

RISK ASSESSMENT MANUALS

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Task Risk Assessment

Mop Sweeping

Task: Mop Sweeping	Date: October 2020
Type of Assessment: Generic	
Employee group subject of risk assessment - Cleaning Staff	
<p>Describe briefly the work activity subject to risk assessment</p> <p>Mop sweeping is specifically concerned with dust control. The task is carried out on a variety of areas and involves the collection of waste material from hard floor surfaces. Occasionally, debris (e.g. chewing gum) has to be scraped from surfaces. Rubbish and dust is collected and disposed of into rubbish bags using a dust pan and brush.</p>	
1 LOOK FOR THE HAZARDS	
<p>List any hazards likely to affect health and safety:</p> <ol style="list-style-type: none"> 1. Warning signs not properly displayed resulting in slip/trip/fall hazard. 2. Incorrect use of scraper resulting in cut/bruising to hands. 3. Inadequate ventilation where required. 4. Dust clouds if task carried out incorrectly. 5. Manual handling hazard if sweeper used incorrectly or refuse sack over-filled. 	
2 DECIDE WHO MIGHT BE HARMED AND HOW	
<p>List groups of people at risk from the identified hazards:</p> <ol style="list-style-type: none"> 1. Cleaning Staff 2. All building users 	
3 EVALUATE THE RISKS	
<p>List the precautions already being taken:</p> <ol style="list-style-type: none"> 1. Staff adequately trained to carry out the task (including manual handling issues) using Cleaning's Induction & Training Manual 2. Correct use of warning signs. 3. Staff trained to ventilate area if required. 4. Manual handling poster on display in unit detailing the correct manual handling technique. 5. Safety issues audited by Management Team on a regular basis. 6. Training effectiveness audited by Management Team on a regular basis. 	
Are the precautions adequate to reduce the risks to an acceptable level? (Yes)	✓

Task Risk Assessment Prompt Sheet

List the risks that are not being adequately controlled

1. None

List the further actions to be introduced to further reduce the risks

(Note: Also record who will be responsible for doing this and the planned completion date)

1. Specific risk assessments carried out on individual employees, including pregnant/nursing mothers, young people, etc.

Overall Assessment of Risk: Low

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager

Name 2: [REDACTED] – South West Team Leader

Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Last Reviewed

Task Risk Assessment Prompt Sheet

		Please mark appropriate column		
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance		YES	NO	NA
1 WORKPLACE				
1. Does the activity introduce hazards into the workplace?		✓		
WORK EQUIPMENT				
1. Does the work activity involve work equipment? <i>If yes, then refer to the guidance on Work Equipment and continue below. If no, then go on to the next section (Manual Handling)</i>		✓		
2. What is the equipment? mop sweeper, dust pan and brush, scraper				
3. Has an assessment of the work equipment been carried out? <i>Refer to the guidance on Work Equipment</i>		✓		
4. Does the work equipment generate noise levels so high that a person cannot be heard from a distance of approximately 2 metres without raising their voice? <i>If yes, then refer to guidance on Noise Assessment. If no, continue below.</i>			✓	
5. Is the equipment electrical? <i>If yes, refer to guidance on Work Equipment, if no continue below</i>			✓	
MANUAL HANDLING				
1. Does the work activity involve moving or handling objects? <i>If yes continue below. If no, then go on to the next section (People)</i>		✓		
2. Can these operations be carried out in such a way as to avoid hazardous handling? <i>If no, then refer to guidance on Manual Handling</i>		✓		
PEOPLE				
1. Does the activity hazard employees with a pre-existing health problem that affects their capabilities or affects the work activity?			✓	
2. Is there a risk to female employees of childbearing age?			✓	
3. Is the work activity suited to the range of capabilities of all employees involved?		✓		
4. Where necessary, have employees received relevant training?		✓		
5. Is there a potential for violence or aggression towards employees			✓	

Task Risk Assessment Prompt Sheet

PERSONAL PROTECTIVE EQUIPMENT (PPE)			
Do the employees involved in this activity need to use PPE? <i>If yes, refer to guidance on PPE. If no, go to the next section (Hazardous Substances)</i>		✓	
HAZARDOUS SUBSTANCES			
	YES	NO	NA
Does the activity involve hazardous substances, (e.g. cleaning products Wood, dust, bodily fluids)? <i>If yes, continue below. If no, go to the next section (Fire)</i>		✓	
Is the hazardous substance a chemical product? <i>If yes, then refer to guidance on the Control of Substances Hazardous to Health, if no continue below.</i>			✓
Is there likely to be contact with blood, faeces or other bodily fluids?		✓	
Is the correct personal protective equipment provided to minimise risk?			✓

Manual Handling Assessment For Mop Sweeping

Task Mop Sweeping	Date October 2020		
Type of Assessment: Generic			
List names of employee's subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 TASK			
Does the task involve:			
1. Lifting/lowering?	✓		
2. Pushing/pulling?	✓		
3. Stooping?	✓		
4. Holding load away from body?		✓	
5. Reaching upwards?		✓	
6. Long carrying distances?		✓	
7. Large vertical movements?		✓	
8. Unpredictable movement of loads?		✓	
9. Repetitive handling?		✓	
10. Insufficient rest or recovery?		✓	
11. A work rate imposed by a process?		✓	
2 INDIVIDUAL			
Does the task:			
1. Require unusual capability?		✓	
2. Require special skills?		✓	
3. Hazard those with a health problem (e.g. back pain, hernia, etc)?		✓	
4. Require specific or protective clothing? (e.g. is clothing restrictive?)		✓	
5. Require special information/training?	✓		

Please mark appropriate column		
Yes	No	N/A

3 LOAD		Yes	No	N/A
Is the load:				
1. Heavy? What weight is it? kg			✓	
2. Bulky/unwieldy?			✓	
3. Difficult to grasp?			✓	
4. Unstable/unpredictable?			✓	
5. Weight unevenly distributed?			✓	
6. Intrinsically harmful? (e.g. sharp/hot)			✓	

List here any actions or points raised in regard to this assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Work Equipment Assessment for Mop Sweeping

Task Mop Sweeping	Date October 2020
Type of Assessment: Generic	
Equipment used: mop sweeper, dust pan and brush, scraper	

Please mark appropriate column

note: Please do not mark the Not Applicable (N/A) box if you are unsure correct response.
Please leave blank and seek further guidance

1. STATUTORY REGULATIONS AND ARRANGEMENTS	YES	NO	N/A
1. Have applicable regulations and statutory requirements and standards been identified?	✓		
2. Are formal arrangements in place to meet the requirements of these regulations and standards?	✓		

2. SELECTION OF WORK EQUIPMENT	YES	NO	N/A
1. Is there a nominated person to ensure that appropriate work equipment is: a) Specified; and b) Purchased	✓ ✓		
2. Where applicable is the work equipment specified within established systems of work?	✓		
3. Where appropriate are checks made to ensure that the work equipment is fit for the purpose?	✓		
4. Are specific risks to the health and safety of any person associated with the work equipment identified?		✓	

3. MAINTENANCE	Yes	No	N/A
1. Are appropriate arrangements in place for monitoring the safety of work equipment?	✓		
2. Are appropriate arrangements in place for safe maintenance of work equipment?			✓
3. Are appropriate arrangements in place for the safe repair of work equipment?			✓
4. Are records kept of failures, especially of safety devices, their possible causes and remedial work conducted?			✓
5. If the machinery has a maintenance log, is the log kept up to date?			✓

4. OPERATION OF WORK EQUIPMENT	Yes	No	N/A
1. Are appropriate arrangements in place to ensure work equipment is safe for use in the intended working environment?	✓		

5. WORK EQUIPMENT WITH SPECIFIC RISKS	Yes	No	N/A
1. Where work equipment is identified as having associated specific risks, is the use of such equipment restricted to specifically authorised persons? (e.g. age, qualifications)			✓
2. Is all repair, maintenance, modification and servicing of work equipment with specific risks conducted by competent persons specifically trained to perform such work?			✓

6. INFORMATION AND INSTRUCTION	Yes	No	N/A
1. Have all users and supervisors been provided with adequate written information and instruction on: <ul style="list-style-type: none"> a) the conditions and methods with which the work equipment may be used? b) foreseeable abnormal situations and the action to be taken if such situations occur? c) any conclusions to be drawn from experience in using the work equipment? 	 ✓ ✓ ✓		
2. Have all users and supervisors been provided with adequate training in the above requirements?	✓		
3. Has their understanding of the information, instruction and training been assessed?	✓		

List here any actions or points raised in regard to the assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Task Risk Assessment Single Solution Mopping

Task Single Solution Mopping	Date October 2020
Type of Assessment: Generic	
Employee group subject of risk assessment - Cleaning Staff	
<p>Describe briefly the work activity subject to risk assessment: Single solution mopping involves the use of cleaning chemicals, applied with a mop to hard floor surfaces. The types of mops and buckets can include flat mopping systems, gear press mopping systems, roller mopping systems and dolly mopping systems. The cleaning agent used must be diluted in water and the bucket must be moved and emptied. The mops are wrung out using the wringer/press attached to the bucket.</p>	
1. LOOK FOR THE HAZARDS	
<p>List any hazards likely to affect health and safety:</p> <ol style="list-style-type: none"> 1. Warning signs not properly displayed resulting in slip/trip/fall hazard. 2. Inadequate ventilation where required. 3. Manual handling hazard if mop and bucket used, transported, lifted/emptied incorrectly. 4. Chemical splashes through improper use of chemical. 5. Cross contamination through failure to observe colour coding rules. 	
2. DECIDE WHO MIGHT BE HARMED AND HOW	
<p>List groups of people at risk from the identified hazards:</p> <ol style="list-style-type: none"> 1. Cleaning Staff 2. All building users 	
3. EVALUATE THE RISKS	
<p>List the precautions already being taken:</p> <ol style="list-style-type: none"> 1. Staff adequately trained to carry out the task (including manual handling issues and colour coding system) using Cleaning's Induction & Training Manual. 2. Correct use of warning signs. 3. PPE supplied, including goggles when decanting chemicals and gloves when hands come into contact with cleaning solution (e.g when cleaning mop and bucket). 4. Chemical wall chart on display in unit detailing the correct use of chemicals. 5. Manual handling poster on display in unit detailing the correct manual handling technique. 6. Staff trained to avoid over-filling buckets and trained to add chemical to water. 7. Staff trained to ventilate area if required. 8. Safety issues audited by Management Team on a regular basis. 9. Training effectiveness audited by Management Team on a regular basis. 	
Are the precautions adequate to reduce the risks to an acceptable level? (Yes)	✓

List the risks that are not being adequately controlled
1. None

List the further actions to be introduced to further reduce the risks
(Note: Also record who will be responsible for doing this and the planned completion date)
1. Specific risk assessments carried out on individual employees, including pregnant/nursing mothers, young people, etc.

Overall Assessment of Risk: Low

Assessment completed by: Name 1: [redacted] – South West Locality Manager Name 2: [redacted] – South West Team Leader Name 3: [redacted] – South West Team Leader	Date: October 2020

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance			
1. WORKPLACE	YES	NO	N/A
1. Does the activity introduce hazards into the workplace?	✓		
2. WORK EQUIPMENT	YES	NO	N/A
1. Does the work activity involve work equipment? <i>If yes, then refer to the guidance on Work Equipment and continue below If no, then go on to the next section (Manual Handling)</i>	✓		
2. What is the equipment? Mop and mop bucket			
3. Has an assessment of the work equipment been carried out? <i>Refer to the guidance on Work Equipment</i>	✓		
4. Does the work equipment generate noise levels so high that a person cannot be heard from a distance of approximately 2 metres without raising their voice? <i>If yes, then refer to guidance on Noise Assessment. If no, continue below.</i>		✓	
5. Is the equipment electrical? <i>If yes, refer to guidance on Work Equipment, if no continue below</i>		✓	
3. MANUAL HANDLING	YES	NO	N/A
1. Does the work activity involve moving or handling objects? <i>If yes continue below. If no, then go on to the next section (People)</i>	✓		
2. Can these operations be carried out in such a way as to avoid hazardous handling? <i>If no, then refer to guidance on Manual Handling</i>	✓		
4. PEOPLE	YES	NO	N/A
1. Does the activity hazard employees with a pre-existing health problem that affects their capabilities or affects the work activity?		✓	
2. Is there a risk to female employees of childbearing age?		✓	
3. Is the work activity suited to the range of capabilities of all employees involved?	✓		
4. Where necessary, have employees received relevant training?	✓		
5. Is there a potential for violence or aggression towards employees		✓	
5. PERSONAL PROTECTIVE EQUIPMENT (PPE)	YES	NO	N/A
1. Do the employees involved in this activity need to use PPE? <i>If yes, refer to guidance on PPE. If no, go to the next section (Hazardous Substances)</i>	✓		

6. HAZARDOUS SUBSTANCES	YES	NO	NA
1. Does the activity involve hazardous substances? (e.g. cleaning products, wood, dust, bodily fluids)? <i>If yes, continue below.</i> <i>If no, go to the next section (Fire)</i>	✓		
2. Is the hazardous substance a chemical product? <i>If yes, then refer to guidance on the Control of Substances Hazardous to Health,</i> <i>If no continue below.</i>	✓		
3. Is there likely to be contact with blood, faeces or other bodily fluids?		✓	
4. Is the correct personal protective equipment provided to minimise risk?	✓		

Manual Handling Assessment For Single Solution Mopping

Task Single Solution Mopping	Date October 2020		
Type of Assessment: Generic			
List names of employee's subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1. TASK			
Does the task involve:			
1. Lifting/lowering?	✓		
2. Pushing/pulling?	✓		
3. Stooping?	✓		
4. Holding load away from body?		✓	
5. Reaching upwards?		✓	
6. Long carrying distances?		✓	
7. Large vertical movements?		✓	
8. Unpredictable movement of loads?		✓	
9. Repetitive handling?		✓	
10. Insufficient rest or recovery?		✓	
11. A work rate imposed by a process?		✓	
2. INDIVIDUAL			
Does the task:			
1. Require unusual capability?		✓	
2. Require special skills?		✓	
3. Hazard those with a health problem (e.g. back pain, hernia, etc)?		✓	
4. Require specific or protective clothing? (e.g. is clothing restrictive?)		✓	
5. Require special information/training?	✓		

Please mark appropriate column

	Yes	No	N/A
3. LOAD			
Is the load:			
1. Heavy? What weight is it? kg		✓	
2. Bulky/unwieldy?		✓	
3. Difficult to grasp?		✓	
4. Unstable/unpredictable?		✓	
5. Weight unevenly distributed?		✓	
6. Inherently harmful? (e.g. sharp/hot)		✓	

List here any actions or points raised in regard to this assessment:

Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ██████████ – South West Team Leader	Date: October 2020

Work Equipment Assessment for Single Solution Mopping

Task Single Solution Mopping	Date: October 2020
Type of Assessment: Generic	
Equipment used: Mop and Mop Bucket	

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1. STATUTORY REGULATIONS AND ARRANGEMENTS			
1. Have applicable regulations and statutory requirements and standards been identified?	✓		
2. Are formal arrangements in place to meet the requirements of these regulations and standards?	✓		

2. SELECTION OF WORK EQUIPMENT			
1. Is there a nominated person to ensure that appropriate work equipment is: a) Specified b) Purchased	✓ ✓		
2. Where applicable is the work equipment specified within established systems of work?	✓		
3. Where appropriate are checks made to ensure that the work equipment is fit for the purpose?	✓		
4. Are specific risks to the health and safety of any person associated with the work equipment identified?		✓	

3. MAINTENANCE			
1. Are appropriate arrangements in place for monitoring the safety of work equipment?	✓		
2. Are appropriate arrangements in place for safe maintenance of work equipment?			✓
3. Are appropriate arrangements in place for the safe repair of work equipment?			✓
4. Are records kept of failures, especially of safety devices, their possible causes and remedial work conducted?			✓
5. If the machinery has a maintenance log, is the log kept up to date?			✓

4. OPERATION OF WORK EQUIPMENT	Yes	No	N/A
1. Are appropriate arrangements in place to ensure work equipment is safe for use in the intended working environment?	✓		

5. WORK EQUIPMENT WITH SPECIFIC RISKS	Yes	No	N/A
1. Where work equipment is identified as having associated specific risks, is the use of such equipment restricted to specifically authorised persons? (e.g. age, qualifications)			✓
2. Is all repair, maintenance, modification and servicing of work equipment with specific risks conducted by competent persons specifically trained to perform such work?			✓

6. INFORMATION AND INSTRUCTION	Yes	No	N/A
1. Have all users and supervisors been provided with adequate written information and instruction on:	✓		
a) The conditions and methods with which the work equipment may be used?	✓		
b) Foreseeable abnormal situations and the action to be taken if such situations occur?	✓		
c) Any conclusions to be drawn from experience in using the work equipment?	✓		
2. Have all users and supervisors been provided with adequate training in the above requirements?	✓		
3. Has their understanding of the information, instruction and training been assessed?	✓		

List here any actions or points raised in regard to the assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Personal Protective Equipment For Single Solution Mopping

Task Single Solution Mopping	Date October 2020		
Type of Assessment: Generic			
List names of employees subject to this risk assessment - Cleaning Staff			
			Please mark appropriate column
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 ACTIVITY			
1. Has a general risk assessment been carried out for this activity?	✓		
2. Have assessments for any other legislation been carried out for this activity?	✓		
3. Have all identified control measures been applied?	✓		
4. Have the areas of the body that require protection been identified? If YES, list parts of body to be protected: eyes, hands	✓		

2 PERSONAL PROTECTIVE EQUIPMENT			
1. Has suitable PPE been identified and purchased?	✓		
2. Have individuals been supplied with PPE where required?	✓		
3. Have individuals received information and instruction on the use of the PPE?	✓		
4. Is the PPE being worn where necessary?	✓		
5. Are there any signs and notices to mark PPE zones?	✓		
6. Are regular checks made to ensure that PPE is worn where required?	✓		
7. Are additional supplies of PPE available?	✓		
8. Do employees know how to obtain replacement PPE?	✓		
9. Is all the PPE supplied free of charge?	✓		

List here any actions or points raised in regard to this assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Task Risk Assessment for Buffing

Task Buffing	Date: October 2020
Type of Assessment: Generic	
Employee group subject of risk assessment - Cleaning Staff	
Describe briefly the work activity subject to risk assessment Buffing is carried out using a rotary polishing machine. This requires the machine to be taken from the storage area to a place of use. A variety of brushes and discs must be attached to the machine which is taken over the floor in a sweeping side to side motion.	
1. LOOK FOR THE HAZARDS	
List any hazards likely to affect health and safety: <ol style="list-style-type: none"> 1. Warning signs not properly displayed resulting in slip/trip/fall hazard. 2. Trailing cables resulting in slip/trip/fall hazard. 3. Manual handling hazard (sprain/strain) when using and manoeuvring equipment. 4. Electric hazard through inappropriate use of power supply. 	
2. DECIDE WHO MIGHT BE HARMED AND HOW	
List groups of people at risk from the identified hazards: <ol style="list-style-type: none"> 1. Cleaning Staff 2. All building users 	
3. EVALUATE THE RISKS	
List the precautions already being taken: <ol style="list-style-type: none"> 1. Staff adequately trained to carry out the task (including manual handling issues, portable appliance testing and cable management) using Cleaning's Induction & Training Manual 2. Correct use of warning signs. 3. Regular maintenance of equipment carried out by competent contractor. 4. Manual handling poster on display in unit detailing the correct manual handling technique. 5. Safety issues audited by Management Team on a regular basis. 6. Training effectiveness audited by Management Team on a regular basis. 	
Are the precautions adequate to reduce the risks to an acceptable level? (Yes)	✓

List the risks that are not being adequately controlled

1. None

List the further actions to be introduced to further reduce the risks

(Note: Also record who will be responsible for doing this and the planned completion date)

1. Specific risk assessments carried out on individual employees, including pregnant/nursing mothers, young people, etc.

Overall Assessment of Risk: Low

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager

Name 2: [REDACTED] – South West Team Leader

Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Task Risk Assessment Prompt Sheet

		Please mark appropriate column		
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance		YES	NO	NA
1. WORKPLACE				
1. Does the activity introduce hazards into the workplace?		✓		
2. WORK EQUIPMENT				
1. Does the work activity involve work equipment? <i>If yes, then refer to the guidance on Work Equipment and continue below. If no, then go on to the next section (Manual Handling)</i>		✓		
2. What is the equipment? Rotary floor machine, polishing brush or disc and buffing pad.				
3. Has an assessment of the work equipment been carried out? <i>Refer to the guidance on Work Equipment</i>		✓		
4. Does the work equipment generate noise levels so high that a person cannot be heard from a distance of approximately 2 metres without raising their voice? <i>If yes, then refer to guidance on Noise Assessment. If no, continue below.</i>			✓	
5. Is the equipment electrical? <i>If yes, refer to guidance on Work Equipment, if no continue below</i>		✓		
3. MANUAL HANDLING				
1. Does the work activity involve moving or handling objects? <i>If yes continue below. If no, then go on to the next section (People)</i>		✓		
2. Can these operations be carried out in such a way as to avoid hazardous handling? <i>If no, then refer to guidance on Manual Handling</i>		✓		
4. PEOPLE				
1. Does the activity hazard employees with a pre-existing health problem that affects their capabilities or affects the work activity?			✓	
2. Is there a risk to female employees of childbearing age?			✓	
3. Is the work activity suited to the range of capabilities of all employees involved?		✓		
4. Where necessary, have employees received relevant training?		✓		
5. Is there a potential for violence or aggression towards employees?			✓	

5. PERSONAL PROTECTIVE EQUIPMENT (PPE)			
1. Do the employees involved in this activity need to use PPE? <i>If yes, refer to guidance on PPE.</i> <i>If no, go to the next section (Hazardous Substances)</i>		✓	

6. HAZARDOUS SUBSTANCES	YES	NO	NA
1. Does the activity involve hazardous substances? (e.g. cleaning products, wood dust, bodily fluids)? <i>If yes, continue below.</i> <i>If no, go to the next section (Fire)</i>		✓	
2. Is the hazardous substance a chemical product? <i>If yes, then refer to guidance on the Control of Substances Hazardous to Health,</i> <i>if no continue below.</i>			✓
3. Is there likely to be contact with blood, faeces or other bodily fluids?		✓	
4. Is the correct personal protective equipment provided to minimise risk?			✓

Manual Handling Assessment For Buffing

Task Buffing	Date October 2020		
Type of Assessment: Generic			
List names of employees subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1. TASK			
Does the task involve:			
1. Lifting/lowering?	✓		
2. Pushing/pulling?	✓		
3. Stooping?	✓		
4. Holding load away from body?		✓	
5. Reaching upwards?		✓	
6. Long carrying distances?		✓	
7. Large vertical movements?		✓	
8. Unpredictable movement of loads?		✓	
9. Repetitive handling?		✓	
10. Insufficient rest or recovery?		✓	
11. A work rate imposed by a process?		✓	
2. INDIVIDUAL			
Does the task:			
1. Require unusual capability?		✓	
2. Require special skills?		✓	
3. Hazard those with a health problem (e.g. back pain, hernia, etc)?		✓	
4. Require specific or protective clothing? (e.g. is clothing restrictive?)		✓	
5. Require special information/training?	✓		

Please mark appropriate column

	Yes	No	N/A
3. LOAD			
Is the load:			
1. Heavy? What weight is it? kg		✓	
2. Bulky/unwieldy?		✓	
3. Difficult to grasp?		✓	
4. Unstable/unpredictable?		✓	
5. Weight unevenly distributed?		✓	
6. Intrinsicly harmful? (e.g. sharp/hot)		✓	

List here any actions or points raised in regard to this assessment:

Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Work Equipment Assessment for Buffing

Task Buffing	Date: October 2020
Type of Assessment: Generic	
Equipment used: rotary floor machine, polishing brush or drive disc and buffing pad.	

