bodily fluids, from a person with coronavirus (COVID-19), consider using protection for the eyes, mouth and nose, as well as wearing 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 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: <ul style="list-style-type: none"> 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: <ul style="list-style-type: none"> 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 organisation, 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. 		

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					<ul style="list-style-type: none"> 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. 			
Poor hygiene practices leading to transfer of viral infection. Fever, flu like symptoms, possible death	A	5	3	15	<ul style="list-style-type: none"> Employees/players are asked to wash hands more frequently than usual with soap and hot water for around 20 seconds particularly after coughing, sneezing and blowing your nose, or after being in public areas where people are doing so Alcohol based hand rubs can also be used if convenient however hot water and soap are preferable Employees are to practice good hygiene e.g. follow NHS 'catch it, kill it, bin it' guidelines Used tissues should be disposed of immediately Clean and disinfect regularly touched objects and surfaces using regular cleaning products Hot water and cleaning products (not a bar of soap as it will harbour contamination) to be available at all times. Disposable hand towels are to be available at all times 	5	1	5
People who are at increased risk of severe illness from coronavirus COVID-19)	A	5	4	20	<p>People who are at increased risk include;</p> <ul style="list-style-type: none"> aged 70 or older (regardless of medical conditions) under 70 with an underlying health condition listed below (ie anyone instructed to get a flu jab as an adult each year on medical grounds): <ul style="list-style-type: none"> chronic (long-term) respiratory diseases, such as asthma, chronic obstructive pulmonary disease (COPD), emphysema or bronchitis chronic heart disease, such as heart failure chronic kidney disease chronic liver disease, such as hepatitis chronic neurological conditions, such as Parkinson's disease, motor neurone disease, multiple sclerosis (MS), a learning disability or cerebral palsy diabetes problems with your spleen – for example, sickle cell disease or if you have had your spleen removed a weakened immune system as the result of conditions such as HIV and AIDS, or medicines such as steroid tablets or chemotherapy being seriously overweight (a body mass index (BMI) of 40 or above) those who are pregnant 	5	1	5

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					<p>Serious conditions including;</p> <ul style="list-style-type: none"> people who have received an organ transplant and remain on ongoing immunosuppression medication people with cancer who are undergoing active chemotherapy or radiotherapy people with cancers of the blood or bone marrow such as leukaemia who are at any stage of treatment people with severe chest conditions such as cystic fibrosis or severe asthma (requiring hospital admissions or courses of steroid tablets) people with severe diseases of body systems, such as severe kidney disease (dialysis) <p>Control measures</p> <ul style="list-style-type: none"> Avoid contact with someone who is displaying symptoms of coronavirus (COVID-19). These symptoms include high temperature and/or new and continuous cough Avoid non-essential use of public transport, varying your travel times to avoid rush hour, when possible Work from home, where possible Avoid large gatherings, and gatherings in smaller public spaces such as pubs, cinemas, restaurants, theatres, bars, clubs Avoid gatherings with friends and family. Keep in touch using remote technology such as phone, internet, and social media Use telephone or online services to contact your GP or other essential service 			
Travel	A	5	3	15	<p>Wherever possible staff/players should travel to alone on foot or by bicycle, if this is not practical they should travel in a vehicle on their own If staff/players have no option but to share transport;</p> <ul style="list-style-type: none"> Journeys should be shared with the same individuals and with the minimum number of people at any one time. Good ventilation (i.e. keeping the windows open) and facing away from each other may help to reduce the risk of transmission. The vehicle should be cleaned regularly using gloves and standard cleaning products, with particular emphasis on handles and other areas where passengers may touch surfaces. Wear a face covering <p>If staff/players must use public transport;</p> <ul style="list-style-type: none"> They should wash thoroughly before and after using public transport 	5	1	5

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					<ul style="list-style-type: none"> Maintain a 2m distance from other users to the best of their ability Wear a face-covering Avoid eating, drinking or touching their face/face covering until they have washed their hands <p>Players and staff to inform club if they, or anyone in their household, have planned to travel or returned from at risk areas both abroad and within the UK.</p>			
Spectators	A	5	4	20	<p>Spectators may only attend matches in line with guidance issued by the league.. Any further changes to this guidance will require aa review of this risk assessment with controls put in place. These controls will include;</p> <ul style="list-style-type: none"> Limited number of spectators, in line with league guidance, bubbles of spectators of no more than 6 will be allowed to spectate together though these groups should be socially distanced form one another Notices/posters put on display to inform spectators not to attend if they, or someone in their household, is symptomatic of COVID19 Where appropriate, one way systems introduced to limit the amount of face to face close contact, this is particularly important for spectators entering and exiting the stadium Spectators to enter via turnstiles where a sanitising station is to be positioned and electrically register via the free track and trace app provided Additional cleaning of all spectator areas including contact points such as seats/door handles to be put into place Hand washing stations to be set up in spectator areas to facilitate regular disinfecting of hands Safety marking tape to outline 1m distance to be put in place in spectator areas including areas where spectators may queue and around the pitch, posters and staff to inform spectators of these systems and to encourage their use Spectators must follow any one way systems put in place Spectator details requested to NHS Track and Trace 	5	2	10
Hospitality including burger bar, washrooms and clubhouse	A	5	4	20	<ul style="list-style-type: none"> All staff to be made aware of government guidance – Keeping Workers and Customers Safe during Coronavirus (COVID-19) in Restaurants, Pubs, Bars, and Takeaway Services 31st July 2020 Clubhouse bar to be reconfigured to allow for tables of up to 6 with suitable distance between each back to back or side to side distancing is preferred to face to face Where required, manage entry to ensure venue does not become over capacity such as a one in/one out system to include washrooms also Install additional hand washing/hand sanitising stations for both customers and staff All staff and customers are to wear masks inside the clubhouse Customers encouraged to pay by contactless wherever possible Condiments/sugars/stirrers etc to be replaced with single use sachets 	5	2	10

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					<ul style="list-style-type: none"> Perspex screens where possible to prevent spread between staff/customers Customers are to leave bar area once they have made a purchase, seating at bar is not permitted Display posters informing customers of COVID-19 control measures and to encourage good hygiene for both staff and customers Keep club house doors and windows open to allow for good ventilation. Make use of ceiling fans/ air con if available Increased cleaning regime with particular focus on contact points Clubhouse MUST be closed by 10pm 			
Hospitality - Working in close proximity to other workers when this cannot be avoided	A	5	4	20	<ul style="list-style-type: none"> Where tasks require close working they should be subject to dynamic risk assessment which will aim to reduce the frequency, time scale and operatives involved. Minimise the frequency and time operatives work within 2m as far as practicable, minimise the number of workers involved with these tasks Close working is preferable where operatives are side to side or back to back, face to face working is only permitted if absolutely necessary. Where practicable, the same operatives are to carry out close working with one another. Fixed teams or partnering amongst staff members Encourage the use of face coverings to prevent transmission 	5	2	10
Further Actions	(Further control measures that could be implemented to improve safety)							
Additional Comments	The following guidance was utilised in this risk assessment and should be read in conjunction with the assessment by relevant parties; <ul style="list-style-type: none"> COVID-19 guidance on re-starting outdoor competitive grassroots football COVID-19 first aid guidance for returning to outdoor competitive grassroots football Keeping workers and customers safe during COVID-19 in restaurants, pubs, bars and takeaway services 							

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Authorised by Nominated COVID19 Officer	NAME: ANDY WILLIS	SIGNATURE: A Willis	Dated: 21/08/20

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