

<b>Durham Deafened Support</b>	<b>Return of Support Groups</b>													
<b>Date of Assessment:</b>	13/8/20		<b>Review Date:</b>		Ongoing during pandemic		<b>Revision No:</b>		1					
<b>Persons Exposed:</b>	<b>Employees:</b>		✓	<b>Other Workers:</b>		✓	<b>Public / Visitors:</b>		✓	<b>Young Persons:</b>		✓	<b>Estimated total number of persons at risk:</b>	Variable
	<b>New / Expectant Mothers:</b>				✓	<b>Vulnerable Persons:</b>		✓	<b>Other:</b>					

<b>Task Description:</b>	<b>Risk assessment for the possible transmission of Coronavirus / COVID-19.</b>
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This Risk Assessment should be read in conjunction with individual Risk Assessments where Durham Deafened Support hold Support Groups.

Support Groups covered by this Risk Assessment include

- Local Community Support Groups including Lip Reading
- Crafts
- Yoga
- Tinnitus
- Group for People with Dual Sensory Loss

Risk Assessments from ATLA, British Tinnitus Association and the British Wheel of Yoga have been considered when drawing up this Risk Assessment.

This Risk Assessment does not cover the Dealing with Deafness Weeks – further Risk Assessment to follow covering this activity

It should be noted that with the exception of 3 Craft Groups at Haswell, Sedgfield and Willington which are run by a volunteer all remaining DDS Session Providers are self-employed and it is recommended that they additionally undertake their own Risk Assessment

Hazard	Factors of Harm		Risk	Control Measures	Factors of Harm		Residual Risk	Further Actions	Acceptable Risk?	
	L	S			L	S			Yes	No
Transmission of the Virus	4	5	20	<p>All tutors are provided with information on good hygiene measures to include:</p> <ul style="list-style-type: none"> <li>washing hands with soap and water often – do this for at least 20 seconds.</li> <li>washing hands when you get home or into work.</li> <li>using hand sanitiser gel if soap and water are not available.</li> <li>covering mouth and nose with a tissue or sleeve (not hands) when coughing or sneezing.</li> <li>putting used tissues in the bin straight away and wash hands afterwards.</li> <li>not touching eyes, nose or mouth if hands are not clean.</li> </ul>	2	5	10	<p>In addition to any rules set out by individual Community Centres/ Venues eg</p> <ul style="list-style-type: none"> <li>Signing in for NHS Track and Trace</li> <li>Wearing of Face Coverings</li> <li>Taking of temperatures</li> <li>Wiping down of seats, handles etc and putting room back to as found</li> </ul> <p>The following should be looked at by all tutors</p> <p>Tutors to consider using plastic visors for lessons to enable members to lip read.</p> <p>Tutors to carry supplies of hand sanitiser</p> <p>Group members to be encouraged to wear masks during the class. This practice is now mandatory in many Community Centres</p>	✓	
				<p>All persons are instructed to obey 'social distancing' wherever possible. This means maintaining a 2m separation wherever practicable.</p> <p>If this is not practical then the 1m plus mitigation must be followed.</p> <p>Supplies of soap and hand sanitiser are available for use visitors and tutors are instructed to use this on arrival at the building where the group is to take place</p> <p>All people entering the building will be required to sign in to assist the NHS with track and trace.</p>				<p>The format of lessons may need to be changed to avoid any work in small groups during Lip Reading Support Groups which would necessitate attendees removing their masks.</p> <p>Craft tutors to initially design activities which use materials which relate to one person only and do not require sharing, Service Users to be asked to bring materials with them wherever possible</p> <p>Individual Tutors must take details of each person attending their sessions and to take down details in accordance with NHS Track and Trace System, unless the centre where the class is taking place has its own system in place. (Appendix C)</p> <p>Tutors to advise Service Users that they must not in any circumstances attend should they be showing any symptoms of Coronavirus</p>		

Hazard	Factors of Harm		Risk	Control Measures	Factors of Harm		Residual Risk	Further Actions	Acceptable Risk?	
	L	S			L	S			Yes	No
<b>Rooms and Common Areas of Use</b>	4	5	20	<p>Doors will be 'wedged' open whenever possible to limit 'touch points'.</p> <p>All tutors to make themselves aware of the Covid Guidance for the building where there group is to take place in particular looking at the following</p> <ul style="list-style-type: none"> <li>• Areas of Common Use to be used by DDS Members e.g. Toilets, Kitchens etc</li> <li>• Any one way systems etc that the venue may have</li> <li>• Rules the venue have for making refreshments</li> <li>• The Wearing of Masks within the venue</li> <li>• How the room will be set out to ensure that safe Social Distancing can occur – will this be undertaken by the Venue or is the person running the group expected to do this</li> </ul>	2	5	10	<p>DDS to request the Covid-19 Risk Assessment for each venue. Until this information is received, return to a specific venue cannot be considered</p> <p>DDS Staff to visit each venue before the group returns to ensure that the room that we hire within the venue enables Safe Social Distancing to take place. Return Checklist to be completed by staff member (see Appendix A) Where required Session Providers to be encouraged to undertake a joint visit with DDS Staff</p> <p>Tutors to share with Service Users the requirements for the Venue with regard to Covid-19 and Track and Trace</p>		