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 STATUTORY REGULATIONS AND ARRANGEMENTS			
1. Have applicable regulations and statutory requirements and standards been identified?	✓		
2. Are formal arrangements in place to meet the requirements of these regulations and standards?	✓		

2 SELECTION OF WORK EQUIPMENT			
1. Is there a nominated person to ensure that appropriate work equipment is? a) Specified; and b) Purchased	✓ ✓		
2. Where applicable is the work equipment specified within established systems of work?	✓		
3. Where appropriate are checks made to ensure that the work equipment is fit for the purpose?	✓		
4. Are specific risks to the health and safety of any person associated with the work equipment identified?		✓	

3 MAINTENANCE	Yes	No	N/A
1. Are appropriate arrangements in place for monitoring the safety of work equipment?	✓		
2. Are appropriate arrangements in place for safe maintenance of work equipment?	✓		
3. Are appropriate arrangements in place for the safe repair of work equipment?	✓		
4. Are records kept of failures, especially of safety devices, their possible causes and remedial work conducted?	✓		
5. If the machinery has a maintenance log, is the log kept up to date?	✓		

4 OPERATION OF WORK EQUIPMENT	Yes	No	N/A
1. Are appropriate arrangements in place to ensure work equipment is safe for use in the intended working environment?	✓		

5 WORK EQUIPMENT WITH SPECIFIC RISKS	Yes	No	N/A
1. Where work equipment is identified as having associated specific risks, is the use of such equipment restricted to specifically authorised persons? (e.g. age, qualifications)			✓
2. Is all repair, maintenance, modification and servicing of work equipment with specific risks conducted by competent persons specifically trained to perform such work?	✓		

6 INFORMATION AND INSTRUCTION	Yes	No	N/A
1. Have all users and supervisors been provided with adequate written information and instruction on:	✓		
a) The conditions and methods with which the work equipment may be used?	✓		
b) Foreseeable abnormal situations and the action to be taken if such situations occur?	✓		
c) Any conclusions to be drawn from experience in using the work equipment?	✓		
2. Have all users and supervisors been provided with adequate training in the above requirements?	✓		
3. Has their understanding of the information, instruction and training been assessed?	✓		

List here any actions or points raised in regard to the assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Task Risk Assessment For Spray Cleaning

Task: Spray Cleaning	Date: October 2020
Type of Assessment: Generic	
Employee group subject of risk assessment - Cleaning Staff	
<p>Describe briefly the work activity subject to risk assessment: Spray cleaning is carried out using a high-speed rotary floor machine. This requires the machine to be taken from the storage area to a place of use. A variety of brushes and discs must be attached to the machine. A fine spray of chemical is sprayed onto the floor and the machine which is taken over the floor in a sweeping side to side or back and forwards motion and the process is repeated until the area is clean.</p>	

1. LOOK FOR THE HAZARDS
<p>List any hazards likely to affect health and safety:</p> <ol style="list-style-type: none"> 1. Warning signs not properly displayed resulting in slip/trip/fall hazard. 2. Trailing cables resulting in slip/trip/fall hazard. 3. Manual handling hazard (sprain/strain) when using and manoeuvring equipment. 4. Electric hazard through inappropriate use of power supply. 5. Inadequate ventilation where required. 6. Chemical splashes through improper use of chemical.

2. DECIDE WHO MIGHT BE HARMED AND HOW
<p>List groups of people at risk from the identified hazards:</p> <ol style="list-style-type: none"> a. Cleaning Staff b. All building users

EVALUATE THE RISKS	
<p>List the precautions already being taken:</p> <ol style="list-style-type: none"> 1. Staff adequately trained to carry out the task (including manual handling issues, portable appliance testing and cable management) using Cleaning's Induction & Training Manual 2. Correct use of warning signs. 3. Regular maintenance of equipment carried out by competent contractor. 4. PPE supplied, including goggles when decanting chemicals and gloves when hands come into contact with cleaning solution. 5. Chemical wall chart on display in unit detailing the correct use of chemicals. 6. Manual handling poster on display in unit detailing the correct manual handling technique. 7. Staff trained to add chemical to water. 8. Staff trained to ventilate area if required. 9. Safety issues audited by Management Team on a regular basis. 10. Training effectiveness audited by Management Team on a regular basis. 	
Are the precautions adequate to reduce the risks to an acceptable level? (Yes)	✓

List the risks that are not being adequately controlled

1. None

List the further actions to be introduced to further reduce the risks

(Note: Also record who will be responsible for doing this and the planned completion date)

1. Specific risk assessments carried out on individual employees, including pregnant/nursing mothers, young people, etc.

Overall Assessment of Risk: Low

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager

Name 2: [REDACTED] – South West Team Leader

Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	YES	NO	NA
1. WORKPLACE			
1. Does the activity introduce hazards into the workplace?	✓		
2. WORK EQUIPMENT			
1. Does the work activity involve work equipment? <i>If yes, then refer to the guidance on Work Equipment and continue below. If no, then go on to the next section (Manual Handling)</i>	✓		
2. What is the equipment? Rotary floor machine, spray cleaning brush or disc and spray cleaning pad.			
3. Has an assessment of the work equipment been carried out? <i>Refer to the guidance on Work Equipment</i>	✓		
4. Does the work equipment generate noise levels so high that a person cannot be heard from a distance of approximately 2 metres without raising their voice? <i>If yes, then refer to guidance on Noise Assessment. If no, continue below.</i>		✓	
5. Is the equipment electrical? <i>If yes, refer to guidance on Work Equipment, if no continue below</i>	✓		
3. MANUAL HANDLING			
1. Does the work activity involve moving or handling objects? <i>If yes continue below. If no, then go on to the next section (People)</i>	✓		
2. Can these operations be carried out in such a way as to avoid hazardous handling? <i>If no, then refer to guidance on Manual Handling</i>	✓		
4. PEOPLE			
1. Does the activity hazard employees with a pre-existing health problem that affects their capabilities or affects the work activity?		✓	
2. Is there a risk to female employees of childbearing age?		✓	
3. Is the work activity suited to the range of capabilities of all employees involved?	✓		
4. Where necessary, have employees received relevant training?	✓		
5. Is there a potential for violence or aggression towards employees		✓	
5. PERSONAL PROTECTIVE EQUIPMENT (PPE)			
1. Do the employees involved in this activity need to use PPE? <i>If yes, refer to guidance on PPE. If no, go to the next section (Hazardous Substances)</i>	✓		

6. HAZARDOUS SUBSTANCES	YES	NO	NA
1. Does the activity involve hazardous substances, (e.g. cleaning products? wood dust, bodily fluids)? <i>If yes, continue below.</i> <i>If no, go to the next section (Fire)</i>	✓		
2. Is the hazardous substance a chemical product? <i>If yes, then refer to guidance on the Control of Substances Hazardous to Health,</i> <i>if no continue below.</i>	✓		
3. Is there likely to be contact with blood, faeces or other bodily fluids?		✓	
4. Is the correct personal protective equipment provided to minimise risk?	✓		

Manual Handling Assessment For Spray Cleaning

Task Spray Cleaning	Date October 2020		
Type of Assessment: Generic			
List names of employees subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1. TASK			
Does the task involve:			
1. Lifting/lowering?	✓		
2. Pushing/pulling?	✓		
3. Stooping?	✓		
4. Holding load away from body?		✓	
5. Reaching upwards?		✓	
6. Long carrying distances?		✓	
7. Large vertical movements?		✓	
8. Unpredictable movement of loads?		✓	
9. Repetitive handling?		✓	
10. Insufficient rest or recovery?		✓	
11. A work rate imposed by a process?		✓	
2. INDIVIDUAL			
Does the task:			
1. Require unusual capability?		✓	
2. Require special skills?		✓	
3. Hazard those with a health problem (e.g. back pain, hernia, etc)?		✓	
4. Require specific or protective clothing? (e.g. is clothing restrictive?)		✓	
5. Require special information/training?	✓		

Please mark appropriate column		
Yes	No	N/A

3. LOAD		Yes	No	N/A
Is the load:				
1. Heavy? What weight is it? kg			✓	
2. Bulky/unwieldy?			✓	
3. Difficult to grasp?			✓	
4. Unstable/unpredictable?			✓	
5. Weight unevenly distributed?			✓	
6. Intrinsically harmful? (e.g. sharp/hot)			✓	

List here any actions or points raised in regard to this assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Work Equipment Assessment for Spray Cleaning

Task Spray Cleaning	Date: October 2020
Type of Assessment: Generic	
Equipment used: rotary floor machine, polishing brush or drive disc and buffing pad.	

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1. STATUTORY REGULATIONS AND ARRANGEMENTS			
1. Have applicable regulations and statutory requirements and standards been identified?	✓		
2. Are formal arrangements in place to meet the requirements of these regulations and standards?	✓		

2. SELECTION OF WORK EQUIPMENT			
1. Is there a nominated person to ensure that appropriate work equipment is: a) Specified b) Purchased	✓ ✓		
2. Where applicable is the work equipment specified within established systems of work?	✓		
3. Where appropriate are checks made to ensure that the work equipment is fit for the purpose?	✓		
4. Are specific risks to the health and safety of any person associated with the work equipment identified?		✓	

3. MAINTENANCE	Yes	No	N/A
1. Are appropriate arrangements in place for monitoring the safety of work equipment?	✓		
2. Are appropriate arrangements in place for safe maintenance of work equipment?	✓		
3. Are appropriate arrangements in place for the safe repair of work equipment?	✓		

4. Are records kept of failures, especially of safety devices, their possible causes and remedial work conducted?	✓		
5. If the machinery has a maintenance log, is the log kept up to date?	✓		

4. OPERATION OF WORK EQUIPMENT	Yes	No	N/A
1. Are appropriate arrangements in place to ensure work equipment is safe for use in the intended working environment?	✓		

5. WORK EQUIPMENT WITH SPECIFIC RISKS	Yes	No	N/A
1. Where work equipment is identified as having associated specific risks, is the use of such equipment restricted to specifically authorised persons? (e.g. age, qualifications)			✓
2. Is all repair, maintenance, modification and servicing of work equipment with specific risks conducted by competent persons specifically trained to perform such work?	✓		

6. INFORMATION AND INSTRUCTION	Yes	No	N/A
1. Have all users and supervisors been provided with adequate written information and instruction on: a) The conditions and methods with which the work equipment may be used? b) Foreseeable abnormal situations and the action to be taken if such situations occur? c) Any conclusions to be drawn from experience in using the work equipment?	✓ ✓ ✓		
2. Have all users and supervisors been provided with adequate training in the above requirements?	✓		
3. Has their understanding of the information, instruction and training been assessed?	✓		

List here any actions or points raised in regard to the assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ██████████ – South West Team Leader	Date: October 2020

PPE Assessment for Spray Cleaning

Task: Spray Cleaning	Date: October 2020		
Type of Assessment: Generic			
List names of employees subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1. ACTIVITY			
1. Has a general risk assessment been carried out for this activity?	✓		
2. Have assessments for any other legislation been carried out for this activity?	✓		
3. Have all identified control measures been applied?	✓		
4. Have the areas of the body that require protection been identified? If YES, list parts of body to be protected: eyes, hands	✓		

2. PERSONAL PROTECTIVE EQUIPMENT			
1. Has suitable PPE been identified and purchased?	✓		
2. Have individuals been supplied with PPE where required?	✓		
3. Have individuals received information and instruction on the use of the PPE?	✓		
4. Is the PPE being worn where necessary?	✓		
5. Are there any signs and notices to mark PPE zones?	✓		
6. Are regular checks made to ensure that PPE is worn where required?	✓		
7. Are additional supplies of PPE available?	✓		
8. Do employees know how to obtain replacement PPE?	✓		
9. Is all the PPE supplied free of charge?	✓		

List here any actions or points raised in regard to this assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Task Risk Assessment Machine Scrubbing & Drying

Task Machine Scrubbing & Drying	Date: October 2020
Type of Assessment: Generic	
Employee group subject of risk assessment - Cleaning Staff	
Describe briefly the work activity subject to risk assessment Machine Scrubbing and Drying involves the use of a rotary floor machine and brush/pad that scrubs hard floors whilst releasing a measured amount of water and chemical solution on to the floor. This solution is then removed with a wet pick-up machine.	

1 LOOK FOR THE HAZARDS

List any hazards likely to affect health and safety:

1. Warning signs not properly displayed resulting in slip/trip/fall hazard.
2. Inadequate ventilation where required.
3. Manual handling hazard if machines are used, transported, lifted/emptied incorrectly.
4. Chemical splashes through improper use of chemical.
5. Cross contamination through failure to observe colour coding rules.
6. Trailing cables resulting in a slip/trip/fall hazard.
7. Electric hazard through inappropriate use of power supply.

2 DECIDE WHO MIGHT BE HARMED AND HOW

List groups of people at risk from the identified hazards:

1. Cleaning Staff
2. All building users

3 EVALUATE THE RISKS

List the precautions already being taken:

1. Staff adequately trained to carry out the task (including manual handling issues, portable appliance testing, cable management and colour coding system) using Cleaning's Induction & Training Manual.
2. Correct use of warning signs & RCD.
3. PPE supplied, including goggles when decanting chemicals and gloves when hands come into contact with cleaning solution (e.g when cleaning equipment).
4. Chemical wall chart on display in unit detailing the correct use of chemicals.
5. Manual handling poster on display in unit detailing the correct manual handling technique.
6. Staff trained to avoid over-filling buckets and trained to add chemical to water.
7. Staff trained to ventilate area if required.
8. Safety issues audited by Management Team on a regular basis.
9. Training effectiveness audited by Management Team on a regular basis.
10. Equipment maintained by a competent contractor.

Are the precautions adequate to reduce the risks to an acceptable level? (Yes)

✓

List the risks that are not being adequately controlled
1. None

List the further actions to be introduced to further reduce the risks
(Note: Also record who will be responsible for doing this and the planned completion date)
1. Specific risk assessments carried out on individual employees, including pregnant/nursing mothers, young people, etc.

Overall Assessment of Risk: Low

Assessment completed by: Name 1: [redacted] – South West Locality Manager Name 2: [redacted] – South West Team Leader Name 3: [redacted] – South West Team Leader	Date: October 2020

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	YES	NO	NA
1. WORKPLACE			
1. Does the activity introduce hazards into the workplace?	✓		

2. WORK EQUIPMENT			
1. Does the work activity involve work equipment? <i>If yes, then refer to the guidance on Work Equipment and continue below. If no, then go on to the next section (Manual Handling)</i>	✓		
2. What is the equipment? Rotary floor machine and tank with brush or disc and pad, wet suction machine, buckets, cloths, RCD.			
3. Has an assessment of the work equipment been carried out? <i>Refer to the guidance on Work Equipment</i>	✓		
4. Does the work equipment generate noise levels so high that a person cannot be heard from a distance of approximately 2 metres without raising their voice? <i>If yes, then refer to guidance on Noise Assessment. If no, continue below.</i>		✓	
5. Is the equipment electrical? <i>If yes, refer to guidance on Work Equipment, if no continue below</i>	✓		

3. MANUAL HANDLING			
1. Does the work activity involve moving or handling objects? <i>If yes continue below. If no, then go on to the next section (People)</i>	✓		
2. Can these operations be carried out in such a way as to avoid hazardous handling? <i>If no, then refer to guidance on Manual Handling</i>	✓		

4. PEOPLE			
1. Does the activity hazard employees with a pre-existing health problem that affects their capabilities or affects the work activity?		✓	
2. Is there a risk to female employees of childbearing age?		✓	
3. Is the work activity suited to the range of capabilities of all employees involved?	✓		
4. Where necessary, have employees received relevant training?	✓		
5. Is there a potential for violence or aggression towards employees		✓	

5. PERSONAL PROTECTIVE EQUIPMENT (PPE)			
1. Do the employees involved in this activity need to use PPE? <i>If yes, refer to guidance on PPE. If no, go to the next section(Hazardous Substances)</i>	✓		

6. HAZARDOUS SUBSTANCES	YES	NO	NA
1. Does the activity involve hazardous substances, (e.g. cleaning products, wood dust, bodily fluids)? <i>If yes, continue below. If no, go to the next section (Fire)</i>	✓		
2. Is the hazardous substance a chemical product? <i>If yes, then refer to guidance on the Control of Substances Hazardous to Health, If no continue below.</i>	✓		
3. Is there likely to be contact with blood, faeces or other bodily fluids?		✓	
4. Is the correct personal protective equipment provided to minimise risk?	✓		

Manual Handling Assessment Machine Scrubbing & Drying

Task Machine Scrubbing & Drying	Date October 2020		
Type of Assessment: Generic			
List names of employee's subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 TASK			
Does the task involve:			
1. Lifting/lowering?	✓		
2. Pushing/pulling?	✓		
3. Stooping?	✓		
4. Holding load away from body?		✓	
5. Reaching upwards?		✓	
6. Long carrying distances?		✓	
7. Large vertical movements?		✓	
8. Unpredictable movement of loads?		✓	
9. Repetitive handling?		✓	
10. Insufficient rest or recovery?		✓	
11. A work rate imposed by a process?		✓	
2 INDIVIDUAL			
Does the task:			
1. Require unusual capability?		✓	
2. Require special skills?		✓	
3. Hazard those with a health problem (e.g. back pain, hernia, etc)?		✓	
4. Require specific or protective clothing? (e.g. is clothing restrictive?)		✓	
5. Require special information/training?	✓		

Please mark appropriate column

	Yes	No	N/A
3 LOAD			
Is the load:			
1. Heavy? What weight is it? kg		✓	
2. Bulky/unwieldy?		✓	
3. Difficult to grasp?		✓	
4. Unstable/unpredictable?		✓	
5. Weight unevenly distributed?		✓	
6. Intrinsicly harmful? (e.g. sharp/hot)		✓	

List here any actions or points raised in regard to this assessment:

Assessment completed by:

Name 1: [redacted] – South West Locality Manager
 Name 2: [redacted] – South West Team Leader
 Name 3: [redacted] – South West Team Leader

Date: October 2020

Work Equipment Assessment for Machine Scrubbing & Drying

Task Machine Scrubbing & Drying	Date: October 2020
Type of Assessment: Generic	
Equipment used: Appropriate rotary floor machine and tank, machine scrubbing brush or drive disc and pad. Wet suction machine, bucket, cloths, R.C.D.	

