

C: Customer; ST: Staff; Co: Contractors

No	RISK	WHO	MITIGATION	COMPLETE DATE
1.0	Primary Risk	C,ST,Co		
	Someone bringing Covid19 into the business and infecting other people, be they staff, customers or contractors		Our obligation is to provide a “safe as reasonably practicable” environment for all people. We need both protective measures and visible confidence building measures	
	Covid19 Transmission Methods?		<p>Our understanding is: Covid19 is transmitted in breath water droplets from one person being inhaled by another person. The WHO guidance is to keep people 1m apart while the UK Government guidance is to keep people 2m apart. Both these guidelines are approximation as studies show transmission is a function of time in proximity and distance apart, as well as environmental conditions, such as is it breath or a sneeze (sneeze travels farther) and is there a breeze to dilute breath.</p> <p>Both UK and Scottish Governments have moved to a 2m or 1m+with enhanced protection policy</p> <p>Spending time (minutes) close to someone in a confined space is more dangerous that spending the same amount of time with someone outdoors.</p> <p>The secondary transmission is via surfaces. Someone with the virus wipes their nose and then puts their hand on a surface, which someone else then touches with their hand and then touches their face. Guidance suggests that this is a secondary transmission mechanism, BUT it can be significant in high touch surfaces. For instance a grab handle that is repeatedly touched by many people may build up a viral load from one or more people that can be transmitted to others.</p> <p>Since Summer 2020, there have been a number of published studies showing that the risk of transmission in outdoor settings is very low. By outdoors these studies mean open spaces not enclosed or partially enclosed spaces. Similarly there have been a number of studies that show that the risk of transmission via</p>	<p>4.4.20</p> <p>9.7.20</p>

		<p>surfaces is considerably lower than initially thought and that almost all transmission occurs by breathing in virus loaded air droplets.</p> <p>Ventilation, airflow, and social distancing are therefore the most important factors to be considered.</p> <p>Reducing transmission risk depends upon:</p> <ul style="list-style-type: none"> a) Keeping guests and staff in well ventilated spaces b) Observing 1m plus social distancing c) Mask wearing in all public spaces d) Maintaining cleaning routines of high touch surfaces and areas such as w/c's 	<p>9.7.20</p>
	<p>How long does virus stay live on surfaces?</p>	<p>Review of government guidance does not provide an answer to this. Various journalist and technical papers on the internet give a wide range of conflicting information. At the moment it is not sensible to use any particular "time to decay" on surface guidance and this is not used as part of our prevention programme</p> <p>The most recent information implies that surface to hand to mouth transmission is a lower order risk in comparison to airborne transmission</p>	
	<p>What temperature kills the virus?</p>	<p>This is important when considering cooking; dish, glass, cutlery cleaning, and washing of towelling/cloths.</p> <p>Evidence presented by ARPAL (Supplier of our cleaning chemicals) suggests that a reasonable time/temperature guide to killing the virus is:</p> <ul style="list-style-type: none"> 30 min @60C 15 min @65C 1 min @80C <p>We need to check the operating temperatures of Glass Washer, Dish Washer, Plate Warmer and Laundry Dryer to make sure they operate above 60C The washer cycle does not need to be 60C if the dryer cycle is. Confirmed</p>	<p>1/7/20</p>

		<p>It is worth noting that a Bacteria is a living organism, so it can be killed. A virus is not a living organism, so it cannot be killed. The mechanism is either to remove it or to destroy the cell structure by heat or chemical.</p>	
	<p>What cleaning chemicals will de-activate the virus?</p>	<p>The advice from ARPAL is that the types of chemicals we can use for cleaning hotel and restaurant surfaces will not de-activate COVID19. The types of chemicals (concentrated bleach) that will de-activate COVID19 would also destroy the surfaces they were cleaning</p> <p>The advice from ARPAL is: SPRAY-WIPE-BIN</p> <p>This is removing the virus not killing it. Therefore, the process of doing this is important. Staff would use the normal spray, but then, wipe the surface dry with disposable cloth (Blue Roll) and immediately bin the cloth.</p> <p>It becomes very important that cloths are not re-used, and disposable paper products are used.</p> <p>The second important concept is “High Touch Areas”. As noted above, picking the virus up from surfaces is less likely, but the probability rises for any surface that is used again and again by many different people.</p> <p>High Touch areas must be identified and then a high frequency cleaning routine adopted for each area</p> <p>Examples are the front door – replace with automatic door, Room door handles – clean more frequently Reception Phone – clean at start of shift and used only by receptionist Card machine – offer contactless and if pin used then clean each time after use.</p> <p>ARPAL have provided useful training aids and graphics.</p>	<p>6/6/20</p> <p>6/6/20</p> <p>3/7/20</p>

