



COVID-19 RETURN TO WORK RISK ASSESSMENT

This risk assessment identifies the key issues which must be considered and addressed when preparing the premises for the safe return to work to reduce the risks from COVID-19 to a low level. It must be regularly reviewed and updated as necessary in line with any changing government advice/guidance.

Property Details	
Company Name:	Goldcrest
Property Address:	1 Lexington Street, London W1F 9AF & 65/66 Dean Street, London W1D 4QH
Number of Floors:	5 Floors at Lexington Street property. 4 Floors at Dean Street Property
Description of Workplace/Activities taking place:	Goldcrest is a post production company. It has post production facilities and offices in the two buildings named above. Both buildings are fully owned and managed by Goldcrest. The facilities/services which are hired out to clients include dubbing theatres, ADR recording, sounds design and editing suites, offline editorial suites, data extraction, film recording and scanning, online editing, 4K and 2K grading. Goldcrest Staff work in the various technical areas, and there is also a general office area in the Lexington Street property.
Maximum number of occupants:	The number of people required to return to the workplace in the first few months of a return to work will be greatly reduced from the usual number of staff. The majority of staff will continue to work from home where this is possible.
Person responsible for implementing the controls in this risk assessment:	Patrick Malone (Managing Director)
Person completing this Risk Assessment & Date of completion:	Anne Shanley (First Option Safety Consultant) 28th May 2020

Background/Notes:

The Virus

Covid 19 is a new virus which causes flu-like illness sometimes leading to serious respiratory failure particularly in the elderly or those with underlying health conditions. The main symptoms are a new continuous cough, a high temperature and a loss of or change in your normal sense of taste/smell. The virus is spread primarily in droplets coughed or sneezed from infected individuals which can be inhaled by others in close proximity (less than 2m) or which fall onto surfaces where the virus can be picked up on the hands and infect the individual when they touch their face. Individuals can be infectious before they experience any symptoms (between 3 and 5 days).

UK Government Advice

Latest UK government advice/guidance which was released on 11th May 2020 and so far only applies in England is: **Stay Alert – Control the Virus – Save Lives.** In England, anyone who cannot work from home is now encouraged to return to work (if safe to do so), avoiding the use of public transport to get there wherever possible. To help employers ensure workplaces are as safe as possible so that workers can return to work, the government have published 8 guides which cover a range of different types of work, including offices. The office guide can be found here: <https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19/offices-and-contact-centres>. All workplaces must have a Covid-19 specific risk assessment in place before workers return to work.

The key considerations when reducing the risks are:

DISTANCING - Wherever possible physical separation of at least 2m should be maintained during all work activities. Work should be planned to maintain this distance as the norm. If a 2m separation cannot be achieved, you should consider whether the activity should continue. Ways to help achieve this include working remotely, reducing the number of people at work to an absolute minimum, redesigning workspaces/ways of working.

HEALTH MONITORING – Strict controls will need to be in place to help ensure that no one who has the virus or symptoms of the virus is at work.

HYGIENE – Enhanced hygiene procedures will need to be in place. Handwashing facilities – soap and water where possible, or if not possible, antiseptic hand gel dispensers (minimum 60% alcohol based) to be made readily available.

CLEANING – Enhanced cleaning/disinfecting procedures will need to be in place - this will include cleaning of buildings, equipment, frequently used touch points