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 STATUTORY REGULATIONS AND ARRANGEMENTS			
1. Have applicable regulations and statutory requirements and standards been identified?	✓		
2. Are formal arrangements in place to meet the requirements of these regulations and standards?	✓		

2 SELECTION OF WORK EQUIPMENT			
1. Is there a nominated person to ensure that appropriate work equipment is: a) Specified b) Purchased	✓		
2. Where applicable is the work equipment specified within established systems of work?	✓		
3. Where appropriate are checks made to ensure that the work equipment is fit for the purpose?	✓		
4. Are specific risks to the health and safety of any person associated with the work equipment identified?		✓	

3 MAINTENANCE	Yes	No	N/A
1. Are appropriate arrangements in place for monitoring the safety of work equipment?	✓		
2. Are appropriate arrangements in place for safe maintenance of work equipment?	✓		
3. Are appropriate arrangements in place for the safe repair of work equipment?	✓		

4. Are records kept of failures, especially of safety devices, their possible causes and remedial work conducted?	✓		
5. If the machinery has a maintenance log, is the log kept up to date?	✓		

4 OPERATION OF WORK EQUIPMENT	Yes	No	N/A
1. Are appropriate arrangements in place to ensure work equipment is safe for use in the intended working environment?	✓		

5 WORK EQUIPMENT WITH SPECIFIC RISKS	Yes	No	N/A
1. Where work equipment is identified as having associated specific risks, is the use of such equipment restricted to specifically authorised persons? (e.g. age, qualifications)			✓
2. Is all repair, maintenance, modification and servicing of work equipment with specific risks conducted by competent persons specifically trained to perform such work?	✓		

6 INFORMATION AND INSTRUCTION	Yes	No	N/A
1. Have all users and supervisors been provided with adequate written information and instruction on: a) the conditions and methods with which the work equipment may be used? b) foreseeable abnormal situations and the action to be taken if such situations occur? c) any conclusions to be drawn from experience in using the work equipment?	✓ ✓ ✓		
2. Have all users and supervisors been provided with adequate training in the above requirements?	✓		
3. Has their understanding of the information, instruction and training been assessed?	✓		

List here any actions or points raised in regard to the assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Personal Protective Equipment For Machine Scrubbing & Drying

Task: Machine Scrubbing & Drying	Date October 2020		
Type of Assessment: Generic			
List names of employees subject to this risk assessment - Cleaning Staff			
			Please mark appropriate column
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 ACTIVITY			
1. Has a general risk assessment been carried out for this activity?	✓		
2. Have assessments for any other legislation been carried out for this activity?	✓		
3. Have all identified control measures been applied?	✓		
4. Have the areas of the body that require protection been identified? If YES, list parts of body to be protected: Eyes, Hands	✓		
2 PERSONAL PROTECTIVE EQUIPMENT			
1. Has suitable PPE been identified and purchased?	✓		
2. Have individuals been supplied with PPE where required?	✓		
3. Have individuals received information and instruction on the use of the PPE?	✓		
4. Is the PPE being worn where necessary?	✓		
5. Are there any signs and notices to mark PPE zones?	✓		
6. Are regular checks made to ensure that PPE is worn where required?	✓		
7. Are additional supplies of PPE available?	✓		
8. Do employees know how to obtain replacement PPE?	✓		
9. Is all the PPE supplied free of charge?	✓		
List here any actions or points raised in regard to this assessment:			
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader		Date: October 2020	

Task Risk Assessment for Scrubbing & Drying With a Battery Powered Scrubber Dryer

Task: Scrubbing & drying with a battery powered scrubber drier	Date: October 2020
Type of Assessment: Generic	
Employee group subject of risk assessment - Cleaning Staff	
Describe briefly the work activity subject to risk assessment: Scrubbing and drying involves the use of a battery powered floor machine and brush/pad that scrubs hard floors whilst releasing a measured amount of water and chemical solution on to the floor. This solution is then removed with a squeegee blade on the machine.	
1 LOOK FOR THE HAZARDS	
List any hazards likely to affect health and safety: <ol style="list-style-type: none"> 1. Warning signs not properly displayed resulting in slip/trip/fall hazard. 2. Inadequate ventilation where required. 3. Manual handling hazard if machine (and/or battery) is used, transported, lifted/emptied incorrectly. 4. Chemical splashes through improper use of cleaning chemicals and battery. 5. Cross contamination through failure to observe colour coding rules. 6. Electric hazard through inappropriate use of power supply (battery charger). 	
2 DECIDE WHO MIGHT BE HARMED AND HOW	
List groups of people at risk from the identified hazards: <ol style="list-style-type: none"> 1. Cleaning Staff 2. All building users 	
3 EVALUATE THE RISKS	
List the precautions already being taken: <ol style="list-style-type: none"> 1. Approved staff adequately trained to carry out the task (including manual handling issues, portable appliance testing, cable management and colour coding system) using Cleaning's Induction & Training Manual. 2. Correct use of warning signs. 3. PPE supplied, including goggles when decanting chemicals and gloves when hands come into contact with cleaning solution. 4. Chemical wall chart on display in unit detailing the correct use of chemicals. 5. Manual handling poster on display in unit detailing the correct manual handling technique. 6. Staff trained to avoid over-filling buckets and trained to add chemical to water. 7. Staff trained to ventilate area if required. 8. Safety issues audited by Management Team on a regular basis. 9. Training effectiveness audited by Management Team on a regular basis. 10. Equipment maintained by a competent contractor. 	
Are the precautions adequate to reduce the risks to an acceptable level? (Yes)	✓

List the risks that are not being adequately controlled

1. None

List the further actions to be introduced to further reduce the risks

(Note: Also record who will be responsible for doing this and the planned completion date)

1. Specific risk assessments carried out on individual employees, including pregnant/nursing mothers, young people, etc.

Overall Assessment of Risk: Low

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager

Name 2: [REDACTED] – South West Team Leader

Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	YES	NO	NA
1 WORKPLACE			
1. Does the activity introduce hazards into the workplace?	✓		
2 WORK EQUIPMENT			
1. Does the work activity involve work equipment? <i>If yes, then refer to the guidance on Work Equipment and continue below. If no, then go on to the next section (Manual Handling)</i>	✓		
2. What is the equipment – battery powered scrubber/dryer, machine scrubbing brushes or disc drive with relevant pads, buckets, cloths, etc.			
3. Has an assessment of the work equipment been carried out? <i>Refer to the guidance on Work Equipment</i>	✓		
4. Does the work equipment generate noise levels so high that a person cannot be heard from a distance of approximately 2 metres without raising their voice? <i>If yes, then refer to guidance on Noise Assessment. If no, continue below.</i>		✓	
5. Is the equipment electrical? <i>If yes, refer to guidance on Work Equipment, if no continue below (Battery charger only)</i>	✓		
3 MANUAL HANDLING			
1. Does the work activity involve moving or handling objects? <i>If yes continue below. If no, then go on to the next section (People)</i>	✓		
2. Can these operations be carried out in such a way as to avoid hazardous handling? <i>If no, then refer to guidance on Manual Handling</i>	✓		
4 PEOPLE			
1. Does the activity hazard employees with a pre-existing health problem that affects their capabilities or affects the work activity?		✓	
2. Is there a risk to female employees of childbearing age?		✓	
3. Is the work activity suited to the range of capabilities of all employees involved?		✓	
4. Where necessary, have employees received relevant training?	✓		
5. Is there a potential for violence or aggression towards employees		✓	
5 PERSONAL PROTECTIVE EQUIPMENT (PPE)			
1. Do the employees involved in this activity need to use PPE? <i>If yes, refer to guidance on PPE. If no, go to the next section (Hazardous Substances)</i>	✓		

6 HAZARDOUS SUBSTANCES	YES	NO	NA
1. Does the activity involve hazardous substances, (e.g. cleaning products, wood dust, bodily fluids)? <i>If yes, continue below. If no, go to the next section (Fire)</i>	✓		
2. Is the hazardous substance a chemical product? <i>If yes, then refer to guidance on the Control of Substances Hazardous to Health, if no continue below.</i>	✓		
3. Is there likely to be contact with blood, faeces or other bodily fluids?		✓	
4. Is the correct personal protective equipment provided to minimise risk?	✓		

Manual Handling Assessment for Scrubbing & Drying with a Battery Powered Scrubber Dryer

Task: Scrubbing & drying with a battery powered scrubber dryer	Date October 2020		
Type of Assessment: Generic			
List names of employee's subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 TASK			
Does the task involve:			
1. Lifting/lowering?	✓		
2. Pushing/pulling?	✓		
3. Stooping?	✓		
4. Holding load away from body?		✓	
5. Reaching upwards?		✓	
6. Long carrying distances?		✓	
7. Large vertical movements?		✓	
8. Unpredictable movement of loads?		✓	
9. Repetitive handling?		✓	
10. Insufficient rest or recovery?		✓	
11. A work rate imposed by a process?		✓	
2 INDIVIDUAL			
Does the task:			
1. Require unusual capability?		✓	
2. Require special skills?	✓		
3. Hazard those with a health problem (e.g. back pain, hernia, etc)?		✓	
4. Require specific or protective clothing? (e.g. is clothing restrictive?)		✓	
5. Require special information/training?	✓		

Please mark appropriate column		
Yes	No	N/A

3 LOAD		Yes	No	N/A
Is the load:				
1. Heavy? What weight is it? kg			✓	
2. Bulky/unwieldy?			✓	
3. Difficult to grasp?			✓	
4. Unstable/unpredictable?			✓	
5. Weight unevenly distributed?			✓	
6. Intrinsically harmful? (e.g. sharp/hot)			✓	

List here any actions or points raised in regard to this assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Work Equipment Assessment for Scrubbing & Drying with a Battery Powered Scrubber Drier

Task Scrubbing & Drying with a battery powered scrubber drier	Date: October 2020
Type of Assessment: Generic	
Equipment used: battery powered scrubber dryer, brushes or pads, buckets and cloths	

Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 STATUTORY REGULATIONS AND ARRANGEMENTS			
1. Have applicable regulations and statutory requirements and standards been identified?	✓		
2. Are formal arrangements in place to meet the requirements of these regulations and standards?	✓		

2 SELECTION OF WORK EQUIPMENT			
1. Is there a nominated person to ensure that appropriate work equipment is: a) Specified b) Purchased	✓ ✓		
2. Where applicable is the work equipment specified within established systems of work?	✓		
3. Where appropriate are checks made to ensure that the work equipment is fit for the purpose?	✓		
4. Are specific risks to the health and safety of any person associated with the work equipment identified?		✓	

3 MAINTENANCE			
	Yes	No	N/A
1. Are appropriate arrangements in place for monitoring the safety of work equipment?	✓		
2. Are appropriate arrangements in place for safe maintenance of work equipment?	✓		
3. Are appropriate arrangements in place for the safe repair of work equipment?	✓		
4. Are records kept of failures, especially of safety devices, their possible causes and remedial work conducted?	✓		
5. If the machinery has a maintenance log, is the log kept up to date?	✓		

4 OPERATION OF WORK EQUIPMENT	Yes	No	N/A
1. Are appropriate arrangements in place to ensure work equipment is safe for use in the intended working environment?	✓		

5 WORK EQUIPMENT WITH SPECIFIC RISKS	Yes	No	N/A
1. Where work equipment is identified as having associated specific risks, is the use of such equipment restricted to specifically authorised persons? (e.g. age, qualifications)			✓
2. Is all repair, maintenance, modification and servicing of work equipment with specific risks conducted by competent persons specifically trained to perform such work?	✓		

6 INFORMATION AND INSTRUCTION	Yes	No	N/A
1. Have all users and supervisors been provided with adequate written information and instruction on: a) the conditions and methods with which the work equipment may be used? b) foreseeable abnormal situations and the action to be taken if such situations occur? c) any conclusions to be drawn from experience in using the work equipment?	✓ ✓ ✓		
2. Have all users and supervisors been provided with adequate training in the above requirements?	✓		
3. Has their understanding of the information, instruction and training been assessed?	✓		

List here any actions or points raised in regard to the assessment:	
Assessment completed by: Name 1: [REDACTED] – South West Locality Manager Name 2: [REDACTED] – South West Team Leader Name 3: [REDACTED] – South West Team Leader	Date: October 2020

Personal Protective Equipment For Scrubbing & Drying a Battery Powered Scrubber Dryer

Task: Scrubbing & drying with a battery powered scrubber dryer	Date October 2020			
Type of Assessment: Generic				
List names of employees subject to this risk assessment - Cleaning Staff				
	Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Yes</td> <td style="width: 33%;">No</td> <td style="width: 33%;">N/A</td> </tr> </table>	Yes	No	N/A
Yes	No	N/A		
1 ACTIVITY				
1. Has a general risk assessment been carried out for this activity?	✓			
2. Have assessments for any other legislation been carried out for this activity?	✓			
3. Have all identified control measures been applied?	✓			
4. Have the areas of the body that require protection been identified? If YES, list parts of body to be protected: eyes, hands	✓			

2 PERSONAL PROTECTIVE EQUIPMENT			
1. Has suitable PPE been identified and purchased?	✓		
2. Have individuals been supplied with PPE where required?	✓		
3. Have individuals received information and instruction on the use of the PPE?	✓		
4. Is the PPE being worn where necessary?	✓		
5. Are there any signs and notices to mark PPE zones?	✓		
6. Are regular checks made to ensure that PPE is worn where required?	✓		
7. Are additional supplies of PPE available?	✓		
8. Do employees know how to obtain replacement PPE?	✓		
9. Is all the PPE supplied free of charge?	✓		

List here any actions or points raised in regard to this assessment:	
Assessment completed by: Name 1: ██████ – South West Locality Manager Name 2: ██████ – South West Team Leader Name 3: ██████ – South West Team Leader	Date: October 2020

Task Risk Assessment for Scrubbing & Drying With Electrically Powered Scrubber Drier

Task: Scrubbing & drying with electrically powered scrubber drier	Date: October 2020
Type of Assessment: Generic	
Employee group subject of risk assessment - Cleaning Staff	
Describe briefly the work activity subject to risk assessment Scrubbing and drying involves the use of an electrically powered floor cleaning machine and brush/pad that scrubs hard floors whilst releasing a measured amount of water and chemical solution onto the floor. This solution is then removed with the same machine.	

1 LOOK FOR THE HAZARDS

List any hazards likely to affect health and safety:

1. Warning signs not properly displayed resulting in slip/trip/fall hazard.
2. Inadequate ventilation where required.
3. Manual handling hazard if machines are used, transported, lifted/emptied incorrectly.
4. Chemical splashes through improper use of chemical.
5. Cross contamination through failure to observe colour coding rules.
6. Trailing cables resulting in a slip/trip/fall hazard.
7. Electric hazard through inappropriate use of power supply.

2 DECIDE WHO MIGHT BE HARMED AND HOW

List groups of people at risk from the identified hazards:

1. Cleaning Staff
2. All building users

3 EVALUATE THE RISKS

List the precautions already being taken:

1. Approved staff adequately trained to carry out the task (including manual handling issues, portable appliance testing, cable management and colour coding system) using Cleaning's Induction & Training Manual.
2. Correct use of warning signs & RCD.
3. PPE supplied, including goggles when decanting chemicals and gloves when hands come into contact with cleaning solution (e.g. when cleaning equipment).
4. Chemical wall chart on display in unit detailing the correct use of chemicals.
5. Manual handling poster on display in unit detailing the correct manual handling technique.
6. Staff trained to avoid over-filling buckets and trained to add chemical to water.
7. Staff trained to ventilate area if required.
8. Safety issues audited by Management Team on a regular basis.
9. Training effectiveness audited by Management Team on a regular basis.
10. Equipment maintained by a competent contractor.

Are the precautions adequate to reduce the risks to an acceptable level? (Yes)

✓

List the risks that are not being adequately controlled
1. None

List the further actions to be introduced to further reduce the risks
(Note: Also record who will be responsible for doing this and the planned completion date)
1. Specific risk assessments carried out on individual employees, including pregnant/nursing mothers, young people, etc.

Overall Assessment of Risk: Low

Assessment completed by: Name 1: [redacted] – South West Locality Manager Name 2: [redacted] – South West Team Leader Name 3: [redacted] – South West Team Leader	Date: October 2020

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure correct response. Please leave blank and seek further guidance	YES	NO	NA
1 WORKPLACE			
1 Does the activity introduce hazards into the workplace?	✓		

2 WORK EQUIPMENT			
1 Does the work activity involve work equipment? <i>If yes, then refer to the guidance on Work Equipment and continue below. If no, then go on to the next section (Manual Handling)</i>	✓		
2 What is the equipment – electrically powered scrubber drier with brush or disc and pad, RCD.			
3 Has an assessment of the work equipment been carried out? <i>Refer to the guidance on Work Equipment</i>	✓		
4 Does the work equipment generate noise levels so high that a person cannot be heard from a distance of approximately 2 metres without raising their voice? <i>If yes, then refer to guidance on Noise Assessment. If no, continue below.</i>		✓	
5 Is the equipment electrical? <i>If yes, refer to guidance on Work Equipment, if no continue below</i>	✓		

3 MANUAL HANDLING			
1. Does the work activity involve moving or handling objects? <i>If yes continue below. If no, then go on to the next section (People)</i>	✓		
2. Can these operations be carried out in such a way as to avoid hazardous handling? <i>If no, then refer to guidance on Manual Handling</i>	✓		

4 PEOPLE			
1. Does the activity hazard employees with a pre-existing health problem that affects their capabilities or affects the work activity?		✓	
2. Is there a risk to female employees of childbearing age?		✓	
3. Is the work activity suited to the range of capabilities of all employees involved?	✓		
4. Where necessary, have employees received relevant training?	✓		
5. Is there a potential for violence or aggression towards employees		✓	

5 PERSONAL PROTECTIVE EQUIPMENT (PPE)			
1. Do the employees involved in this activity need to use PPE? <i>If yes, refer to guidance on PPE. If no, go to the next section (Hazardous Substances)</i>	✓		

6 HAZARDOUS SUBSTANCES			
	YES	NO	NA
1. Does the activity involve hazardous substances, (e.g. cleaning products, wood dust, bodily fluids)? <i>If yes, continue below. If no, go to the next section (Fire)</i>	✓		
2. Is the hazardous substance a chemical product? <i>If yes, then refer to guidance on the Control of Substances Hazardous to Health, If no continue below</i>	✓		
3. Is there likely to be contact with blood, faeces or other bodily fluids?		✓	
4. Is the correct personal protective equipment provided to minimise risk?	✓		

Manual Handling Assessment Scrubbing & Drying Electric

Task: Scrubbing & drying with electrically powered scrubber drier.	Date: October 2020		
Type of Assessment: Generic			
List names of employee's subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1. TASK			
Does the task involve:			
1. Lifting/lowering?	✓		
2. Pushing/pulling?	✓		
3. Stooping?	✓		
4. Holding load away from body?		✓	
5. Reaching upwards?		✓	
6. Long carrying distances?		✓	
7. Large vertical movements?		✓	
8. Unpredictable movement of loads?		✓	
9. Repetitive handling?		✓	
10. Insufficient rest or recovery?		✓	
11. A work rate imposed by a process?		✓	
2. INDIVIDUAL			
Does the task:			
1. Require unusual capability?		✓	
2. Require special skills?		✓	
3. Hazard those with a health problem (e.g. back pain, hernia, etc)?		✓	
4. Require specific or protective clothing? (e.g. is clothing restrictive?)		✓	
5. Require special information/training?	✓		

Please mark appropriate column

	Yes	No	N/A
3. LOAD			
Is the load:			
1. Heavy? What weight is it? kg		✓	
2. Bulky/unwieldy?		✓	
3. Difficult to grasp?		✓	
4. Unstable/unpredictable?		✓	
5. Weight unevenly distributed?		✓	
6. Intrinsically harmful? (e.g. sharp/hot)		✓	

List here any actions or points raised in regard to this assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Task Risk Assessment for Chemical Competence

Task: Chemical Competence – receipt of cleaning materials and decanting of chemicals.	Date: October 2020
Type of Assessment: Generic	
Employee group subject of risk assessment - Cleaning Staff	
Describe briefly the work activity subject to risk assessment Cleaning chemicals and associated items are delivered to each unit in various quantities and at different intervals. The task involves moving the goods from delivery site to storage area and decanting/diluting the cleaning chemicals into smaller bottles.	

1 LOOK FOR THE HAZARDS
List any hazards likely to affect health and safety: <ol style="list-style-type: none"> 1. Warning signs not properly displayed resulting in slip/trip/fall hazard. 2. Inadequate ventilation where required. 3. Manual handling hazard if goods are used, transported, lifted/emptied incorrectly. 4. Chemical splashes through improper handling of chemical. 5. Falling object hazard if goods not stored correctly.

2 DECIDE WHO MIGHT BE HARMED AND HOW
List groups of people at risk from the identified hazards: <ol style="list-style-type: none"> 1. Cleaning Staff 2. All building users

3 EVALUATE THE RISKS	
List the precautions already being taken: <ol style="list-style-type: none"> 1. Staff adequately trained to carry out the task (including manual handling issues - breaking down load into manageable units, use of trolleys where possible, using janitor/handyman to move loads etc., safe handling of chemicals and how to deal with spillages, use of measuring pump and jug, etc.). 2. Correct use of warning signs. 3. PPE supplied, including goggles when decanting chemicals and gloves when hands come into contact with cleaning solution. 4. Chemical wall chart on display in unit detailing the correct use of chemicals. 5. COSHH assessment data available on site. 6. First aid kit available in cleaning cupboard. 7. Manual handling poster on display in unit detailing the correct manual handling technique. 8. Staff trained to avoid over-filling containers and trained to add chemical to water. 9. Staff trained to ventilate area if required. 10. Staff trained not to store 5 litre containers higher than 4 feet above ground level and to rotate stock. 11. Safety issues audited by Management Team on a regular basis. 12. Training effectiveness audited by Management Team on a regular basis. 13. Goods delivered in small quantities through regular unit deliveries. 	
Are the precautions adequate to reduce the risks to an acceptable level? (Yes)	✓

List the risks that are not being adequately controlled
1. None

List the further actions to be introduced to further reduce the risks
(Note: Also record who will be responsible for doing this and the planned completion date)
1. Specific risk assessments carried out on individual employees, including pregnant/nursing mothers, young people, etc.

