

# Burton Memorial Hall

## Example COVID-19 Risk Assessment for hirers

This example document can be used as a guide to help you produce your own COVID-19 risk assessment for use of the hall during the COVID-19 period. It is intended as a supplement to your ordinary Risk Assessment. Please contact the Hall Chair on 01524 781306 if you need further help or advice in completing your COVID-19 risk assessment.

Area of Risk	Risk identified	Actions to take to mitigate risk	Notes
<b>Cleanliness of hall and equipment, especially after other hires</b>	Other hirers or hall cleaner have not cleaned hall or equipment used to standard required. Our group leaves hall or equipment without cleaning.	Group to check with hall committee when hall is cleaned and to make sure regularly used surfaces are cleaned before, during and after hire e.g. tables, sinks, door and toilet handles.	Can we bring our own equipment?
<b>Managing Social distancing and especially people attending who may be vulnerable</b>	People do not maintain 2 m social distancing	Advise group they must comply with social distancing as far as possible. Adopt layout advised. Limit numbers using toilets at once. Obtain contacts.	Should we avoid use of kitchen – ask people to BYO food and drink? Allow older people time to use toilets without others present.
<b>Respiratory hygiene</b>	Transmission to other members of group	Catch It, Bin It, Kill It. Encourage group to avoid touching mouth, eyes, and nose. Provide tissues ask all to dispose into a bin or disposable rubbish bag, then wash or sanitise hands.	Remember to bring tissues and hand sanitiser. Remember to empty any bins used into kitchen bin at end of hire.
<b>Hand cleanliness</b>	Transmission to other members of group and premises	Advise group to use sanitiser on entering and exiting the hall, to wash hands regularly using soap and paper towels.	
<b>Someone falls ill with COVID-19 symptoms</b>	Transmission to other members of group and premises	Follow hall instructions. Move person to safe area, inform Hall Management Committee.	

Completed by (Name) ..... For Group ..... Date .....