Hazards Identified and Risks Arising <i>Identify and list what hazards could cause <u>significant</u> harm, how and to whom. This includes <u>anybody</u> who may be present and affected by your activity, not only your team (e.g. other workers, public, drivers, children, elderly, disabled and those who may be more vulnerable to certain hazards)</i>		Risk Assessment & Precautions Required <i>Evaluate the risks and decide if existing precautions/controls are sufficient or more needs to be done. Take into account information from all available authoritative sources</i>
Hazard:	To Whom:	
<p>People with the virus or who are in the “shielded” or vulnerable categories being in the workplace</p> <p>Person to person transmission</p> <p>Contaminated surfaces/ equipment</p>	<p>Staff Clients Contractors Visitors</p>	<p>Before returning to work in the building, all staff should be asked to complete a written declaration stating:</p> <ul style="list-style-type: none"> • that they are not suffering from any coronavirus symptoms and have not had any symptoms within the previous 7 days • they have not (as far as they are aware) been in contact with anyone with coronavirus symptoms within the previous 14 days • that they are not ‘shielded’ or have any underlying health condition which might make them particularly vulnerable to coronavirus • that they undertake to declare immediately any onset of symptoms or contact with anyone who has symptoms of coronavirus. • Anyone developing symptoms while at work should be sent home (by private transport) and told to seek medical advice from the NHS. <ul style="list-style-type: none"> • All clients using the facilities should be asked what procedures they have in place to ensure talent/crew are not working with any symptoms. If none in place, then the above declaration should also be obtained from all clients. • Same arrangements as above for any contractors working the building • Visitors to the premises should be avoided where possible. If essential they should be asked the above questions before being allowed entry.

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Hazard:	To Whom:	
<p>General Work Activities</p> <p>Person to person transmission</p> <p>Contaminated surfaces/ equipment</p>	<p>Staff Clients Contractors Visitors</p>	<ul style="list-style-type: none"> • Only minimal staff to return to the workplace. Wherever possible work activities should be continued to be carried out at home. A revision of staffing levels will be undertaken and monitored. • Where possible start/end and break times to be staggered and working alternate hours to minimise occupancy and thus exposure limits. • Client use of facilities is all pre-booked appointments – so no waiting around in reception areas. Clients will be shown to their facilities by a host keeping a 2m distance in place. • Where possible, fixed teams to be established so that each person only works with a few others. • The ongoing observance of social distancing guidance to apply. There must be at least a 2m distance between workers wherever possible. Desk formations to be redesigned to help achieve this: <ul style="list-style-type: none"> ○ Desks in the main office area/MD's office to be taken out of action or repositioned so that a 2m distance is achieved between workers. Desks will not involve having to work face-face. Workers will be positioned side by side or back to back. ○ The boardroom will have a maximum occupancy of 2 people at one time (Signage in place to inform everyone of this) ○ All other technical areas will have a reduced capacity in place – the majority of edit suites, online/grading suites etc will have a maximum limit of 2 people at a time. The bigger theatres etc will be able to take up to 4 or 5 people. All maximum limits will be clearly signed on the entrance to each room.

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Hazard:	To Whom:	
		<ul style="list-style-type: none"> • Where a 2m distance is not possible but task/activity is considered essential then the following should be considered: <ul style="list-style-type: none"> ○ Physical barriers such as Perspex screens used to separate workstations. ○ People in close proximity should work side by side or back to back rather than facing each other i.e. staggered. ○ Minimise the number of people involved at any one time, for the shortest period of time. • The ADR studios have been specially adapted to allow for safe covid-19 working procedures – a separate written procedure is in place and is given out to all clients using the ADR facilities – in summary the artist is isolated from the sound mixer in a separate studio and communication is through the mics. The mixer initiates a Skype/Zoom/Source Connect call with everyone who needs to be involved - Director, dialogue editor, dialect coach, etc. In the studio, all surfaces and equipment used are cleaned with alcohol wipes or similar after an artist has completed their work. This includes the lectern, tables, the air conditioning controls, door handles and hand rails, microphones, microphone stands/attachments, headphones etc. • Where necessary some workstations will be rendered restricted - equipment removed, or clear signage/hazard tape installed to inform a possible user that the workstation is not to be used • All workspaces to be cleaned/disinfected at regular intervals.