Overall Assessment of Risk: Low

Assessment completed by: Name 1: [redacted] – South West Locality Manager Name 2: [redacted] – South West Team Leader Name 3: [redacted] – South West Team Leader	Date: October 2020

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	YES	NO	NA
1 WORKPLACE			
1. Does the activity introduce hazards into the workplace?	✓		
2. WORK EQUIPMENT			
1. Does the work activity involve work equipment? <i>If yes, then refer to the guidance on Work Equipment and continue below. If no, then go on to the next section (Manual Handling)</i>	✓		
2. What is the equipment? Spray bottles, buckets, measuring pump, trolley, etc)			
3. Has an assessment of the work equipment been carried out? <i>Refer to the guidance on Work Equipment</i>	✓		
4. Does the work equipment generate noise levels so high that a person cannot be heard from a distance of approximately 2 metres without raising their voice? <i>If yes, then refer to guidance on Noise Assessment. If no, continue below.</i>		✓	
5. Is the equipment electrical? <i>If yes, refer to guidance on Work Equipment, if no continue below</i>		✓	
3. MANUAL HANDLING			
1. Does the work activity involve moving or handling objects? <i>If yes continue below. If no, then go on to the next section (People)</i>	✓		
2. Can these operations be carried out in such a way as to avoid hazardous handling? <i>If no, then refer to guidance on Manual Handling</i>	✓		
4. PEOPLE			
1. Does the activity hazard employees with a pre-existing health problem that affects their capabilities or affects the work activity?		✓	
2. Is there a risk to female employees of childbearing age?		✓	
3. Is the work activity suited to the range of capabilities of all employees involved?	✓		
4. Where necessary, have employees received relevant training?	✓		
5. Is there a potential for violence or aggression towards employees		✓	
5. PERSONAL PROTECTIVE EQUIPMENT (PPE)			
1. Do the employees involved in this activity need to use PPE? <i>If yes, refer to guidance on PPE. If no, go to the next section (Hazardous Substances)</i>	✓		

6. HAZARDOUS SUBSTANCES	YES	NO	NA
1. Does the activity involve hazardous substances, (e.g. cleaning products, wood dust, bodily fluids)? <i>If yes, continue below.</i> <i>If no, go to the next section (Fire)</i>	✓		
2. Is the hazardous substance a chemical product? <i>If yes, then refer to guidance on the Control of Substances Hazardous to Health,</i> <i>If no continue below.</i>	✓		
3. Is there likely to be contact with blood, faeces or other bodily fluids?		✓	
4. Is the correct personal protective equipment provided to minimise risk?	✓		

Manual Handling Assessment For Chemical Competence

Task: Chemical Competence – receipt of cleaning materials and decanting of chemicals.	Date October 2020		
Type of Assessment: Generic			
List names of employee's subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 TASK			
Does the task involve:			
1. Lifting/lowering?	✓		
2. Pushing/pulling?	✓		
3. Stooping?	✓		
4. Holding load away from body?		✓	
5. Reaching upwards?	✓		
6. Long carrying distances?		✓	
7. Large vertical movements?		✓	
8. Unpredictable movement of loads?		✓	
9. Repetitive handling?		✓	
10. Insufficient rest or recovery?		✓	
11. A work rate imposed by a process?		✓	
2 INDIVIDUAL			
Does the task:			
1. Require unusual capability?		✓	
2. Require special skills?		✓	
3. Hazard those with a health problem (e.g. back pain, hernia, etc)?		✓	
4. Require specific or protective clothing? (e.g. is clothing restrictive?)		✓	
5. Require special information/training?	✓		

Please mark appropriate column

	Yes	No	N/A
3 LOAD			
Is the load:			
1 Heavy? What weight is it? kg		✓	
2 Bulky/unwieldy?		✓	
3 Difficult to grasp?		✓	
4 Unstable/unpredictable?		✓	
5 Weight unevenly distributed?		✓	
6 Inherently harmful? (e.g. sharp/hot)		✓	

List here any actions or points raised in regard to this assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Work Equipment Assessment for Chemical Competence

Task: Chemical Competence – receipt of cleaning materials and decanting of chemicals.	Date: October 2020
Type of Assessment: Generic	
Equipment used: Spray bottles, buckets, measuring pump, trolley, etc	

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 STATUTORY REGULATIONS AND ARRANGEMENTS			
1. Have applicable regulations and statutory requirements and standards been identified?	✓		
2. Are formal arrangements in place to meet the requirements of these regulations and standards?	✓		

2 SELECTION OF WORK EQUIPMENT			
1. Is there a nominated person to ensure that appropriate work equipment is: a) Specified b) Purchased	✓		
2. Where applicable is the work equipment specified within established systems of work?	✓		
3. Where appropriate are checks made to ensure that the work equipment is fit for the purpose?	✓		
4. Are specific risks to the health and safety of any person associated with the work equipment identified?		✓	

3 MAINTENANCE			
1. <i>Are appropriate arrangements in place for monitoring the safety of work equipment?</i>	✓		
2. <i>Are appropriate arrangements in place for safe maintenance of work equipment?</i>			✓
3. <i>Are appropriate arrangements in place for the safe repair of work equipment?</i>			✓
4. <i>Are records kept of failures, especially of safety devices, their possible causes and remedial work conducted?</i>			✓
5. <i>If the machinery has a maintenance log, is the log kept up to date?</i>			✓

4 OPERATION OF WORK EQUIPMENT	Yes	No	N/A
1. Are appropriate arrangements in place to ensure work equipment is safe for use in the intended working environment?	✓		

5 WORK EQUIPMENT WITH SPECIFIC RISKS	Yes	No	N/A
1. Where work equipment is identified as having associated specific risks, is the use of such equipment restricted to specifically authorised persons? (e.g. age, qualifications)			✓
2. Is all repair, maintenance, modification and servicing of work equipment with specific risks conducted by competent persons specifically trained to perform such work?			✓

6 INFORMATION AND INSTRUCTION	Yes	No	N/A
1. Have all users and supervisors been provided with adequate written information and instruction on: a) the conditions and methods with which the work equipment may be used? b) foreseeable abnormal situations and the action to be taken if such situations occur? c) any conclusions to be drawn from experience in using the work equipment?	✓ ✓ ✓		
2. Have all users and supervisors been provided with adequate training in the above requirements?	✓		
3. Has their understanding of the information, instruction and training been assessed?	✓		

List here any actions or points raised in regard to the assessment:	
Assessment completed by: Name 1: Gohar Khan FM Performance Manager Name 2: Jean Fordie Supervisor Name 3: Robert Meikle FM Manager	Date: May 2017

Personal Protective Equipment For Chemical Competence

Task: Chemical Competence – receipt of cleaning materials and decanting of chemicals.	Date: October 2020
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Type of Assessment: Generic

List names of employees subject to this risk assessment - Cleaning Staff

	Please mark appropriate column
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Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
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1 ACTIVITY			
1. Has a general risk assessment been carried out for this activity?	✓		
2. Have assessments for any other legislation been carried out for this activity?	✓		
3. Have all identified control measures been applied?	✓		
4. Have the areas of the body that require protection been identified? If YES, list parts of body to be protected: eyes, hands	✓		

2 PERSONAL PROTECTIVE EQUIPMENT			
1. Has suitable PPE been identified and purchased?	✓		
2. Have individuals been supplied with PPE where required?	✓		
3. Have individuals received information and instruction on the use of the PPE?	✓		
4. Is the PPE being worn where necessary?	✓		
5. Are there any signs and notices to mark PPE zones?	✓		
6. Are regular checks made to ensure that PPE is worn where required?	✓		
7. Are additional supplies of PPE available?	✓		
8. Do employees know how to obtain replacement PPE?	✓		
9. Is all the PPE supplied free of charge?	✓		

List here any actions or points raised in regard to this assessment:

Assessment completed by: Name 1: [redacted] – South West Locality Manager Name 2: [redacted] – South West Team Leader Name 3: [redacted] – South West Team Leader	Date: October 2020

Task Risk Assessment

Suction Cleaning

Task Suction Cleaning	Date: October 2020
Type of Assessment: Generic	
Employee group subject of risk assessment - Cleaning Staff	
Describe briefly the work activity subject to risk assessment Suction cleaning involves the use of a suction cleaner (upright or tub) that is used to remove dry soiling from hard or soft floor coverings and furnishings. This requires the suction cleaner to be brought from storage, used to clean and returned to storage position.	
1 LOOK FOR THE HAZARDS	
List any hazards likely to affect health and safety: <ol style="list-style-type: none"> 1. Warning signs not properly displayed resulting in slip/trip/fall hazard. 2. Trailing cables resulting in slip/trip/fall hazard. 3. Manual handling hazard (sprain/strain) when using and manoeuvring equipment. 4. Electric hazard through inappropriate use of power supply. 5. Dust cloud if vacuum bag not installed correctly or over filled. 	
1 DECIDE WHO MIGHT BE HARMED AND HOW	
List groups of people at risk from the identified hazards: <ol style="list-style-type: none"> 1. Cleaning Staff 2. All building users 	
2 EVALUATE THE RISKS	
List the precautions already being taken: <ol style="list-style-type: none"> 1. Staff adequately trained to carry out the task (including manual handling issues, portable appliance testing. Checking bag at beginning and end of task and cable management) using Cleanings Induction & Training Manual 2. Correct use of warning signs. 3. Manual handling poster on display in unit detailing the correct manual handling technique. 4. Regular maintenance of equipment carried out by competent contractor. 5. Safety issues audited by Management Team on a regular basis. 6. Training effectiveness audited by Management Team on a regular basis. 	
Are the precautions adequate to reduce the risks to an acceptable level? (Yes)	✓

List the risks that are not being adequately controlled

1. None

List the further actions to be introduced to further reduce the risks

(Note: Also record who will be responsible for doing this and the planned completion date)

1. Specific risk assessments carried out on individual employees, including pregnant/nursing mothers, young people, etc.

Overall Assessment of Risk: Low

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager

Name 2: [REDACTED] – South West Team Leader

Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	YES	NO	NA
1 WORKPLACE			
1. Does the activity introduce hazards into the workplace?	✓		

2 WORK EQUIPMENT			
1. Does the work activity involve work equipment? <i>If yes, then refer to the guidance on Work Equipment and continue below. If no, then go on to the next section (Manual Handling)</i>	✓		
2. What is the equipment? Suction cleaner (upright or tub)			
3. Has an assessment of the work equipment been carried out? <i>Refer to the guidance on Work Equipment</i>	✓		
4. Does the work equipment generate noise levels so high that a person cannot be heard from a distance of approximately 2 metres without raising their voice? <i>If yes, then refer to guidance on Noise Assessment. If no, continue below.</i>		✓	
5. Is the equipment electrical? <i>If yes, refer to guidance on Work Equipment, if no continue below</i>	✓		

3 MANUAL HANDLING			
1. Does the work activity involve moving or handling objects? <i>If yes continue below. If no, then go on to the next section (People)</i>	✓		
2. Can these operations be carried out in such a way as to avoid hazardous handling? <i>If no, then refer to guidance on Manual Handling</i>	✓		

4 PEOPLE			
1. Does the activity hazard employees with a pre-existing health problem that affects their capabilities or affects the work activity?		✓	
2. Is there a risk to female employees of childbearing age?		✓	
3. Is the work activity suited to the range of capabilities of all employees involved?	✓		
4. Where necessary, have employees received relevant training?	✓		
5. Is there a potential for violence or aggression towards employees		✓	

5 PERSONAL PROTECTIVE EQUIPMENT (PPE)			
1. Do the employees involved in this activity need to use PPE? <i>If yes, refer to guidance on PPE. If no, go to the next section (Hazardous Substances)</i>		✓	

6 HAZARDOUS SUBSTANCES	YES	NO	NA
1. Does the activity involve hazardous substances, (e.g. cleaning products, wood dust, bodily fluids)? <i>If yes, continue below.</i> <i>If no, go to the next section (Fire)</i>		✓	
2. Is the hazardous substance a chemical product? <i>If yes, then refer to guidance on the Control of Substances Hazardous to Health,</i> <i>If no continue below.</i>		✓	
3. Is there likely to be contact with blood, faeces or other bodily fluids?		✓	
4. Is the correct personal protective equipment provided to minimise risk?			✓

Manual Handling Assessment For Suction Cleaning

Task Suction Cleaning	Date October 2020		
Type of Assessment: Generic			
List names of employee's subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 TASK			
Does the task involve:			
1. Lifting/lowering?	✓		
2. Pushing/pulling?	✓		
3. Stooping?	✓		
4. Holding load away from body?		✓	
5. Reaching upwards?		✓	
6. Long carrying distances?		✓	
7. Large vertical movements?		✓	
8. Unpredictable movement of loads?		✓	
9. Repetitive handling?		✓	
10. Insufficient rest or recovery?		✓	
11. A work rate imposed by a process?		✓	
2 INDIVIDUAL			
Does the task:			
1. Require unusual capability?		✓	
2. Require special skills?		✓	
3. Hazard those with a health problem (e.g. back pain, hernia, etc)?		✓	
4. Require specific or protective clothing? (e.g. is clothing restrictive?)		✓	
5. Require special information/training?	✓		

Please mark appropriate column

	Yes	No	N/A
3 LOADS			
Is the load:			
1. Heavy? What weight is it? kg		✓	
2. Bulky/unwieldy?		✓	
3. Difficult to grasp?		✓	
4. Unstable/unpredictable?		✓	
5. Weight unevenly distributed?		✓	
6. Intrinsically harmful? (e.g. sharp/hot)		✓	

List here any actions or points raised in regard to this assessment:

Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Work Equipment Assessment for Suction Cleaning

Task: Suction Cleaning	Date: October 2020
Type of Assessment: Generic	
Equipment used: suction cleaner and attachments (tub or upright)	

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 STATUTORY REGULATIONS AND ARRANGEMENTS			
1. Have applicable regulations and statutory requirements and standards been identified?	✓		
2. Are formal arrangements in place to meet the requirements of these regulations and standards?	✓		

2 SELECTION OF WORK EQUIPMENT			
1. Is there a nominated person to ensure that appropriate work equipment is: a) Specified; and b) Purchased	✓ ✓		
2. Where applicable is the work equipment specified within established systems of work?	✓		
3. Where appropriate are checks made to ensure that the work equipment is fit for the purpose?	✓		
4. Are specific risks to the health and safety of any person associated with the work equipment identified?		✓	

3 MAINTENANCE	Yes	No	N/A
1. Are appropriate arrangements in place for monitoring the safety of work equipment?	✓		
2. Are appropriate arrangements in place for safe maintenance of work equipment?	✓		
3. Are appropriate arrangements in place for the safe repair of work equipment?	✓		
4. Are records kept of failures, especially of safety devices, their possible causes and remedial work conducted?	✓		
5. If the machinery has a maintenance log, is the log kept up to date?	✓		

4 OPERATION OF WORK EQUIPMENT	Yes	No	N/A
1. Are appropriate arrangements in place to ensure work equipment is safe for use in the intended working environment?	✓		

5 WORK EQUIPMENT WITH SPECIFIC RISKS	Yes	No	N/A
1. Where work equipment is identified as having associated specific risks, is the use of such equipment restricted to specifically authorised persons? (e.g. age, qualifications)			✓
2. Is all repair, maintenance, modification and servicing of work equipment with specific risks conducted by competent persons specifically trained to perform such work?	✓		

6 INFORMATION AND INSTRUCTION	Yes	No	N/A
1. Have all users and supervisors been provided with adequate written information and instruction on:	✓		
a) the conditions and methods with which the work equipment may be used?	✓		
b) foreseeable abnormal situations and the action to be taken if such situations occur?	✓		
c) any conclusions to be drawn from experience in using the work equipment?	✓		
2. Have all users and supervisors been provided with adequate training in the above requirements?	✓		
3. Has their understanding of the information, instruction and training been assessed?	✓		

List here any actions or points raised in regard to the assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ██████████ – South West Team Leader	Date: October 2020

Task Risk Assessment for High Level Cleaning

Task High Level Cleaning	Date: October 2020
Type of Assessment: Generic	
Employee group subject of risk assessment - Cleaning Staff	
Describe briefly the work activity subject to risk assessment High level cleaning involves the wet and/or dry cleaning of areas at a level above the cleaners head, working from ground level. The work includes the use of extension tools, cloths and other cleaning tools to reach the level required. See also Risk Assessment for suction cleaning.	
1 LOOK FOR THE HAZARDS	
List any hazards likely to affect health and safety: <ol style="list-style-type: none"> 1. Warning signs not properly displayed resulting in slip/trip/fall hazard. 2. Inadequate ventilation where required. 3. Manual handling hazard if equipment is used, transported, lifted/emptied incorrectly. 4. Chemical splashes through improper use of chemical. 5. Cross contamination through failure to observe colour coding rules. 6. Trailing cables resulting in slip/trip/fall hazard. 7. Electric hazard through inappropriate use of power supply & services not covered correctly. 	
2 DECIDE WHO MIGHT BE HARMED AND HOW	
List groups of people at risk from the identified hazards: <ol style="list-style-type: none"> 1. Cleaning Staff 2. All building users 	
3 EVALUATE THE RISKS	
List the precautions already being taken: <ol style="list-style-type: none"> 1. Staff adequately trained to carry out the task (including manual handling issues, portable appliance testing, COSHH and colour coding system) using Cleaning's Induction & Training Manual. 2. Correct use of warning signs. 3. PPE supplied, including goggles when decanting chemicals and gloves when hands come into contact with cleaning solution. 4. Chemical wall chart on display in unit detailing the correct use of chemicals. 5. Manual handling poster on display in unit detailing the correct manual handling technique. 6. Staff trained to avoid over-filling buckets and trained to add chemical to water. 7. Staff trained to ventilate area if required. 8. Staff trained to cover all electrical services with masking tape and to take special care when cleaning near electrical services. 9. Safety issues audited by Management Team on a regular basis. 10. Training effectiveness audited by Management Team on a regular basis. 	
Are the precautions adequate to reduce the risks to an acceptable level? (Yes)	✓

List the risks that are not being adequately controlled
1. None

List the further actions to be introduced to further reduce the risks
(Note: Also record who will be responsible for doing this and the planned completion date)
1. Specific risk assessments carried out on individual employees, including pregnant/nursing mothers, young people, etc.

Overall Assessment of Risk: Low

Assessment completed by: Name 1: [redacted] – South West Locality Manager Name 2: [redacted] – South West Team Leader Name 3: [redacted] – South West Team Leader	Date: October 2020

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	YES	NO	NA
1 WORKPLACE			
1. Does the activity introduce hazards into the workplace?	✓		

2 WORK EQUIPMENT			
1. Does the work activity involve work equipment? <i>If yes, then refer to the guidance on Work Equipment and continue below. If no, then go on to the next section (Manual Handling)</i>	✓		
2. What is the equipment? suction cleaner, brush, scraper, high level dusting tool, dust covers, masking tape, buckets, cloths.			
2. Has an assessment of the work equipment been carried out? <i>Refer to the guidance on Work Equipment</i>	✓		
3. Does the work equipment generate noise levels so high that a person cannot be heard from a distance of approximately 2 metres without raising their voice? <i>If yes, then refer to guidance on Noise Assessment. If no, continue below.</i>		✓	
4. Is the equipment electrical? <i>If yes, refer to guidance on Work Equipment, if no continue below</i>	✓		

3 MANUAL HANDLING			
1. Does the work activity involve moving or handling objects? <i>If yes continue below. If no, then go on to the next section (People)</i>	✓		
2. Can these operations be carried out in such a way as to avoid hazardous handling? <i>If no, then refer to guidance on Manual Handling</i>	✓		

4 PEOPLE			
1. Does the activity hazard employees with a pre-existing health problem that affects their capabilities or affects the work activity?		✓	
2. Is there a risk to female employees of childbearing age?		✓	
3. Is the work activity suited to the range of capabilities of all employees involved?	✓		
4. Where necessary, have employees received relevant training?	✓		
5. Is there a potential for violence or aggression towards employees		✓	

5 PERSONAL PROTECTIVE EQUIPMENT (PPE)			
1. Do the employees involved in this activity need to use PPE? <i>If yes, refer to guidance on PPE. If no, go to the next section (Hazardous Substances)</i>	✓		

6 HAZARDOUS SUBSTANCES	YES	NO	NA
1. Does the activity involve hazardous substances, (e.g. cleaning products, wood dust, bodily fluids)? <i>If yes, continue below.</i> <i>If no, go to the next section (Fire)</i>	✓		
2. Is the hazardous substance a chemical product? <i>If yes, then refer to guidance on the Control of Substances Hazardous to Health,</i> <i>if no continue below.</i>	✓		
3. Is there likely to be contact with blood, faeces or other bodily fluids?		✓	
4. Is the correct personal protective equipment provided to minimise risk?	✓		

Manual Handling Assessment For High Level Cleaning

Task High Level Cleaning	Date October 2020		
Type of Assessment: Generic			
List names of employee's subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 TASK			
Does the task involve:			
1. Lifting/lowering?	✓		
2. Pushing/pulling?	✓		
3. Stooping?	✓		
4. Holding load away from body?	✓		
5. Reaching upwards?	✓		
6. Long carrying distances?		✓	
7. Large vertical movements?		✓	
8. Unpredictable movement of loads?		✓	
9. Repetitive handling?		✓	
10. Insufficient rest or recovery?		✓	
11. A work rate imposed by a process?		✓	
2 INDIVIDUAL			
Does the task:			
1. Require unusual capability?		✓	
2. Require special skills?		✓	
3. Hazard those with a health problem (e.g. back pain, hernia, etc)?		✓	
4. Require specific or protective clothing? (e.g. is clothing restrictive?)		✓	
5. Require special information/training?	✓		

Please mark appropriate column

	Yes	No	N/A
3 LOAD			
Is the load:			
1. Heavy? What weight is it? kg		✓	
2. Bulky/unwieldy?		✓	
3. Difficult to grasp?		✓	
4. Unstable/unpredictable?		✓	
5. Weight unevenly distributed?		✓	
6. Intrinsically harmful? (e.g. sharp/hot)		✓	

List here any actions or points raised in regard to this assessment:

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager

Name 2: [REDACTED] – South West Team Leader

Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Work Equipment Assessment For High Level Cleaning

Task High Level Cleaning	Date: October 2020
Type of Assessment: Generic	
Equipment used: Suction cleaner, brush, scraper, high level dusting tool, dust covers, masking tape, buckets, cloths.	