2.0	Overall Objective& Current Status			
	To reduce transmission risk to as low as reasonably practicable and give staff and customers confidence in No11		Mask Wearing Social distancing protocols Health monitoring Cleaning high touch surfaces	
	Health Monitoring		Things we could do: a) Staff training on symptoms b) UK and Scottish Governments Require that we take the name and phone number of every booker for every booking so that if someone reports COVID then everyone can be traced.	14/7/20 15/7/20
	Current Status		<p>At 26th April Scotland moved to Level 4, and hotel and restaurant operations were allowed to resume on a limited basis. Scottish Government positive case data shows that Edinburgh has fallen to below levels last seen early September and overall vaccination rates have exceeded 50% of adults. New reports report studies showing that vaccination not only protects that vast majority of people from infection, reduces hospitalisation/disease severity amongst those vaccinated who do get the virus and also appear to reduce transmission.</p> <p>These factors taken together lead to both the Scottish and UK governments suggesting that a further easing will occur on 17th May with potentially all restrictions lifted by end of June.</p> <p>The population in Edinburgh City is 482,005, with daily positive cases in the 10-20 people range.</p> <p>The risk of a customer or staff member bringing Covid into the business have dramatically declined since Q4 20 &Q1 21.</p>	

			Actions for the risk assessment should be proportionate to the risk, and should change as the risk changes.	
3.0	Infrastructure			
	Main entry door is manual meaning each person has to put their hand on the door		Make main door motorised and sensor operated	3/7/20
	Public Toilets: hand operated door handles, locks, and manual toilet flush		Change hand dryer in 1 wc from manual to automatic	12/7/20
	Hand Sanitiser Availability		<p>Add Hand Sanitiser push operation to: LGF at bottom of stairs First Floor: by room 5 Second Floor: by room 8 Brasserie: by entrance door inside Buy 4 dispensers and 2*5L Jugs sanitiser</p> <p>We have considered hand sanitiser on each table/in w/c and in each room. Given rooms will be a clean environment and doors can be elbow opened we do not think sanitiser in each room is needed. Similarly, we do not think sanitiser on each table is needed as it can be used at each entry/exit to brasserie.</p> <p>In w/cs we think that hand washing is better than sanitising so having sanitiser may be the wrong incentive. Signs on W/C doors to remind people to Wash Hands & COVID rules</p> <p>All three of the above to be reviewed as government guidance develops</p>	<p>15/7/20</p> <p>4/4/20</p> <p>15/7/20</p>
	High touch and high footfall items/areas Footfall: entrance hall, circulation space around reception desk/brasserie/kitchen/w/c and stairs		<p>Footfall: Screen in front of reception 2m foot stand on stickers as a guide to gests. One in front of reception, on in entrance hall and one in lobby at bottom of stairs. 2-3 in brasserie</p> <p>High Touch: Disposable wipes to be used</p>	<p>2/7/20</p> <p>2/7/20</p>