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Hazard:	To Whom:	
		<ul style="list-style-type: none"> • At the end of each shift all equipment panels/switches must be cleaned by the user before they leave. When you enter the areas to start your shift you must also clean all areas (Cleaning equipment such as alcohol wipes will be made available for this). • Any touch screen devices must be wiped clean after use. • Where possible, doors which are frequently used will be held open to reduce the amount of times people have to touch them. All doors must be closed at the end of each day. • Where necessary, floor markings to be installed to denote stand/ wait positions • Where necessary a one way system to be implemented and signed. Barriers can be installed to assist with this. Care must be taken not to block or impede fire routes. Clear signage should be in place to help inform and direct staff. • All lifts will be limited to one person at a time use only – this will be clearly signed on the outside of all lifts. • Handwashing facilities should be provided with soap and water wherever possible. Where this is not possible antiseptic gel dispensers (minimum 60% alcohol based) should be provided in each work areas. Automatic gel dispensers have been installed at all entry and exit points. • Protocol to be in place for managing a situation where someone who is or has been onsite is showing symptoms of covid-19.

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Hazard:	To Whom:	
<p>Meetings Person to person transmission Contaminated surfaces/ equipment</p>	<p>Staff Clients Contractors Visitors</p>	<ul style="list-style-type: none"> • Wherever possible meetings, should be carried out remotely using video conferencing platforms such as Teams, Zoom, skype or similar. • Where this is not possible a 2m distance must be in place between all people present.
<p>Kitchen/Food Areas Person to person transmission Contaminated surfaces/ equipment</p>	<p>Staff Clients Contractors Visitors</p>	<ul style="list-style-type: none"> • All food brought onsite should be in a sealed container or individually wrapped. • Food should not be shared or left out for communal access. • Kitchen areas to operate one in and one out when making drinks/food – this will be clearly signed outside each kitchen area. • Regular cleaning of kitchen areas to be in place. Anyone using any kitchen equipment must wipe it clean with an alcohol wipe or similar immediately after use before anyone else uses it. (Wipes to be made available in all kitchen areas). • Clear signage to be installed in kitchen areas to help inform and direct staff. • Staff encouraged to bring own cutlery/mugs etc or use disposables. Any communal cutlery/mugs etc to be placed in the dishwasher (rather than hand washed). Care should be taken to load dishwasher, ensuring to wash hands after placing items in the dishwasher.

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Hazard:	To Whom:	
<p>Poor Hygiene procedures</p> <p>Person to person transmission</p> <p>Contaminated surfaces/equipment transmission</p>	<p>Staff Clients Contractors Visitors</p>	<ul style="list-style-type: none"> • Handwashing facilities should be provided wherever possible with soap, water and paper hand towels. Where handwashing facilities are not immediately available antiseptic gels dispensers (minimum 60% alcohol based) should be provided in all work areas. Automatic gel dispensers have been installed at all entry and exit points. • Everyone must wash or sanitise their hands when they arrive at work and regularly throughout the day when they handle any shared equipment or frequently used objects/surfaces; after using the toilet, before eating, before touching your face. • Information posters on how to maintain proper hand hygiene will be displayed on site. • Staff reminded to catch coughs and sneezes in tissues – follow “Catch it, Bin it, Kill it” • Adequate numbers of suitable, clean toilets with handwashing facilities are provided. Notices to be displayed on toilet entry doors to check if anyone is there before entering – should be a 1 in/1out process. Everyone must follow good hygiene procedures – wash hands before and after. Alcohol wipes or similar to be placed in the toilet areas if people also wish to wipe down all surfaces before using. • If showers are used, the person using them must clean down all surfaces touched after use before anyone else uses them (cleaning materials will be provided). Wet towels must not be left in the showers – all personal items to be placed in personal bags or lockers and taken home at the end of shift.