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 STATUTORY REGULATIONS AND ARRANGEMENTS			
1. Have applicable regulations and statutory requirements and standards been identified?	✓		
2. Are formal arrangements in place to meet the requirements of these regulations and standards?	✓		

2 SELECTION OF WORK EQUIPMENT			
1. Is there a nominated person to ensure that appropriate work equipment is: a) Specified; and b) Purchased	✓ ✓		
2. Where applicable is the work equipment specified within established systems of work?	✓		
3. Where appropriate are checks made to ensure that the work equipment is fit for the purpose?	✓		
4. Are specific risks to the health and safety of any person associated with the work equipment identified?		✓	

3 MAINTENANCE	Yes	No	N/A
1. Are appropriate arrangements in place for monitoring the safety of work equipment?	✓		
2. Are appropriate arrangements in place for safe maintenance of work equipment?	✓		
3. Are appropriate arrangements in place for the safe repair of work equipment?	✓		
4. Are records kept of failures, especially of safety devices, their possible causes and remedial work conducted?	✓		
5. If the machinery has a maintenance log, is the log kept up to date?	✓		

4 OPERATION OF WORK EQUIPMENT	Yes	No	N/A
1. Are appropriate arrangements in place to ensure work equipment is safe for use in the intended working environment?	✓		

5 WORK EQUIPMENT WITH SPECIFIC RISKS	Yes	No	N/A
1. Where work equipment is identified as having associated specific risks, is the use of such equipment restricted to specifically authorised persons? (e.g. age, qualifications)			✓
2. Is all repair, maintenance, modification and servicing of work equipment with specific risks conducted by competent persons specifically trained to perform such work?	✓		

6 INFORMATION AND INSTRUCTION	Yes	No	N/A
1. Have all users and supervisors been provided with adequate written information and instruction on: a) The conditions and methods with which the work equipment may be used? b) Foreseeable abnormal situations and the action to be taken if such situations occur? c) Any conclusions to be drawn from experience in using the work equipment?	✓ ✓ ✓		
2. Have all users and supervisors been provided with adequate training in the above requirements?	✓		
3. Has their understanding of the information, instruction and training been assessed?	✓		

List here any actions or points raised in regard to the assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Personal Protective Equipment For High Level Cleaning

Task: High Level Cleaning	Date: October 2020		
Type of Assessment: Generic			
List names of employee's subject to this risk assessment - Cleaning Staff			
			Please mark appropriate column
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 ACTIVITY			
1. Has a general risk assessment been carried out for this activity?	✓		
2. Have assessments for any other legislation been carried out for this activity?	✓		
3. Have all identified control measures been applied?	✓		
4. Have the areas of the body that require protection been identified? If YES, list parts of body to be protected: eyes, hands	✓		

2 PERSONAL PROTECTIVE EQUIPMENT			
1. Has suitable PPE been identified and purchased?	✓		
2. Have individuals been supplied with PPE where required?	✓		
3. Have individuals received information and instruction on the use of the PPE?	✓		
4. Is the PPE being worn where necessary?	✓		
5. Are there any signs and notices to mark PPE zones?	✓		
6. Are regular checks made to ensure that PPE is worn where required?	✓		
7. Are additional supplies of PPE available?	✓		
8. Do employees know how to obtain replacement PPE?	✓		
9. Is all the PPE supplied free of charge?	✓		

List here any actions or points raised in regard to this assessment:	
Assessment completed by: Name 1: [REDACTED] – South West Locality Manager Name 2: [REDACTED] – South West Team Leader Name 3: [REDACTED] – South West Team Leader	Date: October 2020

Task Risk Assessment For Wall Washing

Task: Wall Washing	Date: October 2020
Type of Assessment: Generic	
Employee group subject of risk assessment - Cleaning Staff	
Describe briefly the work activity subject to risk assessment: This task requires the use of diluted cleaning chemicals which is applied to the wall using a cloth to clean the wall. Access is gained solely from floor level.	

1 LOOK FOR THE HAZARDS

List any hazards likely to affect health and safety:

1. Warning signs not properly displayed resulting in slip/trip/fall hazard.
2. Inadequate ventilation where required.
3. Manual handling hazard if buckets used, transported, lifted/emptied incorrectly.
4. Chemical splashes through improper use of chemical.
5. Electrical hazard if electrical services not covered correctly.
6. Cross contamination through failure to observe colour coding rules.

2 DECIDE WHO MIGHT BE HARMED AND HOW

List groups of people at risk from the identified hazards:

1. Cleaning Staff
2. All building users

3 EVALUATE THE RISKS

List the precautions already being taken:

1. Staff adequately trained to carry out the task (including manual handling issues and colour coding system) using Cleanings Induction & Training Manual.
2. Correct use of warning signs.
3. PPE supplied, including goggles when decanting chemicals and gloves when hands come into contact with cleaning solution.
4. Chemical wall chart on display in unit detailing the correct use of chemicals.
5. Manual handling poster on display in unit detailing the correct manual handling technique.
6. Staff trained to cover all electrical services with masking tape and to take special care when cleaning near electrical services.
7. Staff trained to avoid over-filling buckets and trained to add chemical to water.
8. Staff trained to ventilate area if required.
9. Safety issues audited by Management Team on a regular basis.
10. Training effectiveness audited by Management Team on a regular basis.

Are the precautions adequate to reduce the risks to an acceptable level? (Yes)

✓

List the risks that are not being adequately controlled

1. None

List the further actions to be introduced to further reduce the risks

(Note: Also record who will be responsible for doing this and the planned completion date)

1. Specific risk assessments carried out on individual employees, including pregnant/nursing mothers, young people, etc.

Overall Assessment of Risk: Low

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager

Name 2: [REDACTED] – South West Team Leader

Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	YES	NO	NA
1 WORKPLACE			
1. Does the activity introduce hazards into the workplace?	✓		
2 WORK EQUIPMENT			
1. Does the work activity involve work equipment? <i>If yes, then refer to the guidance on Work Equipment and continue below.</i> <i>If no, then go on to the next section (Manual Handling)</i>	✓		
2. What is the equipment? Buckets, spray bottles, dusting equipment, cloths, etc.			
3. Has an assessment of the work equipment been carried out? <i>Refer to the guidance on Work Equipment</i>	✓		
4. Does the work equipment generate noise levels so high that a person cannot be heard from a distance of approximately 2 metres without raising their voice? <i>If yes, then refer to guidance on Noise Assessment.</i> <i>If no, continue below.</i>		✓	
5. Is the equipment electrical? <i>If yes, refer to guidance on Work Equipment,</i> <i>if no continue below</i>		✓	
3 MANUAL HANDLING			
1. Does the work activity involve moving or handling objects? <i>If yes continue below.</i> <i>If no, then go on to the next section (People)</i>	✓		
2. Can these operations be carried out in such a way as to avoid hazardous handling? <i>If no, then refer to guidance on Manual Handling</i>	✓		
4 PEOPLE			
1. Does the activity hazard employees with a pre-existing health problem that affects their capabilities or affects the work activity?		✓	
2. Is there a risk to female employees of childbearing age?		✓	
3. Is the work activity suited to the range of capabilities of all employees involved?	✓		
4. Where necessary, have employees received relevant training?	✓		
5. Is there a potential for violence or aggression towards employees		✓	

5 PERSONAL PROTECTIVE EQUIPMENT (PPE)			
1. Do the employees involved in this activity need to use PPE? <i>If yes, refer to guidance on PPE.</i> <i>If no, go to the next section (Hazardous Substances)</i>	✓		

6 HAZARDOUS SUBSTANCES	YES	NO	NA
1. Does the activity involve hazardous substances, (e.g. cleaning products, wood dust, bodily fluids)? <i>If yes, continue below.</i> <i>If no, go to the next section (Fire)</i>	✓		
2. Is the hazardous substance a chemical product? <i>If yes, then refer to guidance on the Control of Substances Hazardous to Health,</i> <i>if no continue below.</i>	✓		
3. Is there likely to be contact with blood, faeces or other bodily fluids?		✓	
4. Is the correct personal protective equipment provided to minimise risk?	✓		

Manual Handling Assessment For Wall Washing

Task Wall Washing	Date: October 2020		
Type of Assessment: Generic			
List names of employee's subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 TASK			
Does the task involve:			
1. Lifting/lowering?	✓		
2. Pushing/pulling?		✓	
3. Stooping?	✓		
4. Holding load away from body?		✓	
5. Reaching upwards?	✓		
6. Long carrying distances?		✓	
7. Large vertical movements?		✓	
8. Unpredictable movement of loads?		✓	
9. Repetitive handling?		✓	
10. Insufficient rest or recovery?		✓	
11. A work rate imposed by a process?		✓	
2 INDIVIDUAL			
Does the task:			
1. Require unusual capability?		✓	
2. Require special skills?		✓	
3. Hazard those with a health problem (e.g. back pain, hernia, etc)?		✓	
4. Require specific or protective clothing? (e.g. is clothing restrictive?)		✓	
5. Require special information/training?	✓		

Please mark appropriate column

	Yes	No	N/A
3 LOAD			
Is the load:			
1. Heavy? What weight is it? kg		✓	
2. Bulky/unwieldy?		✓	
3. Difficult to grasp?		✓	
4. Unstable/unpredictable?		✓	
5. Weight unevenly distributed?		✓	
6. Intrinsically harmful? (e.g. sharp/hot)		✓	

List here any actions or points raised in regard to this assessment:

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager

Name 2: [REDACTED] – South West Team Leader

Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Work Equipment Assessment For Wall Washing

Task Wall Washing	Date: October 2020
Type of Assessment: Generic	
Equipment used: buckets, spray bottles, suitable dusting equipment, etc.	

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 STATUTORY REGULATIONS AND ARRANGEMENTS			
1. Have applicable regulations and statutory requirements and standards been identified?	✓		
2. Are formal arrangements in place to meet the requirements of these regulations and standards?	✓		

2 SELECTION OF WORK EQUIPMENT			
1. Is there a nominated person to ensure that appropriate work equipment is: a) Specified b) Purchased	✓ ✓		
2. Where applicable is the work equipment specified within established systems of work?	✓		
3. Where appropriate are checks made to ensure that the work equipment is fit for the purpose?	✓		
4. Are specific risks to the health and safety of any person associated with the work equipment identified?		✓	

3 MAINTENANCE	Yes	No	N/A
1. Are appropriate arrangements in place for monitoring the safety of work equipment?	✓		
2. Are appropriate arrangements in place for safe maintenance of work equipment?			✓
3. Are appropriate arrangements in place for the safe repair of work equipment?			✓
4. Are records kept of failures, especially of safety devices, their possible causes and remedial work conducted?			✓
5. If the machinery has a maintenance log, is the log kept up to date?			✓

4 OPERATION OF WORK EQUIPMENT	Yes	No	N/A
1. Are appropriate arrangements in place to ensure work equipment is safe for use in the intended working environment?	✓		

5 WORK EQUIPMENT WITH SPECIFIC RISKS	Yes	No	N/A
1. Where work equipment is identified as having associated specific risks, is the use of such equipment restricted to specifically authorised persons? (e.g. age, qualifications)			✓
2. Is all repair, maintenance, modification and servicing of work equipment with specific risks conducted by competent persons specifically trained to perform such work?			✓

6 INFORMATION AND INSTRUCTION	Yes	No	N/A
1. Have all users and supervisors been provided with adequate written information and instruction on: a) The conditions and methods with which the work equipment may be used? b) Foreseeable abnormal situations and the action to be taken if such situations occur? c) Any conclusions to be drawn from experience in using the work equipment?	✓ ✓ ✓		
2. Have all users and supervisors been provided with adequate training in the above requirements?	✓		
3. Has their understanding of the information, instruction and training been assessed?	✓		

List here any actions or points raised in regard to the assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Personal Protective Equipment For Wall Washing

Task: Wall Washing	Date: October 2020		
Type of Assessment: Generic			
List names of employee's subject to this risk assessment - Cleaning Staff			
			Please mark appropriate column
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 ACTIVITY			
1 Has a general risk assessment been carried out for this activity?	✓		
2 Have assessments for any other legislation been carried out for this activity?	✓		
3 Have all identified control measures been applied?	✓		
4 Have the areas of the body that require protection been identified? If YES, list parts of body to be protected: eyes, hands	✓		

2 PERSONAL PROTECTIVE EQUIPMENT			
1 Has suitable PPE been identified and purchased?	✓		
2 Have individuals been supplied with PPE where required?	✓		
3 Have individuals received information and instruction on the use of the PPE?	✓		
4 Is the PPE being worn where necessary?	✓		
5 Are there any signs and notices to mark PPE zones?	✓		
6 Are regular checks made to ensure that PPE is worn where required?	✓		
7 Are additional supplies of PPE available?	✓		
8 Do employees know how to obtain replacement PPE?	✓		
9 Is all the PPE supplied free of charge?	✓		

List here any actions or points raised in regard to this assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Task Risk Assessment For Window Cleaning

Task: Window Cleaning	Date: October 2020
Type of Assessment: Generic	
Employee group subject of risk assessment - Cleaning Staff	
Describe briefly the work activity subject to risk assessment This task requires the use of diluted cleaning chemicals which is applied to the window using a cloth/leather to clean the window. Access is gained solely from floor level.	

1 LOOK FOR THE HAZARDS
List any hazards likely to affect health and safety: <ol style="list-style-type: none"> 1 Warning signs not properly displayed resulting in slip/trip/fall hazard. 2 Inadequate ventilation where required. 3 Manual handling hazard if equipment is used, transported, lifted/emptied incorrectly. 4 Chemical splashes through improper use of chemical. 5 Cross contamination through failure to observe colour coding rules.

2 DECIDE WHO MIGHT BE HARMED AND HOW
List groups of people at risk from the identified hazards: <ol style="list-style-type: none"> 1 Cleaning Staff 2 All building users

3 EVALUATE THE RISKS	
List the precautions already being taken: <ol style="list-style-type: none"> 1. Staff adequately trained to carry out the task (including manual handling issues, portable appliance testing and colour coding system) using Cleaning's Induction & Training Manual. 2. Correct use of warning signs. 3. PPE supplied, including goggles when decanting chemicals and gloves when hands come into contact with cleaning solution. 4. Chemical wall chart on display in unit detailing the correct use of chemicals. 5. Manual handling poster on display in unit detailing the correct manual handling technique. 6. Staff trained to avoid over-filling buckets and trained to add chemical to water. 7. Staff trained to ventilate area if required. 8. Safety issues audited by Management Team on a regular basis. 9. Training effectiveness audited by Management Team on a regular basis. 	
Are the precautions adequate to reduce the risks to an acceptable level? (Yes)	✓

List the risks that are not being adequately controlled

1 None

List the further actions to be introduced to further reduce the risks

(Note: Also record who will be responsible for doing this and the planned completion date)

1. Specific risk assessments carried out on individual employees, including pregnant/nursing mothers, young people, etc.

Overall Assessment of Risk: Low

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager

Name 2: [REDACTED] – South West Team Leader

Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	YES	NO	NA
1 WORKPLACE			
1. Does the activity introduce hazards into the workplace?	✓		
2 WORK EQUIPMENT			
1. Does the work activity involve work equipment? <i>If yes, then refer to the guidance on Work Equipment and continue below If no, then go on to the next section (Manual Handling)</i>	✓		
2. What is the equipment? Buckets, cloths, leathers, extension poles, applicator, sponge, etc.			
3. Has an assessment of the work equipment been carried out? <i>Refer to the guidance on Work Equipment</i>	✓		
4. Does the work equipment generate noise levels so high that a person cannot be heard from a distance of approximately 2 metres without raising their voice? <i>If yes, then refer to guidance on Noise Assessment. If no, continue below.</i>		✓	
5. Is the equipment electrical? <i>If yes, refer to guidance on Work Equipment, if no continue below</i>		✓	
3 MANUAL HANDLING			
1. Does the work activity involve moving or handling objects? <i>If yes continue below. If no, then go on to the next section (People)</i>	✓		
2. Can these operations be carried out in such a way as to avoid hazardous handling? <i>If no, then refer to guidance on Manual Handling</i>	✓		
4 PEOPLE			
1. Does the activity hazard employees with a pre-existing health problem that affects their capabilities or affects the work activity?		✓	
2. Is there a risk to female employees of childbearing age?		✓	
3. Is the work activity suited to the range of capabilities of all employees involved?	✓		
4. Where necessary, have employees received relevant training?	✓		
5. Is there a potential for violence or aggression towards employees?		✓	
5 PERSONAL PROTECTIVE EQUIPMENT (PPE)			
1. Do the employees involved in this activity need to use PPE? <i>If yes, refer to guidance on PPE. If no, go to the next section (Hazardous Substances)</i>	✓		

6 HAZARDOUS SUBSTANCES	YES	NO	NA
1. Does the activity involve hazardous substances, (e.g. cleaning products, wood dust, and bodily fluids)? <i>If yes, continue below.</i> <i>If no, go to the next section (Fire)</i>	✓		
2. Is the hazardous substance a chemical product? <i>If yes, then refer to guidance on the Control of Substances Hazardous to Health,</i> <i>If no continue below.</i>	✓		
3. Is there likely to be contact with blood, faeces or other bodily fluids?		✓	
4. Is the correct personal protective equipment provided to minimise risk?	✓		

Manual Handling Assessment For Window Cleaning

Task: Window Cleaning	Date: October 2020		
Type of Assessment: Generic			
List names of employee's subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 TASK			
Does the task involve:			
1. Lifting/lowering?	✓		
2. Pushing/pulling?		✓	
3. Stooping?	✓		
4. Holding load away from body?		✓	
5. Reaching upwards?	✓		
6. Long carrying distances?		✓	
7. Large vertical movements?		✓	
8. Unpredictable movement of loads?		✓	
9. Repetitive handling?		✓	
10. Insufficient rest or recovery?		✓	
11. A work rate imposed by a process?		✓	
2 INDIVIDUAL			
Does the task:			
1. Require unusual capability?		✓	
2. Require special skills?		✓	
3. Hazard those with a health problem (e.g. back pain, hernia, etc)?		✓	
4. Require specific or protective clothing? (e.g. is clothing restrictive?)		✓	
5. Require special information/training?	✓		

Please mark appropriate column

	Yes	No	N/A
3 LOAD			
Is the load:			
1. Heavy? What weight is it? kg		✓	
2. Bulky/unwieldy?		✓	
3. Difficult to grasp?		✓	
4. Unstable/unpredictable?		✓	
5. Weight unevenly distributed?		✓	
6. Intrinsically harmful? (e.g. sharp/hot)		✓	

List here any actions or points raised in regard to this assessment:

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager

Name 2: [REDACTED] – South West Team Leader

Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Work Equipment Assessment For Window Cleaning

Task: Window Cleaning	Date: October 2020
Type of Assessment: Generic	
Equipment used: Buckets, cloths, leathers, extension poles, applicators, sponges, etc.	

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 STATUTORY REGULATIONS AND ARRANGEMENTS			
1. Have applicable regulations and statutory requirements and standards been identified?	✓		
2. Are formal arrangements in place to meet the requirements of these regulations and standards?	✓		

2 SELECTION OF WORK EQUIPMENT			
1. Is there a nominated person to ensure that appropriate work equipment is: a) Specified b) Purchased	✓		
2. Where applicable is the work equipment specified within established systems of work?	✓		
3. Where appropriate are checks made to ensure that the work equipment is fit for the purpose?	✓		
4. Are specific risks to the health and safety of any person associated with the work equipment identified?		✓	

3 MAINTENANCE			
1. Are appropriate arrangements in place for monitoring the safety of work equipment?	✓		
2. Are appropriate arrangements in place for safe maintenance of work equipment?			✓
3. Are appropriate arrangements in place for the safe repair of work equipment?			✓
4. Are records kept of failures, especially of safety devices, their possible causes and remedial work conducted?			✓
5. If the machinery has a maintenance log, is the log kept up to date?			✓

4 OPERATION OF WORK EQUIPMENT	Yes	No	N/A
1. Are appropriate arrangements in place to ensure work equipment is safe for use in the intended working environment?	✓		

5 WORK EQUIPMENT WITH SPECIFIC RISKS	Yes	No	N/A
1. Where work equipment is identified as having associated specific risks, is the use of such equipment restricted to specifically authorised persons? (e.g. age, qualifications)			✓
2. Is all repair, maintenance, modification and servicing of work equipment with specific risks conducted by competent persons specifically trained to perform such work?			✓

6 INFORMATION AND INSTRUCTION	Yes	No	N/A
1. Have all users and supervisors been provided with adequate written information and instruction on: a) The conditions and methods with which the work equipment may be used? b) Foreseeable abnormal situations and the action to be taken if such situations occur? c) Any conclusions to be drawn from experience in using the work equipment?	✓ ✓ ✓		
2. Have all users and supervisors been provided with adequate training in the above requirements?	✓		
3. Has their understanding of the information, instruction and training been assessed?	✓		

List here any actions or points raised in regard to the assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Personal Protective Equipment For Window Cleaning

Task: Window Cleaning	Date: October 2020		
Type of Assessment: Generic			
List names of employee's subject to this risk assessment - Cleaning Staff			
			Please mark appropriate column
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance			
1 ACTIVITY	Yes	No	N/A
1. Has a general risk assessment been carried out for this activity?	✓		
2. Have assessments for any other legislation been carried out for this activity?	✓		
3. Have all identified control measures been applied?	✓		
4. Have the areas of the body that require protection been identified? If YES, list parts of body to be protected: hands, eyes	✓		

2 PERSONAL PROTECTIVE EQUIPMENT			
1. Has suitable PPE been identified and purchased?	✓		
2. Have individuals been supplied with PPE where required?	✓		
3. Have individuals received information and instruction on the use of the PPE?	✓		
4. Is the PPE being worn where necessary?	✓		
5. Are there any signs and notices to mark PPE zones?	✓		
6. Are regular checks made to ensure that PPE is worn where required?	✓		
7. Are additional supplies of PPE available?	✓		
8. Do employees know how to obtain replacement PPE?	✓		
9. Is all the PPE supplied free of charge?	✓		

List here any actions or points raised in regard to this assessment:	
Assessment completed by: Name 1: [REDACTED] – South West Locality Manager Name 2: [REDACTED] – South West Team Leader Name 3: [REDACTED] – South West Team Leader	Date: October 2020

Task Risk Assessment For Pressure Washing

Task: Pressure Washing	Date: October 2020
Type of Assessment: Generic	
Employee group subject of risk assessment - Cleaning Staff	
Describe briefly the work activity subject to risk assessment This task involves the use of a pressure washer, applying water only to dislodge dirt and debris. Please also see Task Risk Assessment A6.	

