

Coronavirus Risk Assessment for Thornbury Town Council

Location/Dept: TOWN COUNCIL/MEETING AT THE TOWN HALL	Date Assessed: 19/07/2021	Assessed by: LOUISE POWELL
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Task/Activity: TOWN COUNCIL FACE TO FACE MEETING AT THE TOWN HALL		Reference Number: CV23
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			Risk rating before implementing control measures				Risk rating after implementing control measures			
Activity/Task	Hazard/Risk	Persons at Risk	Likelihood (1-5)	Severity (1-5)	Risk/Priority	Controls Measures in Place	Likelihood (1-5)	Severity (1-5)	Risk/Priority	Additional Control Measures Required

ALL EMPLOYEES AND COUNCILLORS OF THORNBURY TOWN COUNCIL SHOULD WORK WITHIN THE GENERAL THORNBURY TOWN COUNCIL RISK ASSESSMENT

Meeting in the Town Hall	Contact with persons suffering from coronavirus – meetings	Employees Councillors Members of the Public	5	5	25	<p>The Council will look to reduce contact with others by:</p> <ul style="list-style-type: none"> Maintaining social distancing as far as possible; Avoiding transmission during meetings, for example by avoiding sharing pens and other objects; Providing hand sanitiser in the meeting room; Issuing water in pre-poured glasses rather than jugs with touch points; Keeping room well ventilated; Meeting attendees requested to take a COVID test 24 hours before attending the meeting; Face masks requested to be worn as much as possible; Shouting to be avoided; The circulation of paper documents to be kept to a minimum; 	2	5	10	<p>Guidance and recommended risk control measures will be sourced directly from Public Health England/Wales and the GOV.UK website wherever possible.</p> <p>Further guidance and recommended risk control measures/infection prevention and control will be sourced from the National Association of Local Councils (NALC), Society for Local Council Clerks (SLCC), Local Government Association (LGA), and ALCA</p> <p>If necessary, adjust the order of business to allow members of the public to leave should they wish to do so immediately after discussion of their item of interest.</p>
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						<ul style="list-style-type: none"> Request that attendees take a lateral flow test before attending and only attend if negative 				
Meeting in the Town Hall	Travelling to and from meeting	Employees Councillors Members of the Public	5	5	25	<ul style="list-style-type: none"> Attendees, wherever possible travel to and from meeting separately; Where this is not possible members to follow the guidelines for using shared transport (bus, taxi, car sharing etc) 	2	5	10	
Meeting in the Town Hall	Close proximity to other members and the public entering and leaving the meeting and contact with doors	Employees Councillors Members of the Public	5	5	25	<ul style="list-style-type: none"> Hands to be sanitised on arrival; Attendees to enter and leave the meeting in an orderly socially distanced way if possible; Room set out with seats as distanced as possible; Provision of sanitiser to be placed at entrance to room; Request members of the public register attendance before turning up so seats can be socially distanced accordingly 	1	5	5	

Risk/Priority Indicator Key

Likelihood
1. Improbable / very unlikely
2. Unlikely
3. Even chance / may happen
4. Likely

RISK / PRIORITY INDICATOR MATRIX						
LIKELIHOOD	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10

5. Almost certain / imminent

Severity (Consequence)
1. Negligible (delay only)
2. Slight (minor injury / damage / interruption)
3. Moderate (lost time injury, illness, damage, lost business)
4. High (major injury / damage, lost time business interruption, disablement)
5. Very High (fatality / business closure)

	1	1	2	3	4	5
		1	2	3	4	5
		SEVERITY (CONSEQUENCE)				

Summary		Suggested Timeframe
12-25	High	As soon as possible
6-11	Medium	Within the next three to six months
1-5	Low	Whenever viable to do so

Review Record

Date of Review	Confirmed by	Comments
10/12/2021	Louise Powell	Added in request for lateral flow to be taken before attending and for public to register attendance. Risk assessment will be put on website for the meeting

I have read the risk assessment and understand and accept its contents form part of my job role. I will keep myself informed of any changes.

Employee Name (Print)	Employee Signature	Date