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Hazard:	To Whom:	
<p>Poor Cleaning Regimes</p> <p>Contaminated surfaces/equipment transmission</p>	<p>Staff Clients Contractors Visitors</p>	<ul style="list-style-type: none"> • Enhanced cleaning procedures are in place – all areas are cleaned once a day by the cleaning team. • All routine touch points are regularly cleaned/disinfected. • All areas to kept well ventilated. Open windows where possible. • Air conditioning system is regularly maintained and serviced in line with the manufacturers guidelines. • Closed bins which are regularly emptied are provided. Everyone must dispose of waste immediately and not leave it around the workplace. • Everyone must remove their personal belongings at the end of each shift – either take home or store in a locked cabinet/storage cupboard • All equipment should be wiped down with alcohol wipes regularly and whenever it is used by different individuals. • Any shared areas must be wiped down when one person has finished there before another person starts. • Any hired equipment brought in must be disinfected on arrival.
<p>Lack of PPE or misuse of PPE</p> <p>Person to person transmission</p> <p>Contaminated surfaces/equipment transmission</p>	<p>Staff</p>	<ul style="list-style-type: none"> • While at work it is critical to emphasise that maintaining the 2m social distancing, enhanced hygiene and cleaning procedures, minimising time spent in close contact etc are the best and the main control measures to help reduce the risks of catching and spreading the virus in the workplace. PPE and face coverings should only be considered as a last resort when all other control measures are not possible to maintain. PPE should be provided where the risk assessment shows it is necessary – it may be necessary for certain activities where it is not possible to maintain social distancing or where

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Hazard:	To Whom:	
		<p>equipment has to be handled as it is not possible to sanitise and handwashing/sanitising isn't readily available. Face masks and gloves are provided for any staff who are required to wear them for certain tasks. PPE is not provided for any clients/contractors or visitors – there should not be a need for clients/contractors/visitors to wear any PPE as suitable controls (as outlined in this RA) are already in place.</p> <ul style="list-style-type: none"> • If face masks are worn, they should ideally be of the FFP2/3 type which afford some protection against inhaled infection (particularly if properly fitted and tested). However, these are in short supply and rightly prioritised for health workers. If FFP type masks are not available, surgical masks provide some protection against asymptomatic spread by the wearer. • Anyone using a face mask or covering should be given information on how to use it and dispose of it safely. The WHO has a useful guide: https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/when-and-how-to-use-masks. The main points are: <ul style="list-style-type: none"> ○ Before putting on a mask, clean hands with soap and water or alcohol based hand wash. ○ Cover mouth and nose with mask and make sure there are no gaps between your face and the mask. ○ Avoid touching the mask while using it – if you do you must clean your hands immediately. ○ Replace the mask as soon as it is damp and do not re-use single use masks. ○ To remove the mask, remove it from behind – do not touch the front of mask – discard immediately by double bagging it and placing in a closed bin. If a face covering is being used and is washable, - wash in line with manufacturer's instructions. Clean hands immediately.

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Hazard:	To Whom:	
		<ul style="list-style-type: none"> Disposable gloves may be useful for situations where hand washing or sanitizing is not readily available or possible. However, gloves are only a 'second skin' and therefore wearers need to continue to apply hygiene precautions (not touching the face) and they should be hygienically disposed of and a new pair used as frequently as possible.
<p>Mental health</p> <p><i>Infectious disease outbreaks like coronavirus (COVID-19), can be worrying. This can affect mental health. Individuals may notice:</i></p> <ul style="list-style-type: none"> increased anxiety feeling stressed finding yourself excessively checking for symptoms, in yourself, or others becoming irritable more easily 	Staff	<p>Be aware of yours and others anxiety and concerns during these challenging times. Be aware of and apply the following strategies where possible:</p> <ul style="list-style-type: none"> If you are taking any prescription medications, make sure you have enough and readily accessible. Keeping a realistic perspective of the situation based on facts is important. Stay informed but set limits for news and social media. Use trustworthy and reliable sources to get your news. Read up-to-date, factual information Keep up your healthy routines including exercise, Ensure you get a good night's sleep Keep hydrated Keep a balanced diet, Avoid excess alcohol, Use relaxation techniques, Improve your mood by doing something creative, Stay connected to others