1 LOOK FOR THE HAZARDS

List any hazards likely to affect health and safety:

1. Warning signs not properly displayed resulting in slip/trip/fall hazard.
2. Inadequate ventilation where required.
3. Manual handling hazard if equipment is used, transported, lifted/emptied incorrectly.
4. Splashes to eyes with pressurised water.
5. Trailing cables resulting in slip/trip/fall hazard.
6. Electric hazard through inappropriate use/protection of power supply.

2 DECIDE WHO MIGHT BE HARMED AND HOW

List groups of people at risk from the identified hazards:

1. Cleaning Staff
2. All building users

3 EVALUATE THE RISKS

List the precautions already being taken:

1. Staff adequately trained to carry out the task (including manual handling issues, portable appliance testing and colour coding system) using Cleaning's Induction & Training Manual.
2. Correct use of warning signs.
3. PPE supplied, including goggles.
4. Staff trained to protect power sockets.
5. Manual handling poster on display in unit detailing the correct manual handling technique.
6. Staff supplied with R.C.D.
7. Staff trained to ventilate area if required.
8. Safety issues audited by Management Team on a regular basis.
9. Training effectiveness audited by Management Team on a regular basis.
10. Equipment maintenance carried out by a competent contractor.

Are the precautions adequate to reduce the risks to an acceptable level? (Yes)



List the risks that are not being adequately controlled

1. None

List the further actions to be introduced to further reduce the risks

(Note: Also record who will be responsible for doing this and the planned completion date)

1. Specific risk assessments carried out on individual employees, including pregnant/nursing mothers, young people, etc.

Overall Assessment of Risk: Low

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager

Name 2: [REDACTED] – South West Team Leader

Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	YES	NO	NA
1 WORKPLACE			
1. Does the activity introduce hazards into the workplace?	✓		
2 WORK EQUIPMENT			
1. Does the work activity involve work equipment? <i>If yes, then refer to the guidance on Work Equipment and continue below. If no, then go on to the next section (Manual Handling)</i>	✓		
2. What is the equipment? Pressure washer			
3. Has an assessment of the work equipment been carried out? <i>Refer to the guidance on Work Equipment</i>	✓		
4. Does the work equipment generate noise levels so high that a person cannot be heard from a distance of approximately 2 metres without raising their voice? <i>If yes, then refer to guidance on Noise Assessment. If no, continue below.</i>		✓	
5. Is the equipment electrical? <i>If yes, refer to guidance on Work Equipment, If no continue below</i>	✓		
3 MANUAL HANDLING			
1. Does the work activity involve moving or handling objects? <i>If yes continue below. If no, then go on to the next section (People)</i>	✓		
2. Can these operations be carried out in such a way as to avoid hazardous handling? <i>If no, then refer to guidance on Manual Handling</i>	✓		
4 PEOPLE			
1. Does the activity hazard employees with a pre-existing health problem that affects their capabilities or affects the work activity?		✓	
2. Is there a risk to female employees of childbearing age?		✓	
3. Is the work activity suited to the range of capabilities of all employees involved?	✓		
4. Where necessary, have employees received relevant training?	✓		
5. Is there a potential for violence or aggression towards employees		✓	
5 PERSONAL PROTECTIVE EQUIPMENT (PPE)			
1. Do the employees involved in this activity need to use PPE? <i>If yes, refer to guidance on PPE. If no, go to the next section (Hazardous Substances)</i>	✓		

6 HAZARDOUS SUBSTANCES	YES	NO	NA
1. Does the activity involve hazardous substances, (e.g. cleaning products, wood dust, bodily fluids)? <i>If yes, continue below.</i> <i>If no, go to the next section (Fire)</i>		✓	
2. Is the hazardous substance a chemical product? <i>If yes, then refer to guidance on the Control of Substances Hazardous to Health,</i> <i>If no continue below.</i>			✓
3. Is there likely to be contact with blood, faeces or other bodily fluids?			✓
4. Is the correct personal protective equipment provided to minimise risk?	✓		

Manual Handling Assessment For Pressure Washing

Task: Pressure Washing	Date: October 2020		
Type of Assessment: Generic			
List names of employee's subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1. TASK			
Does the task involve:			
1. Lifting/lowering?	✓		
2. Pushing/pulling?	✓		
3. Stooping?	✓		
4. Holding load away from body?		✓	
5. Reaching upwards?	✓		
6. Long carrying distances?		✓	
7. Large vertical movements?		✓	
8. Unpredictable movement of loads?		✓	
9. Repetitive handling?		✓	
10. Insufficient rest or recovery?		✓	
11. A work rate imposed by a process?		✓	
2 INDIVIDUAL			
Does the task:			
1. Require unusual capability?		✓	
2. Require special skills?		✓	
3. Hazard those with a health problem (e.g. back pain, hernia, etc)?		✓	
4. Require specific or protective clothing? (e.g. is clothing restrictive?)		✓	
5. Require special information/training?	✓		

Please mark appropriate column

	Yes	No	N/A
3 LOAD			
Is the load:			
1. Heavy? What weight is it? kg		✓	
2. Bulky/unwieldy?		✓	
3. Difficult to grasp?		✓	
4. Unstable/unpredictable?		✓	
5. Weight unevenly distributed?		✓	
6. Intrinsically harmful? (e.g. sharp/hot)		✓	

List here any actions or points raised in regard to this assessment:

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager

Name 2: [REDACTED] – South West Team Leader

Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Work Equipment Assessment For Pressure Washing

Task: Pressure Washing	Date: October 2020
Type of Assessment: Generic	
Equipment used: Pressure washer, wands, hoses, protective covers, wet suction machine.	

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 STATUTORY REGULATIONS AND ARRANGEMENTS			
1. Have applicable regulations and statutory requirements and standards been identified?	✓		
2. Are formal arrangements in place to meet the requirements of these regulations and standards?	✓		

2 SELECTION OF WORK EQUIPMENT			
1. Is there a nominated person to ensure that appropriate work equipment is: a) Specified b) Purchased	✓ ✓		
2. Where applicable is the work equipment specified within established systems of work?	✓		
3. Where appropriate are checks made to ensure that the work equipment is fit for the purpose?	✓		
4. Are specific risks to the health and safety of any person associated with the work equipment identified?		✓	

3 MAINTENANCE			
1. Are appropriate arrangements in place for monitoring the safety of work equipment?	✓		
2. Are appropriate arrangements in place for safe maintenance of work equipment?	✓		
3. Are appropriate arrangements in place for the safe repair of work equipment?	✓		
4. Are records kept of failures, especially of safety devices, their possible causes and remedial work conducted?	✓		
5. If the machinery has a maintenance log, is the log kept up to date?	✓		

4 OPERATION OF WORK EQUIPMENT	Yes	No	N/A
1. Are appropriate arrangements in place to ensure work equipment is safe for use in the intended working environment?	✓		

5 WORK EQUIPMENT WITH SPECIFIC RISKS	Yes	No	N/A
1. Where work equipment is identified as having associated specific risks, is the use of such equipment restricted to specifically authorised persons? (e.g. age, qualifications)			✓
2. Is all repair, maintenance, modification and servicing of work equipment with specific risks conducted by competent persons specifically trained to perform such work?			✓

6 INFORMATION AND INSTRUCTION	Yes	No	N/A
1. Have all users and supervisors been provided with adequate written information and instruction on: <ul style="list-style-type: none"> a) The conditions and methods with which the work equipment may be used? b) Foreseeable abnormal situations and the action to be taken if such situations occur? c) Any conclusions to be drawn from experience in using the work equipment? 	<ul style="list-style-type: none"> ✓ ✓ ✓ 		
2. Have all users and supervisors been provided with adequate training in the above requirements?	✓		
3. Has their understanding of the information, instruction and training been assessed?	✓		

List here any actions or points raised in regard to the assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Personal Protective Equipment For Pressure Washing

Task: Pressure Washing	Date: October 2020		
Type of Assessment: Generic			
List names of employee's subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 ACTIVITY			
1. Has a general risk assessment been carried out for this activity?	✓		
2. Have assessments for any other legislation been carried out for this activity?	✓		
3. Have all identified control measures been applied?	✓		
4. Have the areas of the body that require protection been identified?	✓		
5. If YES, list parts of body to be protected: eyes			

2 PERSONAL PROTECTIVE EQUIPMENT			
1. Has suitable PPE been identified and purchased?	✓		
2. Have individuals been supplied with PPE where required?	✓		
3. Have individuals received information and instruction on the use of the PPE?	✓		
4. Is the PPE being worn where necessary?	✓		
5. Are there any signs and notices to mark PPE zones?	✓		
6. Are regular checks made to ensure that PPE is worn where required?	✓		
7. Are additional supplies of PPE available?	✓		
8. Do employees know how to obtain replacement PPE?	✓		
9. Is all the PPE supplied free of charge?	✓		

List here any actions or points raised in regard to this assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Task Risk Assessment For Steam Cleaning

Task: Steam Cleaning	Date: October 2020
Type of Assessment: Generic	
Employee group subject of risk assessment - Cleaning Staff	
Describe briefly the work activity subject to risk assessment This task involves the use of a Steam cleaner, applying water/steam to dislodge dirt and debris	

1 LOOK FOR THE HAZARDS
<p>List any hazards likely to affect health and safety:</p> <ol style="list-style-type: none"> 1. Warning signs not properly displayed resulting in slip/trip/fall hazard. 2. Inadequate ventilation where required. 3. Manual handling hazard if equipment is used, transported, lifted/emptied incorrectly. 4. Splashes to eyes with pressurised water. 5. Splashes to eye with chemical 6. Trailing cables resulting in slip/trip/fall hazard. 7. Electric hazard through inappropriate use/protection of power supply.

2 DECIDE WHO MIGHT BE HARMED AND HOW
<p>List groups of people at risk from the identified hazards:</p> <ol style="list-style-type: none"> 1. Cleaning Staff 2. All building users

3 EVALUATE THE RISKS	
<p>List the precautions already being taken:</p> <ol style="list-style-type: none"> 1. Staff adequately trained to carry out the task (including manual handling issues, portable appliance testing and colour coding system) using Cleaning's Induction & Training Manual. 2. Correct use of warning signs. 3. PPE supplied, including goggles. 4. Staff trained to protect power sockets. 5. Manual handling poster on display in unit detailing the correct manual handling technique. 6. Staff trained to ventilate area if required. 7. Safety issues audited by Management Team on a regular basis. 8. Training effectiveness audited by Management Team on a regular basis. 9. Equipment maintenance carried out by a competent contractor. 10. RCD's used during this task 	
Are the precautions adequate to reduce the risks to an acceptable level? (Yes)	✓

List the risks that are not being adequately controlled

1. None

List the further actions to be introduced to further reduce the risks

(Note: Also record who will be responsible for doing this and the planned completion date)

1. Specific risk assessments carried out on individual employees, including pregnant/nursing mothers, young people, etc.

Overall Assessment of Risk: Low

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager

Name 2: [REDACTED] – South West Team Leader

Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	YES	NO	NA
1 WORKPLACE			
1. Does the activity introduce hazards into the workplace?	✓		
2 WORK EQUIPMENT			
1. Does the work activity involve work equipment? <i>If yes, then refer to the guidance on Work Equipment and continue below. If no, then go on to the next section (Manual Handling)</i>	✓		
2. What is the equipment? Pressure washer			
3. Has an assessment of the work equipment been carried out? <i>Refer to the guidance on Work Equipment</i>	✓		
4. Does the work equipment generate noise levels so high that a person cannot be heard from a distance of approximately 2 metres without raising their voice? <i>If yes, then refer to guidance on Noise Assessment. If no, continue below.</i>		✓	
5. Is the equipment electrical? <i>If yes, refer to guidance on Work Equipment, If no continue below</i>	✓		
3 MANUAL HANDLING			
1. Does the work activity involve moving or handling objects? <i>If yes continue below. If no, then go on to the next section (People)</i>	✓		
2. Can these operations be carried out in such a way as to avoid hazardous handling? <i>If no, then refer to guidance on Manual Handling</i>	✓		
4 PEOPLE			
1. Does the activity hazard employees with a pre-existing health problem that affects their capabilities or affects the work activity?		✓	
2. Is there a risk to female employees of childbearing age?		✓	
3. Is the work activity suited to the range of capabilities of all employees involved?	✓		
4. Where necessary, have employees received relevant training?	✓		
5. Is there a potential for violence or aggression towards employees		✓	
5 PERSONAL PROTECTIVE EQUIPMENT (PPE)			
1. Do the employees involved in this activity need to use PPE? <i>If yes, refer to guidance on PPE. If no, go to the next section (Hazardous Substances)</i>	✓		

6 HAZARDOUS SUBSTANCES	YES	NO	NA
1. Does the activity involve hazardous substances, (e.g. cleaning products, wood dust, bodily fluids)? <i>If yes, continue below.</i> <i>If no, go to the next section (Fire)</i>	✓		
2. Is the hazardous substance a chemical product? <i>If yes, then refer to guidance on the Control of Substances Hazardous to Health,</i> <i>If no continue below.</i>	✓		
3. Is there likely to be contact with blood, faeces or other bodily fluids?		✓	
4. Is the correct personal protective equipment provided to minimise risk?	✓		

Manual Handling Assessment For Steam Cleaning

Task: Steam Cleaning	Date: October 2020		
Type of Assessment: Generic			
List names of employee's subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 TASK			
Does the task involve:			
1. Lifting/lowering?	✓		
2. Pushing/pulling?	✓		
3. Stooping?	✓		
4. Holding load away from body?	✓		
5. Reaching upwards?	✓		
6. Long carrying distances?		✓	
7. Large vertical movements?		✓	
8. Unpredictable movement of loads?		✓	
9. Repetitive handling?		✓	
10. Insufficient rest or recovery?		✓	
11. A work rate imposed by a process?		✓	
2 INDIVIDUAL			
Does the task:			
1. Require unusual capability?		✓	
2. Require special skills?		✓	
3. Hazard those with a health problem (e.g. back pain, hernia, etc)?		✓	
4. Require specific or protective clothing? (e.g. is clothing restrictive?)		✓	
5. Require special information/training?	✓		

Please mark appropriate column

	Yes	No	N/A
3 LOAD			
Is the load:			
1. Heavy? What weight is it? kg		✓	
2. Bulky/unwieldy?		✓	
3. Difficult to grasp?		✓	
4. Unstable/unpredictable?		✓	
5. Weight unevenly distributed?		✓	
6. Inherently harmful? (e.g. sharp/hot)		✓	

List here any actions or points raised in regard to this assessment:

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager

Name 2: [REDACTED] – South West Team Leader

Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Work Equipment Assessment For Steam Cleaning

Task: Steam Cleaning	Date: October 2020
Type of Assessment: Generic	
Equipment used: Pressure washer, wands, hoses, protective covers, wet suction machine.	

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 STATUTORY REGULATIONS AND ARRANGEMENTS			
1. Have applicable regulations and statutory requirements and standards been identified?	✓		
2. Are formal arrangements in place to meet the requirements of these regulations and standards?	✓		

2 SELECTION OF WORK EQUIPMENT			
1. Is there a nominated person to ensure that appropriate work equipment is: a) Specified b) Purchased	✓ ✓		
2. Where applicable is the work equipment specified within established systems of work?	✓		
3. Where appropriate are checks made to ensure that the work equipment is fit for the purpose?	✓		
4. Are specific risks to the health and safety of any person associated with the work equipment identified?		✓	

3 MAINTENANCE	Yes	No	N/A
1. Are appropriate arrangements in place for monitoring the safety of work equipment?	✓		
2. Are appropriate arrangements in place for safe maintenance of work equipment?	✓		
3. Are appropriate arrangements in place for the safe repair of work equipment?	✓		
4. Are records kept of failures, especially of safety devices, their possible causes and remedial work conducted?	✓		
5. If the machinery has a maintenance log, is the log kept up to date?	✓		

4 OPERATION OF WORK EQUIPMENT	Yes	No	N/A
1. Are appropriate arrangements in place to ensure work equipment is safe for use in the intended working environment?	✓		

5 WORK EQUIPMENT WITH SPECIFIC RISKS	Yes	No	N/A
1. Where work equipment is identified as having associated specific risks, is the use of such equipment restricted to specifically authorised persons? (e.g. age, qualifications)			✓
2. Is all repair, maintenance, modification and servicing of work equipment with specific risks conducted by competent persons specifically trained to perform such work?			✓

6 INFORMATION AND INSTRUCTION	Yes	No	N/A
1. Have all users and supervisors been provided with adequate written information and instruction on: a) The conditions and methods with which the work equipment may be used? b) Foreseeable abnormal situations and the action to be taken if such situations occur? c) Any conclusions to be drawn from experience in using the work equipment?	✓ ✓ ✓		
2. Have all users and supervisors been provided with adequate training in the above requirements?	✓		
3. Has their understanding of the information, instruction and training been assessed?	✓		

List here any actions or points raised in regard to the assessment:	
Assessment completed by: Name 1: ██████ – South West Locality Manager Name 2: ██████ – South West Team Leader Name 3: ██████ – South West Team Leader	Date: October 2020

Personal Protective Equipment For Steam Cleaning

Task: Steam Cleaning	Date: October 2020		
Type of Assessment: Generic			
List names of employee's subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 ACTIVITY			
1. Has a general risk assessment been carried out for this activity?	✓		
2. Have assessments for any other legislation been carried out for this activity?	✓		
3. Have all identified control measures been applied?	✓		
4. Have the areas of the body that require protection been identified? If YES, list parts of body to be protected: eyes, hands	✓		

2 PERSONAL PROTECTIVE EQUIPMENT			
1. Has suitable PPE been identified and purchased?	✓		
2. Have individuals been supplied with PPE where required?	✓		
3. Have individuals received information and instruction on the use of the PPE?	✓		
4. Is the PPE being worn where necessary?	✓		
5. Are there any signs and notices to mark PPE zones?	✓		
6. Are regular checks made to ensure that PPE is worn where required?	✓		
7. Are additional supplies of PPE available?	✓		
8. Do employees know how to obtain replacement PPE?	✓		
9. Is all the PPE supplied free of charge?	✓		

List here any actions or points raised in regard to this assessment:	
Assessment completed by: Name 1: [REDACTED] – South West Locality Manager Name 2: [REDACTED] – South West Team Leader Name 3: [REDACTED] – South West Team Leader	Date: October 2020

**Task Risk Assessment For
Dusting/ Damp Wiping/ Washing/
Polish Application**

Task: Dusting/Damp Wiping/Washing/Polish Application	Date: October 2020
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Type of Assessment: Generic

Employee group subject of risk assessment - Cleaning Staff
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Describe briefly the work activity subject to risk assessment Dusting/damp wiping/washing/polish application involves the dry removal of dust, and/or the damp removal of dust using cleaning chemicals, applied with a cloth. The cleaning agent used must be diluted in water and the buckets used must be moved and emptied.
--

1 LOOK FOR THE HAZARDS

List any hazards likely to affect health and safety: <ol style="list-style-type: none"> 1. Warning signs not properly displayed resulting in slip/trip/fall hazard. 2. Inadequate ventilation where required. 3. Manual handling hazard if buckets used, transported, lifted/emptied incorrectly. 4. Chemical splashes through improper use of chemical.