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	L	S			L	S			Yes	No
<b>Guidance for Service Users</b>	4	5	<b>20</b>	<p>A copy of the Risk Assessment relating to Group Activities to be made available to all Service Users and Tutors</p> <p>Attendees at all groups to be requested to sign Registration and Consent Form for each group they attend (Appendix B)</p>	2	5	<b>10</b>	<p>DDS to publish the Risk Assessment on the DDS Website but also to provide a paper copy of the Risk Assessment should this be requested.</p> <p>Copies of the Consent Form to be returned to the DDS office within 5 working days of completion by the Service User. Service Users to be advised that participation in the activity is at their own risk and DDS cannot be held responsible should an outbreak of Covid-19 result.</p> <p>In the event of a Service User (and/or tutor) displaying symptoms of Covid-19 or in the event of a positive test, the Service User or a family member must contact DDS as soon as possible</p> <p>Service Users may need to bring their own materials/ equipment with them to enable them to participate in a class e.g participants in a Yoga Class must bring a mat with them as these can no longer be provided by the Tutor or their own craft materials</p>	✓	

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	L	S			L	S			Yes	No
<b>Refreshments &amp; Taking Cash Payments</b>	4	5	20	DDS to establish the rules that each venue has in place with regard to refreshments – if the venue specifically prohibits the service of refreshments within the building this guidance must be followed	2	5	10	<p>In the event of refreshments been permitted in the building service users to be requested to bring their own cups etc from home. No service user cups can be left at venues.</p> <p>Service Users to bring their own biscuits/ snacks from home and packets of biscuits cannot be shared.</p> <p>At this moment in time – tutors cannot collect any tea fund money from Service Users as the taking of cash payments is not advisable.</p> <p>Tutors to designate a specific service user to make refreshments and wash up at the end of groups.</p> <p>Service Users can take off masks whilst having their ‘tea break’ but must ensure that social distancing remains in place</p>		

## Action Plan

Hazard	Further Actions	Assigned To	Due Date	Priority
All	Maintain current controls and procedures.	All Staff	Ongoing	Medium

Severity	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
		1	2	3	4	5
Likelihood						

Likelihood	Severity	Risk (Likelihood x Severity)
1 = Very Unlikely	1 = No injury	1 – 5 = Low
2 = Unlikely	2 = Minor Injury or Illness	6 – 12 = Medium
3 = Likely	3 = 7-day Injury or Illness	15 – 25 = High
4 = Very Likely	4 = Specified Injury or Illness	
5 = Almost Certain	5 = Fatality or disabling injury	

APPENDIX A

**Return Checklist for Venues**

**Name of Venue**

**Date of DDS Risk Assessment**

**Person/(s) Undertaking Risk Assessment**

**Names of any Venue Staff Present**

Action	Yes	No	N/a	Comment
Have we been supplied by Covid-19 Risk Assessment by the Venue				
<b>Has the venue got following in place (communal areas)</b>				
1) Specific Arrangements for entry into the building to avoid a congregation of people in communal areas				
2) Hand sanitiser available in the building				
3) Are they operating a Track and Trace System for the venue?				
4) Arrangements for use of any kitchen facilities				
5) Any specific arrangements for use of the toilet facilities				
6) Any one-way systems in place				
7) Appropriate Covid-19 signage				
8) Rules for wearing masks within the venue				
9) Does the venue have a dedicated safe area within the building where any suspected cases on site can be isolated				
<b>Room where group to take place</b>				
1) Will centre set up the room for the group to take place				
2) Will setting up the room be the responsibility of the DDS Tutor				
3) Is the room suitable to enable appropriate social distancing to be maintained?				

Action	Yes	No	N/a	Comment
4) If the answer to question 3 is no is there another room in the venue that could be used				
5) Can the tutor wedge open the door to enable air to circulate freely?				
6) Are there any windows within the venue?				
7) Is there hand sanitiser available in the room or will the tutor need to provide this				
8) What the requirements are for the tutor at the end of the session) e.g. will they be expected to wipe down chairs etc				
<b>Other</b>				
1) Does the venue have suitable public liability insurance in place?				
2) Does the tutor have suitable public liability insurance in place?				

Any Other Comments \_\_\_\_\_

Signatures

DDS Staff Member.....

Session Provider.....

Venue Staff Member .....



## Appendix B



### Durham Deafened Support (DDS) Registration and Consent Form

**ACTIVITY (Please state):**

**Date:** Weekly/ Monthly starting from

**VENUE (Please state):**

**PARTICIPANT:**

Name: ..... Tel: .....

Address: ..... Postcode: .....

**EMERGENCY CONTACT:**

Name: ..... Tel: .....

Relationship to participant: .....

**PARTICIPANT'S RESPONSIBILITIES**

I understand that it is my responsibility to:

- disclose any health issues or medications that are relevant to participation in this activity
- cease activity and report promptly to the activity leader any problems experienced during the activity
- if necessary, check with my GP before taking part in the activity
- keep DDS updated with any changes to my details
- not to attend any activities if showing any possible Covid 19 symptoms

Please include here relevant health issues that we need to be aware of:

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**Changes**

If there are any changes to your health during the course of this activity you need to let us know

I understand that my participation in the above-mentioned activity is entirely voluntary.

I **agree\*/do not agree\*** that in the case of a medical emergency, if the emergency contact named above cannot be contacted, necessary medical treatment should be sought for me. **\*(delete as appropriate)**

I **agree\*/do not agree** that I can potentially be photographed or filmed for the documentation, website, newsletter, evaluation, and promotion of DDS. **\*(delete as appropriate)**

I release Durham Deafened Support (DDS) for any responsibility and all liability, costs and damages which could arise from my participation in the event.

I agree to my contact details being held in case they are required for Covid19 Track and Trace as required by Government regulations. I am aware that the information provided will be retained by the Tutor and forwarded to the DDS main office within 5 working days

**Signature of Participant:** ..... **Date:** .....

DDS confirms that your personal information will not be shared with any third parties, without your consent, unless we have concerns about your welfare, or they are required for Covid 19 Track and Trace.