	High touch: Card Machine/Reception keyboard/reception phones/till screens and equipment/menus/guest books in rooms		<p>Guest Book – remove from rooms</p> <p>Card Machine: - wipe each time it is used</p> <p>Keyboard & Reception Phone: at start of each shift and used only by receptionist at during shift or wiped between users</p> <p>Till Ipads, printer, till box: wipe every 30 mins</p> <p>Menus: re-use menus as risk has fallen</p>	<p>Training 10-15/7/20</p> <p>26/4/21</p>
	Information		<p>Clear and large sign in reception hall stating COVID policy</p> <p>Covid house rules on restaurant boards</p>	<p>15/7/20</p> <p>26/4/21</p>
4.0	PPE			
	<p>We need to supply appropriate PPE to staff and customers to reduce risk of transmission</p> <p>Potential transmission routes:</p> <p>Direct: Breath to breath customer-staff and vice versa</p> <p>Indirect: Via surfaces-customer-staff</p> <p>Indirect: Via virus on prepared food and plates/glasses/cutlery</p>		<p>Typical mitigations are:</p> <p>Regular hand washing/sanitising: We can enforce this by staff, but only request it of customers.</p> <p>PPE: Masks; goggles/visors; gloves</p> <p>HK: masks, eye protectors and gloves while using chemicals, but not gloves for other cleaning. Clean one room at a time. Wash hands and sanitise between rooms</p> <p>Kitchen: Regular hand wash. Kitchen staff wash hands between actions in any case. This to be re-enforced.</p> <p>Reception: Regular hand wash/sanitise (every 30 min). Can work behind screen and therefore no need for either mask or gloves</p> <p>Restaurant: see below</p> <p>All staff to wear masks while in public spaces</p>	
	Restaurant Service:		<p>See later section on operating plan for restaurant</p> <p>Potential mitigation:</p>	

	<p>The risks are transmission through breath or transmission from surface to hand to surface between both staff and customers. Staff need to handle plates/glass both for service to customers and to clean away. Staff will serve multiple customers so could transfer between customers</p>		<p>Masks: would limit the breath transmission, however do you want to be serves my someone with a covered face and a guest cannot eat a meal with a face mask on. We have provided booths for customers and staff will maintain distance from customers except when serving and clearing plates which will be done from the end of tables. Mask wearing is compulsory for staff and customers while moving around the building.</p> <p>Gloves: what is the difference between gloves and skin? If gloves are not changed after each service action are they any better than bare skin? Again no clear gov guidance. Our policy is Handwashing between serving any table of customers.</p> <p>Visors: Potentially less obtrusive than masks, but do they limit breath risk as much – Optional for staff</p> <p>Limit service to 1 person behind the bar so that staff are socially distanced (will limit no of covers) visible hand cleaning between each service action</p>	
<p>5.0</p>	<p>Check-In/Check Out Risk Reduction</p>			
	<p>Objective is to reduce loitering contact time at reception and limit surface to surface transfer</p>		<p>Limit no of people at reception desk by having clear floor markings.</p> <p>Check In Process: Remove need to guest to sign registration form Still talk guest through their booking Check guest payment card number and expiry date; guest to read out information not hand over card. Key and fob wiped with antiviral wipe as handed over to guest Guest directed to room NOT shown to room. Guest who wants help with bags, bags to be delivered to room after the guest has gone up the stairs and only when the stairs are free of people</p> <p>Check Out Process Bill (till receipt) to be put in envelope under guest door overnight. Instructions for guest to sign bill (if happy with it) and had key and bill to reception. Guest</p>	

			will not be asked to insert card in card machine and give pin. Guest authorisation is for guest to put through card holder not present transaction. Guests can leave luggage, handles to be anti viral wiped when taken and returned to guest.	
6.0	Breakfast			
	<p>Risks are having too many people in the brasserie at any one time and having too many people in circulation spaces.</p> <p>Risks are surface to surface and body to surface to body transmission</p>		<p>Restaurant Layout adjusted with less tables and screens. Capacity reduced to six tables of 2 or 4 covers, so between 12 and 24 covers</p> <p>Room Service Paid as normal</p> <p>Restaurant Service Tables stripped except something to make them look good (see above) Table Numbers Tables that can be used to be obvious to maintain social distancing Guest pre-book time slot One person serving breakfast</p>	P
7.0	Casual Drinks/Coffee in lounge or room			
	<p>Risk is breath to breath between staff/customer and person-surface-person transfer via cups/glasses etc that are handled by both staff and customers</p>		<p>Order taken from more than 2m away Staff handwash before making up order Drinks made up as normal – ice/lemons etc kept in covered holders and used by cleaned scoop, tongs or single use toothpick Drinks taken on tray and tray deposited adjacent to guests for them to take the drinks from. Ensure guest groups are seated 1m apart Drinks to rooms served on tray left on tray stand outside room</p>	
8.0	Dinner in Restaurant			