2 DECIDE WHO MIGHT BE HARMED AND HOW

List groups of people at risk from the identified hazards: <ol style="list-style-type: none"> 1. Cleaning Staff 2. All building users
--

3 EVALUATE THE RISKS

List the precautions already being taken: <ol style="list-style-type: none"> 1. Staff adequately trained to carry out the task (including manual handling issues) using Cleaning's Induction & Training Manual. 2. Correct use of warning signs. 3. PPE supplied, including goggles when decanting chemicals and gloves when hands come into contact with cleaning solution (e.g. when damp wiping and washing). 4. Chemical wall chart on display in unit detailing the correct use of chemicals. 5. Manual handling poster on display in unit detailing the correct manual handling technique. 6. Staff trained to avoid over-filling buckets and trained to add chemical to water. 7. Staff trained to ventilate area if required. 8. Staff are trained to spray polish onto cloth and not onto furniture. 9. Safety issues audited by Management Team on a regular basis. 10. Training effectiveness audited by Management Team on a regular basis.
--

Are the precautions adequate to reduce the risks to an acceptable level? (Yes)	✓
--	---

Task Risk Assessment Prompt Sheet

List the risks that are not being adequately controlled

1. None

List the further actions to be introduced to further reduce the risks

(Note: Also record who will be responsible for doing this and the planned completion date)

1. Specific risk assessments carried out on individual employees, including pregnant/nursing mothers, young people, etc.

Overall Assessment of Risk: Low

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager

Name 2: [REDACTED] – South West Team Leader

Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Task Risk Assessment Prompt Sheet

	Please mark appropriate column		
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	YES	NO	NA
1 WORKPLACE			
1. Does the activity introduce hazards into the workplace?	✓		
2 WORK EQUIPMENT			
1. Does the work activity involve work equipment? <i>If yes, then refer to the guidance on Work Equipment and continue below. If no, then go on to the next section (Manual Handling)</i>	✓		
What is the equipment? Buckets, cloths, dusters, etc.			
2. Has an assessment of the work equipment been carried out? <i>Refer to the guidance on Work Equipment</i>	✓		
3. Does the work equipment generate noise levels so high that a person cannot be heard from a distance of approximately 2 metres without raising their voice? <i>If yes, then refer to guidance on Noise Assessment. If no, continue below.</i>		✓	
4. Is the equipment electrical? <i>If yes, refer to guidance on Work Equipment, if no continue below</i>		✓	
3 MANUAL HANDLING			
1. Does the work activity involve moving or handling objects? <i>If yes continue below. If no, then go on to the next section (People)</i>	✓		
2. Can these operations be carried out in such a way as to avoid hazardous handling? <i>If no, then refer to guidance on Manual Handling</i>	✓		
4 PEOPLE			
1. Does the activity hazard employees with a pre-existing health problem that affects their capabilities or affects the work activity?		✓	
2. Is there a risk to female employees of childbearing age?		✓	
3. Is the work activity suited to the range of capabilities of all employees involved?	✓		
4. Where necessary, have employees received relevant training?	✓		
5. Is there a potential for violence or aggression towards employees		✓	
5 PERSONAL PROTECTIVE EQUIPMENT (PPE)			
1. Do the employees involved in this activity need to use PPE? <i>If yes, refer to guidance on PPE. If no, go to the next section (Hazardous Substances)</i>	✓		

Task Risk Assessment Prompt Sheet

6 HAZARDOUS SUBSTANCES	YES	NO	NA
1. Does the activity involve hazardous substances, (e.g. cleaning products, wood dust, bodily fluids)? <i>If yes, continue below.</i> <i>If no, go to the next section (Fire)</i>	✓		
2. Is the hazardous substance a chemical product? <i>If yes, then refer to guidance on the Control of Substances Hazardous to Health,</i> <i>If no continue below.</i>	✓		
3. Is there likely to be contact with blood, faeces or other bodily fluids?		✓	
4. Is the correct personal protective equipment provided to minimise risk?	✓		

Manual Handling Assessment For Dusting/ Damp Wiping/ Washing/ Polish Application

Task: Dusting/Damp Wiping/Washing/Polish Application	Date October 2020		
Type of Assessment: Generic			
List names of employee's subject to this risk assessment - Cleaning Staff			
			Please mark appropriate column
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 TASK			
Does the task involve:			
1. Lifting/lowering?	✓		
2. Pushing/pulling?		✓	
3. Stooping?	✓		
4. Holding load away from body?		✓	
5. Reaching upwards?		✓	
6. Long carrying distances?		✓	
7. Large vertical movements?		✓	
8. Unpredictable movement of loads?		✓	
9. Repetitive handling?		✓	
10. Insufficient rest or recovery?		✓	
11. A work rate imposed by a process?		✓	

4. INDIVIDUAL			
Does the task:			
1. Require unusual capability?		✓	
2. Require special skills?		✓	
3. Hazard those with a health problem (e.g. back pain, hernia, etc)?		✓	
4. Require specific or protective clothing? (e.g. is clothing restrictive?)		✓	
5. Require special information/training?		✓	

Please mark appropriate column

	Yes	No	N/A
5. LOAD			
Is the load:			
1. Heavy? What weight is it? kg		✓	
2. Bulky/unwieldy?		✓	
3. Difficult to grasp?		✓	
4. Unstable/unpredictable?		✓	
5. Weight unevenly distributed?		✓	
6. Inherently harmful? (e.g. sharp/hot)		✓	

List here any actions or points raised in regard to this assessment:

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager
 Name 2: [REDACTED] – South West Team Leader
 Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Work Equipment Assessment for Dusting/ Damp Wiping/ Washing/ Polish Application

Task: Dusting/Damp Wiping/Washing/Polish Application	Date: October 2020
Type of Assessment: Generic	
Equipment used: cloths, hand buckets	

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 STATUTORY REGULATIONS AND ARRANGEMENTS			
1. Have applicable regulations and statutory requirements and standards been identified?	✓		
2. Are formal arrangements in place to meet the requirements of these regulations and standards?	✓		

2 SELECTION OF WORK EQUIPMENT			
1. Is there a nominated person to ensure that appropriate work equipment is: a) Specified b) Purchased	✓ ✓		
2. Where applicable is the work equipment specified within established systems of work?	✓		
3. Where appropriate are checks made to ensure that the work equipment is fit for the purpose?	✓		
4. Are specific risks to the health and safety of any person associated with the work equipment identified?		✓	

3 MAINTENANCE	Yes	No	N/A
1. Are appropriate arrangements in place for monitoring the safety of work equipment?	✓		
2. Are appropriate arrangements in place for safe maintenance of work equipment?			✓
3. Are appropriate arrangements in place for the safe repair of work equipment?			✓
4. Are records kept of failures, especially of safety devices, their possible causes and remedial work conducted?			✓
5. If the machinery has a maintenance log, is the log kept up to date?			✓

Work Equipment Assessment For Dusting/ Damp Wiping/ Washing/ Polish Application

4 OPERATION OF WORK EQUIPMENT	Yes	No	N/A
1. Are appropriate arrangements in place to ensure work equipment is safe for use in the intended working environment?	✓		

5 WORK EQUIPMENT WITH SPECIFIC RISKS	Yes	No	N/A
1. Where work equipment is identified as having associated specific risks, is the use of such equipment restricted to specifically authorised persons? (e.g. age, qualifications)			✓
2. Is all repair, maintenance, modification and servicing of work equipment with specific risks conducted by competent persons specifically trained to perform such work?			✓

6 INFORMATION AND INSTRUCTION	Yes	No	N/A
1. Have all users and supervisors been provided with adequate written information and instruction on: a) The conditions and methods with which the work equipment may be used? b) Foreseeable abnormal situations and the action to be taken if such situations occur? c) Any conclusions to be drawn from experience in using the work equipment?	✓ ✓ ✓		
2. Have all users and supervisors been provided with adequate training in the above requirements?	✓		
3. Has their understanding of the information, instruction and training been assessed?	✓		

List here any actions or points raised in regard to the assessment:	
Assessment completed by: Name 1: [REDACTED] – South West Locality Manager Name 2: [REDACTED] – South West Team Leader Name 3: [REDACTED] – South West Team Leader	Date: October 2020

**Personal Protection Equipment for Dusting/
Damp Wiping/ Washing/ Polish Application**

Task Dusting/ Damp Wiping/Washing/Polish Application		Date: October 2020		
Type of Assessment: Generic				
List names of employees subject to this risk assessment - Cleaning Staff				
		Please mark appropriate column		
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance		Yes	No	N/A
1 ACTIVITY				
1. Has a general risk assessment been carried out for this activity?		✓		
2. Have assessments for any other legislation been carried out for this activity?		✓		
3. Have all identified control measures been applied?		✓		
4. Have the areas of the body that require protection been identified? If YES, list parts of body to be protected: eyes, hands		✓		

2 PERSONAL PROTECTIVE EQUIPMENT				
1. Has suitable PPE been identified and purchased?		✓		
2. Have individuals been supplied with PPE where required?		✓		
3. Have individuals received information and instruction on the use of the PPE?		✓		
4. Is the PPE being worn where necessary?		✓		
5. Are there any signs and notices to mark PPE zones?		✓		
6. Are regular checks made to ensure that PPE is worn where required?		✓		
7. Are additional supplies of PPE available?		✓		
8. Do employees know how to obtain replacement PPE?		✓		
9. Is all the PPE supplied free of charge?		✓		

List here any actions or points raised in regard to this assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

**Task Risk Assessment for Cleaning Toilets
Wash Hand Basins, Urinals, Washroom Furniture**

Task: Cleaning Toilets, Wash Hand Basins, Urinals, Washroom Furniture	Date October 2020
Type of Assessment: Generic	
Employee group subject of risk assessment - Cleaning Staff	
Describe briefly the work activity subject to risk assessment Cleaning toilets, wash hand basins, urinals and washroom furniture involves the use of a number of cleaning chemicals, applied with cloths buckets and spray bottles. Observance of colour coding is crucial.	

1 LOOK FOR THE HAZARDS
List any hazards likely to affect health and safety: <ol style="list-style-type: none"> 1. Warning signs not properly displayed resulting in slip/trip/fall hazard. 2. Inadequate ventilation where required. 3. Manual handling hazard if mop and bucket used, transported, lifted/emptied incorrectly. 4. Chemical splashes through improper use of chemical. 5. Cross contamination through failure to observe colour coding rules 6. Chemical reaction through mixing of chemicals.

2 DECIDE WHO MIGHT BE HARMED AND HOW
List groups of people at risk from the identified hazards: <ol style="list-style-type: none"> 1. Cleaning Staff 2. All building users

3 EVALUATE THE RISKS	
List the precautions already being taken: <ol style="list-style-type: none"> 1. Staff adequately trained to carry out the task (including manual handling issues and colour coding system) using Cleanings Induction & Training Manual. 2. Correct use of warning signs. 3. PPE supplied, including goggles when decanting chemicals and gloves when hands come into contact with cleaning solution (e.g. when cleaning mop and bucket). 4. Chemical wall chart on display in unit detailing the correct use of chemicals. 5. Manual handling poster on display in unit detailing the correct manual handling technique. 6. Staff trained to avoid over-filling buckets and trained to add chemical to water. 7. Staff trained to ventilate area if required. 8. Safety issues audited by Management Team on a regular basis. 9. Training effectiveness audited by Management Team on a regular basis. 	
Are the precautions adequate to reduce the risks to an acceptable level? (Yes)	✓

List the risks that are not being adequately controlled

1. None

List the further actions to be introduced to further reduce the risks

(Note: Also record who will be responsible for doing this and the planned completion date)

1. Specific risk assessments carried out on individual employees, including pregnant/nursing mothers, young people, etc.

Overall Assessment of Risk: Low

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager

Name 2: [REDACTED] – South West Team Leader

Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	YES	NO	NA
1 WORKPLACE			
1. Does the activity introduce hazards into the workplace?	✓		
2 WORK EQUIPMENT	YES	NO	NA
1. Does the work activity involve work equipment? If yes, then refer to the guidance on Work Equipment and continue below. If no, then go on to the next section (Manual Handling)	✓		
2. What is the equipment? Buckets, spray bottles, cloths, pads, brushes, etc.			
3. Has an assessment of the work equipment been carried out? <i>Refer to the guidance on Work Equipment</i>	✓		
4. Does the work equipment generate noise levels so high that a person cannot be heard from a distance of approximately 2 metres without raising their voice? <i>If yes, then refer to guidance on Noise Assessment.</i> <i>If no, continue below.</i>		✓	
5. Is the equipment electrical? <i>If yes, refer to guidance on Work Equipment,</i> <i>If no continue below</i>		✓	
3 MANUAL HANDLING	YES	NO	NA
1. Does the work activity involve moving or handling objects? <i>If yes continue below.</i> <i>If no, then go on to the next section (People)</i>	✓		
2. Can these operations be carried out in such a way as to avoid hazardous handling? <i>If no, then refer to guidance on Manual Handling</i>	✓		
4 PEOPLE	YES	NO	NA
1. Does the activity hazard employees with a pre-existing health problem that affects their capabilities or affects the work activity?		✓	
2. Is there a risk to female employees of childbearing age?		✓	
3. Is the work activity suited to the range of capabilities of all employees involved?	✓		
4. Where necessary, have employees received relevant training?	✓		
5. Is there a potential for violence or aggression towards employees		✓	
5 PERSONAL PROTECTIVE EQUIPMENT (PPE)	YES	NO	NA
1. Do the employees involved in this activity need to use PPE? <i>If yes, refer to guidance on PPE.</i> <i>If no, go to the next section (Hazardous Substances)</i>	✓		
6 HAZARDOUS SUBSTANCES	YES	NO	NA
1. Does the activity involve hazardous substances? (e.g. cleaning products, wood dust, bodily fluids)? <i>If yes, continue below.</i> <i>If no, go to the next section (Fire)</i>	✓		
2. Is the hazardous substance a chemical product? If yes, then refer to guidance on the Control of Substances Hazardous to Health If no continue below.	✓		
3. Is there likely to be contact with blood, faeces or other bodily fluids?	✓		
4. Is the correct personal protective equipment provided to minimise risk?	✓		

Manual Handling Assessment for Cleaning Toilets, Wash Hand Basins, Urinals, Washroom Furniture

Task: Cleaning toilets, wash hand basins, urinals, washroom furniture	Date October 2020		
Type of Assessment: Generic			
List names of employee's subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 TASK			
Does the task involve:			
1. Lifting/lowering?	✓		
2. Pushing/pulling?		✓	
3. Stooping?	✓		
4. Holding load away from body?		✓	
5. Reaching upwards?		✓	
6. Long carrying distances?		✓	
7. Large vertical movements?		✓	
8. Unpredictable movement of loads?		✓	
9. Repetitive handling?		✓	
10. Insufficient rest or recovery?		✓	
11. A work rate imposed by a process?		✓	
2 INDIVIDUAL			
Does the task:			
1. Require unusual capability?		✓	
2. Require special skills?		✓	
3. Hazard those with a health problem (e.g. back pain, hernia, etc)?		✓	
4. Require specific or protective clothing? (e.g. is clothing restrictive?)		✓	
5. Require special information/training?	✓		

Please mark appropriate column

	Yes	No	N/A
3 LOAD			
Is the load:			
1. Heavy? What weight is it? kg		✓	
2. Bulky/unwieldy?		✓	
3. Difficult to grasp?		✓	
4. Unstable/unpredictable?		✓	
5. Weight unevenly distributed?		✓	
6. Intrinsicly harmful? (e.g. sharp/hot)		✓	

List here any actions or points raised in regard to this assessment:

Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

**Work Equipment for Cleaning Toilets.
Wash Hand Basins, Urinals, Washroom Furniture**

Task: Cleaning toilets, wash hand basins, urinals, washroom furniture	Date: October 2020
Type of Assessment: Generic	
Equipment used: toilet brush, buckets, spray bottles, brushes, cloths.	

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 STATUTORY REGULATIONS AND ARRANGEMENTS			
1. Have applicable regulations and statutory requirements and standards been identified?	✓		
2. Are formal arrangements in place to meet the requirements of these regulations and standards?	✓		

2 SELECTION OF WORK EQUIPMENT			
1. Is there a nominated person to ensure that appropriate work equipment is: a) Specified; and b) Purchased	✓ ✓		
2. Where applicable is the work equipment specified within established systems of work?	✓		
3. Where appropriate are checks made to ensure that the work equipment is fit for the purpose?	✓		
4. Are specific risks to the health and safety of any person associated with the work equipment identified?		✓	

3 MAINTENANCE	Yes	No	N/A
1. Are appropriate arrangements in place for monitoring the safety of work equipment?	✓		
2. Are appropriate arrangements in place for safe maintenance of work equipment?			✓
3. Are appropriate arrangements in place for the safe repair of work equipment?			✓
4. Are records kept of failures, especially of safety devices, their possible causes and remedial work conducted?			✓
5. If the machinery has a maintenance log, is the log kept up to date?			✓

4 OPERATION OF WORK EQUIPMENT	Yes	No	N/A
1. Are appropriate arrangements in place to ensure work equipment is safe for use in the intended working environment?	✓		

5 WORK EQUIPMENT WITH SPECIFIC RISKS	Yes	No	N/A
1. Where work equipment is identified as having associated specific risks, is the use of such equipment restricted to specifically authorised persons? (e.g. age, qualifications)			✓
2. Is all repair, maintenance, modification and servicing of work equipment with specific risks conducted by competent persons specifically trained to perform such work?			✓

6 INFORMATION AND INSTRUCTION	Yes	No	N/A
1. Have all users and supervisors been provided with adequate written information and instruction on: a) The conditions and methods with which the work equipment may be used? b) Foreseeable abnormal situations and the action to be taken if such situations occur? c) Any conclusions to be drawn from experience in using the work equipment?	✓ ✓ ✓		
2. Have all users and supervisors been provided with adequate training in the above requirements?	✓		
3. Has their understanding of the information, instruction and training been assessed?	✓		

List here any actions or points raised in regard to the assessment:

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager
Name 2: [REDACTED] – South West Team Leader
Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Personal Protective Equipment For Cleaning Toilets, Wash Hand Basins, Urinals, Washroom Furniture

Task Cleaning toilets, wash hand basins, urinals, washroom furn	Date: October 2020		
Type of Assessment: Generic			
List names of employee's subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 ACTIVITY			
1. Has a general risk assessment been carried out for this activity?	✓		
2. Have assessments for any other legislation been carried out for this activity?	✓		
3. Have all identified control measures been applied?	✓		
4. Have the areas of the body that require protection been identified? If YES, list parts of body to be protected: eyes, hands	✓		

2 PERSONAL PROTECTIVE EQUIPMENT			
1. Has suitable PPE been identified and purchased?	✓		
2. Have individuals been supplied with PPE where required?	✓		
3. Have individuals received information and instruction on the use of the PPE?	✓		
4. Is the PPE being worn where necessary?	✓		
5. Are there any signs and notices to mark PPE zones?	✓		
6. Are regular checks made to ensure that PPE is worn where required?	✓		
7. Are additional supplies of PPE available?	✓		
8. Do employees know how to obtain replacement PPE?	✓		
9. Is all the PPE supplied free of charge?	✓		

List here any actions or points raised in regard to this assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Task Risk Assessment for Cleaning Baths Showers, Bidets & Washroom Furniture

Task: Cleaning baths, showers, bidets & washroom furniture	Date: October 2020
Type of Assessment: Generic	
Employee group subject of risk assessment - Cleaning Staff	
Describe briefly the work activity subject to risk assessment: Cleaning, baths, showers, bidets & washroom furniture involves the use of a number of cleaning chemicals, applied with cloths, buckets and spray bottles. Observance of colour coding is crucial.	

1. LOOK FOR THE HAZARDS
List any hazards likely to affect health and safety: <ol style="list-style-type: none"> 1. Warning signs not properly displayed resulting in slip/trip/fall hazard. 2. Inadequate ventilation where required. 3. Manual handling hazard if mop and bucket used, transported, lifted/emptied incorrectly. 4. Chemical splashes through improper use of chemical. 5. Cross contamination through failure to observe colour coding rules 6. Chemical reaction through mixing of chemicals.

2. DECIDE WHO MIGHT BE HARMED AND HOW
List groups of people at risk from the identified hazards: <ol style="list-style-type: none"> 1. Cleaning Staff 2. All building users

3. EVALUATE THE RISKS	
List the precautions already being taken: <ol style="list-style-type: none"> 1. Staff adequately trained to carry out the task (including manual handling issues, and colour coding system) using Cleanings Induction & Training Manual. 2. Correct use of warning signs. 3. PPE supplied, including goggles when decanting chemicals and gloves when hands come into contact with cleaning solution. 4. Chemical wall chart on display in unit detailing the correct use of chemicals. 5. Manual handling poster on display in unit detailing the correct manual handling technique. 6. Staff trained to avoid over-filling buckets and trained to add chemical to water. 7. Staff trained to ventilate area if required. 8. Safety issues audited by Management Team on a regular basis. 9. Training effectiveness audited by Management Team on a regular basis. 	
Are the precautions adequate to reduce the risks to an acceptable level? (Yes)	✓

List the risks that are not being adequately controlled

1. None
- 2.
- 3.

List the further actions to be introduced to further reduce the risks

(Note: Also record who will be responsible for doing this and the planned completion date)

1. Specific risk assessments carried out on individual employees, including pregnant/nursing mothers, young people, etc.

Overall Assessment of Risk: Low

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager
Name 2: [REDACTED] – South West Team Leader
Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	YES	NO	NA
1 WORKPLACE			
1. Does the activity introduce hazards into the workplace?	✓		
2 WORK EQUIPMENT	YES	NO	NA
1. Does the work activity involve work equipment? If yes, then refer to the guidance on Work Equipment and continue below. If no, then go on to the next section (Manual Handling)	✓		
2. What is the equipment? Buckets, spray bottles, cloths, pads, brushes, etc.			
3. Has an assessment of the work equipment been carried out? <i>Refer to the guidance on Work Equipment</i>	✓		
4. Does the work equipment generate noise levels so high that a person cannot be heard from a distance of approximately 2 metres without raising their voice? <i>If yes, then refer to guidance on Noise Assessment. If no, continue below.</i>		✓	
5. Is the equipment electrical? <i>If yes, refer to guidance on Work Equipment, If no continue below</i>		✓	
3 MANUAL HANDLING	YES	NO	NA
1. Does the work activity involve moving or handling objects? <i>If yes continue below. If no, then go on to the next section (People)</i>	✓		
2. Can these operations be carried out in such a way as to avoid hazardous handling? <i>If no, then refer to guidance on Manual Handling</i>	✓		
4 PEOPLE	YES	NO	NA
1. Does the activity hazard employees with a pre-existing health problem that affects their capabilities or affects the work activity?		✓	
2. Is there a risk to female employees of childbearing age?		✓	
3. Is the work activity suited to the range of capabilities of all employees involved?	✓		
4. Where necessary, have employees received relevant training?	✓		
5. Is there a potential for violence or aggression towards employees		✓	
5 PERSONAL PROTECTIVE EQUIPMENT (PPE)	YES	NO	NA
1. Do the employees involved in this activity need to use PPE? <i>If yes, refer to guidance on PPE. If no, go to the next section (Hazardous Substances)</i>	✓		
6 HAZARDOUS SUBSTANCES	YES	NO	NA
1. Does the activity involve hazardous substances? (e.g. cleaning products, wood dust, bodily fluids)? <i>If yes, continue below. If no, go to the next section (Fire)</i>	✓		
2. Is the hazardous substance a chemical product? If yes, then refer to guidance on the Control of Substances Hazardous to Health If no continue below.	✓		
3. Is there likely to be contact with blood, faeces or other bodily fluids?	✓		
4. Is the correct personal protective equipment provided to minimise risk?	✓		

Manual Handling Assessment for Cleaning Baths, Showers, Bidets & Washroom Furniture

Task: Cleaning baths, showers, bidets & washroom furniture	Date October 2020		
Type of Assessment: Generic			
List names of employee's subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 TASK			
Does the task involve:			
1. Lifting/lowering?	✓		
2. Pushing/pulling?		✓	
3. Stooping?	✓		
4. Holding load away from body?		✓	
5. Reaching upwards?		✓	
6. Long carrying distances?		✓	
7. Large vertical movements?		✓	
8. Unpredictable movement of loads?		✓	
9. Repetitive handling?		✓	
10. Insufficient rest or recovery?		✓	
11. A work rate imposed by a process?		✓	
2 INDIVIDUAL			
Does the task:			
1. Require unusual capability?		✓	
2. Require special skills?		✓	
3. Hazard those with a health problem (e.g. back pain, hernia, etc)?		✓	
4. Require specific or protective clothing? (e.g. is clothing restrictive?)		✓	
5. Require special information/training?	✓		

Please mark appropriate column

	Yes	No	N/A
3 LOAD			
Is the load:			
1. Heavy? What weight is it? kg		✓	
2. Bulky/unwieldy?		✓	
3. Difficult to grasp?		✓	
4. Unstable/unpredictable?		✓	
5. Weight unevenly distributed?		✓	
6. Inherently harmful? (e.g. sharp/hot)		✓	

List here any actions or points raised in regard to this assessment:

Assessment completed by:

Name 1: [redacted] – South West Locality Manager
 Name 2: [redacted] – South West Team Leader
 Name 3: [redacted] – South West Team Leader

Date: October 2020

Work Equipment Assessment for Cleaning Baths, Showers, Bidets & Washroom Furniture

Task: Cleaning baths, showers, bidets & washroom furniture	Date: October 2020
Type of Assessment: Generic	
Equipment used: buckets, spray bottles, brushes, cloths, etc.	