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Hazard:	To Whom:	
<ul style="list-style-type: none"> • <i>feeling insecure or unsettled</i> • <i>fearing that normal aches and pains might be the virus</i> • <i>having trouble sleeping</i> • <i>feeling helpless or a lack of control</i> • <i>having irrational thoughts</i> 		<ul style="list-style-type: none"> • Try to anticipate distress, seek support and support each other <p>For further advice go to: https://www.gov.uk/government/publications/COVID-19-guidance-for-the-public-on-mental-health-and-wellbeing/guidance-for-the-public-on-the-mental-health-and-wellbeing-aspects-of-coronavirus-COVID-19</p>
<p>Travel to and from the workplace from home</p> <p>Person to person transmission</p> <p>Contaminated surfaces</p>	Staff	<ul style="list-style-type: none"> • Wherever possible public transport should be avoided. • Travel to and from work should where possible be done alone by private transport, cycling or walking. • If private transport is not available then privately hired transport such as taxis should be considered, maintaining social distancing and good hygiene practices as far as possible. The transport company's hygiene/cleaning protocols should be checked. • If public transport can not be avoided, then where possible maintain social distancing, good hygiene practices, and keep the time in close proximity to others to a minimum. Consider wearing a face covering. Avoid peak times where possible.

Emergency Arrangements e.g. Fire, First Aid

Fire

Fire arrangements remain unchanged, refer to the Fire Evacuation arrangements for the building which are displayed at each call point/fire exit. During an emergency such as a fire alarm people may temporarily breach the 2-metre distance guideline.

As staff on site will be reduced, checks to be made to ensure there are an adequate number of fire wardens still in place, as the fire wardens could be working from home. There should be at least 1 fire warden per floor.

First Aid

Check how many first aiders are currently on site. Ideally there should be at least 1 first aider per 50 people. The minimum requirement is an appointed person to take charge of first aid arrangements.

Resuscitation Council UK Statement on COVID-19 in relation to CPR and resuscitation in first aid and community settings:

Whenever CPR is carried out, particularly on an unknown victim, there is some risk of cross infection, associated particularly with giving rescue breaths. Normally, this risk is very small and is set against the inevitability that a person in cardiac arrest will die if no assistance is given. The first things to do are shout for help and dial 999. Because of the heightened awareness of the possibility that the victim may have COVID-19, Resuscitation Council UK offers this advice:

- Recognise cardiac arrest by looking for the absence of signs of life and the absence of normal breathing. Do not listen or feel for breathing by placing your ear and cheek close to the patient's mouth. If you are in any doubt about confirming cardiac arrest, the default position is to start chest compressions until help arrives.
- Make sure an ambulance is on its way. If COVID 19 is suspected, tell them when you call 999.
- If there is a perceived risk of infection, rescuers should attempt compression only CPR and early defibrillation until the ambulance (or advanced care team) arrives. Put hands together in the middle of the chest and push hard and fast.
- Early use of a defibrillator significantly increases the person's chances of survival and does not increase risk of infection.
- If the rescuer has access to personal protective equipment (PPE) (e.g. FFP3 face mask, disposable gloves, eye protection), these should be worn.
- After performing compression-only CPR, all rescuers should wash their hands thoroughly with soap and water; alcohol-based hand gel is a convenient alternative. They should also seek advice from the NHS 111 coronavirus advice service or medical adviser. Further information, including an instructional video, can be found at <https://www.resus.org.uk/media/statements/resuscitation-council-uk-statements-on-covid-19-coronavirus-cpr-and-resuscitation/covid-community/>

Detail how this risk assessment will be communicated to all relevant parties:

- This risk assessment will be emailed to all staff who will be coming into the workplace
- A copy will be posted on the company website and employees directed where to find it
- A copy will also be displayed in the office.
- Copies will be given to clients when requested.
- Below is a link to the government guidance notice that you should display in your workplace to show you have followed the government guidance:

[Staying COVID-19 Secure in 2020](#)

Sign Off by Person Responsible for Health & Safety on site:

Name:

Role:

Signature:

Overall Risk Level when all controls are in place and fully implemented: *(Please Tick)* ✓

LOW -



MEDIUM -

HIGH -