	<p>Risk is breath to breath between staff/customer and person-surface-person transfer via cups/glasses etc that are handled by both staff and customers</p>	<p>Limit number of tables to allow social distancing and screens</p> <p>Limit total number of covers and phasing of covers to enable service to be delivered by one table staff and one kitchen staff</p> <p>Limit the number of times a waiter physically visits a table</p> <p>Guest arrival at reception: check booking at reception. Guest directed to coat stand, told where w/cs are and told where their table is. Need icon chart with table numbers visible at restaurant entrance. Guest to self hang coats and self seat at a specified numbered table</p> <p>Tables set</p> <p>Waiter to explain menu and take drinks order. Waiter to confirm covid rules, so table service, no mak while seated, but mask on while moving around or going to w/c</p> <p>Drinks made up as above and served to table</p> <p>Each course served to table All 2 or 4 or 6 customers served at one time.</p> <p>Similarly clearing at the end of each course. The waiter do this.</p> <p>Tables cleaned as per normal once guest has left.</p> <p>Bill paying: still accept card or cash. Bill to guest on platter as normal. Guest to pay by card: card machine taken to guest and wiped in-front of them. Bill pre-entered in machine and guest just put card in and do pin number. Waiter to wear mask and stand back while pin being entered. Card machine wiped after use.</p>	<p>A</p> <p>A</p>
--	---	---	-------------------

			Cash: cannot avoid handling and risk. Staff asked to sanitise/clean hands after each time they handle cash.	
9.0	Dinner in Room			
	See breakfast		See breakfast – essentially the same process and mitigation as breakfast in room.	
10.0	House Keeping			
	Person-Linen/Towelling-Person transfer of virus		Make sure that washing/drying cycle of supplier laundry and our laundry is good enough to eliminate Covid. See prime risks above OK	
	Risk is breath to breath between staff/customer and person-surface-person transfer via cups/glasses etc that are handled by both staff and customers		<p>Limit the circulation of HK staff and customers. Start HK at 10:00 or 11:00 and finish at 15:00. 11-15 is 4hrs</p> <p>Each HK to a floor. Not HK's on same floor or in same room.</p> <p>HK with Mask, eye protectors and gloves optional</p> <p>Clean and or tidy room as normal. However DO NOT use re-usable polishing and wiping cloths. Use single use cloths for all wiping/polishing actions and bin after use or for washable cloths put in wash pile but do not use in separate rooms</p> <p>Use disposable wipes on TV wand and phone wand and all switch plates, and all door handles.</p> <p>Once room is clean, wipe door handles inside and out before leaving room.</p> <p>Wash hands between cleaning rooms</p>	
11.0	Soft Furnishings			
	Risk is virus loaded droplets settling and surviving on soft furnishings and then being wiped hand to mouth by another person.		UK government guidance states that virus may persist on soft furnishings for up to 48hrs. This raises the question of what to do with all soft furnishings. Given chairs are upholstered we cannot reasonably launder all soft furnishings between customer use.	

	<p>Soft furnishings include upholstered furniture, cushions, curtains, rugs, throws</p>		<p>The most high touch items are restaurant chairs, lounge chairs and associated rugs and cushions.</p> <p>Given we cannot reasonably launder these items and given that surface transfer is less risk than airborne transfer and levels of covid are falling our assessment is that we can operate with these items in place.</p> <p>This will be reviewed is covid cases in Edinburgh start to rise or government guidance changes.</p>	
--	---	--	---	--