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 STATUTORY REGULATIONS AND ARRANGEMENTS			
1. Have applicable regulations and statutory requirements and standards been identified?	✓		
2. Are formal arrangements in place to meet the requirements of these regulations and standards?	✓		

2 SELECTION OF WORK EQUIPMENT	Yes	No	N/A
1. Is there a nominated person to ensure that appropriate work equipment is: a) Specified b) Purchased	✓ ✓		
2. Where applicable is the work equipment specified within established systems of work?	✓		
3. Where appropriate are checks made to ensure that the work equipment is fit for the purpose?	✓		
4. Are specific risks to the health and safety of any person associated with the work equipment identified?		✓	

3 MAINTENANCE	Yes	No	N/A
1. Are appropriate arrangements in place for monitoring the safety of work equipment?	✓		
2. Are appropriate arrangements in place for safe maintenance of work equipment?			✓
3. Are appropriate arrangements in place for the safe repair of work equipment?			✓
4. Are records kept of failures, especially of safety devices, their possible causes and remedial work conducted?			✓
5. If the machinery has a maintenance log, is the log kept up to date?			✓

4 OPERATION OF WORK EQUIPMENT	Yes	No	N/A
1. Are appropriate arrangements in place to ensure work equipment is safe for use in the intended working environment?	✓		

5 WORK EQUIPMENT WITH SPECIFIC RISKS	Yes	No	N/A
1. Where work equipment is identified as having associated specific risks, is the use of such equipment restricted to specifically authorised persons? (e.g. age, qualifications)			✓
2. Is all repair, maintenance, modification and servicing of work equipment with specific risks conducted by competent persons specifically trained to perform such work?			✓

6 INFORMATION AND INSTRUCTION	Yes	No	N/A
1. Have all users and supervisors been provided with adequate written information and instruction on: a) The conditions and methods with which the work equipment may be used? b) Foreseeable abnormal situations and the action to be taken if such situations occur? c) Any conclusions to be drawn from experience in using the work equipment?	✓ ✓ ✓		
2. Have all users and supervisors been provided with adequate training in the above requirements?	✓		
3. Has their understanding of the information, instruction and training been assessed?	✓		

List here any actions or points raised in regard to the assessment:	
Assessment completed by: Name 1: [REDACTED] – South West Locality Manager Name 2: [REDACTED] – South West Team Leader Name 3: [REDACTED] – South West Team Leader	Date: October 2020

Personal Protective Equipment For Cleaning Baths, Showers, Bidets & Washroom Furniture

Task Cleaning baths, showers, bidets & washroom furniture	Date: October 2020		
Type of Assessment: Generic			
List names of employees subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 ACTIVITY			
a. Has a general risk assessment been carried out for this activity?	✓		
b. Have assessments for any other legislation been carried out for this activity?	✓		
c. Have all identified control measures been applied?	✓		
d. Have the areas of the body that require protection been identified? If YES, list parts of body to be protected: eyes, hands	✓		

2 PERSONAL PROTECTIVE EQUIPMENT			
1. Has suitable PPE been identified and purchased?	✓		
2. Have individuals been supplied with PPE where required?	✓		
3. Have individuals received information and instruction on the use of the PPE?	✓		
4. Is the PPE being worn where necessary?	✓		
5. Are there any signs and notices to mark PPE zones?	✓		
6. Are regular checks made to ensure that PPE is worn where required?	✓		
7. Are additional supplies of PPE available?	✓		
8. Do employees know how to obtain replacement PPE?	✓		
9. Is all the PPE supplied free of charge?	✓		

List here any actions or points raised in regard to this assessment:	
Assessment completed by: Name 1: Gohar Khan FM Performance Manager Name 2: Jean Fordie Supervisor Name 3: Robert Meikle	Date: October 2020

Task Risk Assessment For Emptying of Waste Paper Receptacles

Task: Emptying of waste paper receptacles	Date: October 2020
Type of Assessment: Generic	
Employee group subject of risk assessment - Cleaning Staff	
Describe briefly the work activity subject to risk assessment The debris from waste paper bins is placed into a refuse sack. The bin is damp wiped inside and out with a damp cloth. When the refuse sack is full it is taken to a collection point. At the end of a shift these refuse sacks are taken to a skip or some other external collection point.	
1. LOOK FOR THE HAZARDS	
List any hazards likely to affect health and safety: <ol style="list-style-type: none"> 1. Warning signs not properly displayed resulting in slip/trip/fall hazard. 2. Inadequate ventilation where required. 3. Manual handling hazard if lift/load assessed incorrectly. 4. Cuts from items such as broken glass in bins. 5. Chemical splashes through improper use of chemical. 	
2. DECIDE WHO MIGHT BE HARMED AND HOW	
List groups of people at risk from the identified hazards: <ol style="list-style-type: none"> 1. Cleaning Staff 2. All building users 	
3. EVALUATE THE RISKS	
List the precautions already being taken: <ol style="list-style-type: none"> 1. Staff adequately trained to carry out the task (including manual handling issues) using Cleaning's Induction & Training Manual. 2. Correct use of warning signs. 3. PPE supplied, including goggles when decanting chemicals and gloves when hands come into contact with cleaning solution. 4. Chemical wall chart on display in unit detailing the correct use of chemicals. 5. Manual handling poster on display in unit detailing the correct manual handling technique. 6. Staff trained to avoid over-filling buckets and trained to add chemical to water. 7. Staff trained to ventilate area if required. 8. Safety issues audited by Management Team on a regular basis. 9. Training effectiveness audited by Management Team on a regular basis. 	
Are the precautions adequate to reduce the risks to an acceptable level? (Yes)	✓

List the risks that are not being adequately controlled

1. None

List the further actions to be introduced to further reduce the risks

(Note: Also record who will be responsible for doing this and the planned completion date)

1. Specific risk assessments carried out on individual employees, including pregnant/nursing mothers, young people, etc.

Overall Assessment of Risk: Low

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager

Name 2: [REDACTED] – South West Team Leader

Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	YES	NO	NA
1. WORKPLACE			
1. Does the activity introduce hazards into the workplace?	✓		
2. WORK EQUIPMENT			
1. Does the work activity involve work equipment? If yes, then refer to the guidance on Work Equipment and continue below. If no, then go on to the next section (Manual Handling)	✓		
2. What is the equipment? Buckets, spray bottles, cloths, refuse sacks, etc.			
3. Has an assessment of the work equipment been carried out? <i>Refer to the guidance on Work Equipment</i>	✓		
4. Does the work equipment generate noise levels so high that a person cannot be heard from a distance of approximately 2 metres without raising their voice? <i>If yes, then refer to guidance on Noise Assessment. If no, continue below.</i>		✓	
5. Is the equipment electrical? <i>If yes, refer to guidance on Work Equipment, if no continue below</i>		✓	
3. MANUAL HANDLING			
1. Does the work activity involve moving or handling objects? <i>If yes continue below. If no, then go on to the next section (People)</i>	✓		
2. Can these operations be carried out in such a way as to avoid hazardous handling? <i>If no, then refer to guidance on Manual Handling</i>	✓		
4. PEOPLE			
1. Does the activity hazard employees with a pre-existing health problem that affects their capabilities or affects the work activity?		✓	
2. Is there a risk to female employees of childbearing age?		✓	
3. Is the work activity suited to the range of capabilities of all employees involved?	✓		
4. Where necessary, have employees received relevant training?	✓		
5. Is there a potential for violence or aggression towards employees		✓	
5. PERSONAL PROTECTIVE EQUIPMENT (PPE)			
1. Do the employees involved in this activity need to use PPE? <i>If yes, refer to guidance on PPE. If no, go to the next section (Hazardous Substances)</i>	✓		
6. HAZARDOUS SUBSTANCES	YES	NO	NA
1. Does the activity involve hazardous substances, (e.g. cleaning products, wood dust, bodily fluids)? <i>If yes, continue below. If no, go to the next section (Fire)</i>	✓		
2. Is the hazardous substance a chemical product? If yes, then refer to guidance on the Control of Substances Hazardous to Health, if no continue below.	✓		
3. Is there likely to be contact with blood, faeces or other bodily fluids?		✓	
4. Is the correct personal protective equipment provided to minimise risk?	✓		

Manual Handling Assessment For Emptying of Waste Paper Receptacles

Task: Emptying of waste paper receptacles	Date: October 2020		
Type of Assessment: Generic			
List names of employees subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 TASK			
Does the task involve:			
1. Lifting/lowering?	✓		
2. Pushing/pulling?	✓		
3. Stooping?	✓		
4. Holding load away from body?		✓	
5. Reaching upwards?		✓	
6. Long carrying distances?		✓	
7. Large vertical movements?		✓	
8. Unpredictable movement of loads?		✓	
9. Repetitive handling?		✓	
10. Insufficient rest or recovery?		✓	
11. A work rate imposed by a process?		✓	
2 INDIVIDUAL			
Does the task:			
1. Require unusual capability?		✓	
2. Require special skills?		✓	
3. Hazard those with a health problem (e.g. back pain, hernia, etc)?		✓	
4. Require specific or protective clothing? (e.g. is clothing restrictive?)		✓	
5. Require special information/training?	✓		

Please mark appropriate column

	Yes	No	N/A
3 LOAD			
Is the load:			
1. Heavy? What weight is it? kg		✓	
2. Bulky/unwieldy?		✓	
3. Difficult to grasp?		✓	
4. Unstable/unpredictable?		✓	
5. Weight unevenly distributed?		✓	
6. Inherently harmful? (e.g. sharp/hot)		✓	

List here any actions or points raised in regard to this assessment:

Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ██████████ – South West Team Leader	Date: October 2020

Work Equipment Assessment for Emptying of Waste Paper Receptacles

Task: Emptying of Waste Paper Receptacles	Date: October 2020
Type of Assessment: Generic	
Equipment used: Refuse sacks, buckets, cloths etc.	

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1. STATUTORY REGULATIONS AND ARRANGEMENTS			
1. Have applicable regulations and statutory requirements and standards been identified?	✓		
2. Are formal arrangements in place to meet the requirements of these regulations and standards?	✓		

2. SELECTION OF WORK EQUIPMENT	Yes	No	N/A
1. Is there a nominated person to ensure that appropriate work equipment is: a) Specified; and b) Purchased	✓ ✓		
2. Where applicable is the work equipment specified within established systems of work?	✓		
3. Where appropriate are checks made to ensure that the work equipment is fit for the purpose?	✓		
4. Are specific risks to the health and safety of any person associated with the work equipment identified?		✓	

3. MAINTENANCE	Yes	No	N/A
1. Are appropriate arrangements in place for monitoring the safety of work equipment?	✓		
2. Are appropriate arrangements in place for safe maintenance of work equipment?			✓
3. Are appropriate arrangements in place for the safe repair of work equipment?			✓
4. Are records kept of failures, especially of safety devices, their possible causes and remedial work conducted?			✓
5. If the machinery has a maintenance log, is the log kept up to date?			✓

Work Equipment Assessment for Emptying of Waste Paper Receptacles

4. OPERATION OF WORK EQUIPMENT	Yes	No	N/A
1. Are appropriate arrangements in place to ensure work equipment is safe for use in the intended working environment?	✓		

5. WORK EQUIPMENT WITH SPECIFIC RISKS	Yes	No	N/A
1. Where work equipment is identified as having associated specific risks, is the use of such equipment restricted to specifically authorised persons? (e.g. age, qualifications)			✓
2. Is all repair, maintenance, modification and servicing of work equipment with specific risks conducted by competent persons specifically trained to perform such work?			✓

6. INFORMATION AND INSTRUCTION	Yes	No	N/A
1. Have all users and supervisors been provided with adequate written information and instruction on: a) The conditions and methods with which the work equipment may be used? b) Foreseeable abnormal situations and the action to be taken if such situations occur? c) Any conclusions to be drawn from experience in using the work equipment?	✓ ✓ ✓		
2. Have all users and supervisors been provided with adequate training in the above requirements?	✓		
3. Has their understanding of the information, instruction and training been assessed?	✓		

List here any actions or points raised in regard to the assessment:

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager
 Name 2: [REDACTED] – South West Team Leader
 Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Personal Protective Equipment For Emptying of Waste Paper Receptacles

Task Emptying of Waste Paper Receptacles	Date: October 2020		
Type of Assessment: Generic			
List names of employees subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1. ACTIVITY			
1. Has a general risk assessment been carried out for this activity?	✓		
2. Have assessments for any other legislation been carried out for this activity?	✓		
3. Have all identified control measures been applied?	✓		
4. Have the areas of the body that require protection been identified? If YES, list parts of body to be protected: eyes, hands (washing bins)	✓		

2. PERSONAL PROTECTIVE EQUIPMENT			
1. Has suitable PPE been identified and purchased?	✓		
2. Have individuals been supplied with PPE where required?	✓		
3. Have individuals received information and instruction on the use of the PPE?	✓		
4. Is the PPE being worn where necessary?	✓		
5. Are there any signs and notices to mark PPE zones?	✓		
6. Are regular checks made to ensure that PPE is worn where required?	✓		
7. Are additional supplies of PPE available?	✓		
8. Do employees know how to obtain replacement PPE?	✓		
9. Is all the PPE supplied free of charge?	✓		

List here any actions or points raised in regard to this assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

**Task Risk Assessment
Suction Cleaning – Rucksack Vacuum**

Task Suction Cleaning using a rucksack vacuum	Date: October 2020
Type of Assessment: Generic	
Employee group subject of risk assessment - Cleaning Staff	
Describe briefly the work activity subject to risk assessment Suction cleaning involves the use of a rucksack suction cleaner that is used to remove dry soiling from hard or soft floor coverings and furnishings. This requires the suction cleaner to be brought from storage, strapped onto operatives back, used to clean and returned to storage position.	
1 LOOK FOR THE HAZARDS	
List any hazards likely to affect health and safety: <ol style="list-style-type: none"> 1. Warning signs not properly displayed resulting in slip/trip/fall hazard. 2. Trailing cables resulting in slip/trip/fall hazard. 3. Manual handling hazard (sprain/strain) when using and manoeuvring equipment. 4. Electric hazard through inappropriate use of power supply. 	
2 DECIDE WHO MIGHT BE HARMED AND HOW	
List groups of people at risk from the identified hazards: <ol style="list-style-type: none"> 1. Cleaning Staff 2. All building users 	
3 EVALUATE THE RISKS	
List the precautions already being taken: <ol style="list-style-type: none"> 1. Staff adequately trained to carry out the task (including manual handling issues, portable appliance testing and cable management) using Cleanings Induction & Training Manual 2. Correct use of warning signs. 3. Manual handling poster on display in unit detailing the correct manual handling technique. 4. Regular maintenance of equipment carried out by competent contractor. 5. Safety issues audited by Management Team on a regular basis. 6. Training effectiveness audited by Management Team on a regular basis. 	
Are the precautions adequate to reduce the risks to an acceptable level? (Yes)	✓

List the risks that are not being adequately controlled

1. None

List the further actions to be introduced to further reduce the risks

(Note: Also record who will be responsible for doing this and the planned completion date)

1. Specific risk assessments carried out on individual employees, including pregnant/nursing mothers, young people, etc.

Overall Assessment of Risk: Low

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager

Name 2: [REDACTED] – South West Team Leader

Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	YES	NO	NA
1 WORKPLACE			
1. Does the activity introduce hazards into the workplace?	✓		
2 WORK EQUIPMENT			
1. Does the work activity involve work equipment? <i>If yes, then refer to the guidance on Work Equipment and continue below. If no, then go on to the next section (Manual Handling)</i>	✓		
2. What is the equipment? Suction cleaner (upright or tub)			
3. Has an assessment of the work equipment been carried out? <i>Refer to the guidance on Work Equipment</i>	✓		
4. Does the work equipment generate noise levels so high that a person cannot be heard from a distance of approximately 2 metres without raising their voice? <i>If yes, then refer to guidance on Noise Assessment. If no, continue below.</i>		✓	
5. Is the equipment electrical? <i>If yes, refer to guidance on Work Equipment, if no continue below</i>	✓		
3 MANUAL HANDLING			
1. Does the work activity involve moving or handling objects? <i>If yes continue below. If no, then go on to the next section (People)</i>	✓		
2. Can these operations be carried out in such a way as to avoid hazardous handling? <i>If no, then refer to guidance on Manual Handling</i>	✓		
4 PEOPLE			
1. Does the activity hazard employees with a pre-existing health problem that affects their capabilities or affects the work activity?	✓		
2. Is there a risk to female employees of childbearing age?		✓	
3. Is the work activity suited to the range of capabilities of all employees involved?	✓		
4. Where necessary, have employees received relevant training?	✓		
5. Is there a potential for violence or aggression towards employees		✓	
5 PERSONAL PROTECTIVE EQUIPMENT (PPE)			
1. Do the employees involved in this activity need to use PPE? <i>If yes, refer to guidance on PPE. If no, go to the next section (Hazardous Substances)</i>		✓	
6 HAZARDOUS SUBSTANCES	YES	NO	NA
1. Does the activity involve hazardous substances, (e.g. cleaning products, wood dust, bodily fluids)? <i>If yes, continue below. If no, go to the next section (Fire)</i>		✓	
2. Is the hazardous substance a chemical product? <i>If yes, then refer to guidance on the Control of Substances Hazardous to Health, If no continue below.</i>		✓	
3. Is there likely to be contact with blood, faeces or other bodily fluids?		✓	
4. Is the correct personal protective equipment provided to minimise risk?			✓

**Manual Handling Assessment
For Suction Cleaning – Rucksack Vacuum**

Task Suction Cleaning using Rucksack Vacuum	Date October 2020		
Type of Assessment: Generic			
List names of employees subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 TASK			
Does the task involve:			
1. Lifting/lowering?	✓		
2. Pushing/pulling?	✓		
3. Stooping?	✓		
4. Holding load away from body?		✓	
5. Reaching upwards?		✓	
6. Long carrying distances?		✓	
7. Large vertical movements?		✓	
8. Unpredictable movement of loads?		✓	
9. Repetitive handling?		✓	
10. Insufficient rest or recovery?		✓	
11. A work rate imposed by a process?		✓	

2 INDIVIDUAL			
Does the task:			
1. Require unusual capability?		✓	
2. Require special skills?		✓	
3. Hazard those with a health problem (pace maker fitted, pregnant)	✓		
4. Require specific or protective clothing? (e.g. is clothing restrictive?)		✓	
5. Require special information/training?	✓		

Please mark appropriate column

	Yes	No	N/A
3 LOAD			
Is the load:			
1. Heavy? What weight is it? kg		✓	
2. Bulky/unwieldy?		✓	
3. Difficult to grasp?		✓	
4. Unstable/unpredictable?		✓	
5. Weight unevenly distributed?		✓	
6. Inherently harmful? (e.g. sharp/hot)		✓	

List here any actions or points raised in regard to this assessment:	
Assessment completed by: Name 1: [redacted] – South West Locality Manager Name 2: [redacted] – South West Team Leader Name 3: [redacted] – South West Team Leader	Date: October 2020

Work Equipment Assessment for Suction Cleaning – Rucksack Vacuum

Task : Suction Cleaning using Rucksack Vacuum	Date: October 2020
Type of Assessment: Generic	
Equipment used: rucksack suction cleaner and attachments	

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 STATUTORY REGULATIONS AND ARRANGEMENTS			
1. Have applicable regulations and statutory requirements and standards been identified?	✓		
2. Are formal arrangements in place to meet the requirements of these regulations and standards?	✓		

2 SELECTION OF WORK EQUIPMENT			
1. Is there a nominated person to ensure that appropriate work equipment is: a) Specified; and b) Purchased	✓ ✓		
2. Where applicable is the work equipment specified within established systems of work?	✓		
3. Where appropriate are checks made to ensure that the work equipment is fit for the purpose?	✓		
4. Are specific risks to the health and safety of any person associated with the work equipment identified?	✓		

3 MAINTENANCE	Yes	No	N/A
1. Are appropriate arrangements in place for monitoring the safety of work equipment?	✓		
2. Are appropriate arrangements in place for safe maintenance of work equipment?	✓		
3. Are appropriate arrangements in place for the safe repair of work equipment?	✓		
4. Are records kept of failures, especially of safety devices, their possible causes and remedial work conducted?	✓		
5. If the machinery has a maintenance log, is the log kept up to date?	✓		

Work Equipment Assessment for Suction Cleaning – Rucksack Vacuum

4 OPERATION OF WORK EQUIPMENT	Yes	No	N/A
1. Are appropriate arrangements in place to ensure work equipment is safe for use in the intended working environment?	✓		

5 WORK EQUIPMENT WITH SPECIFIC RISKS	Yes	No	N/A
1. Where work equipment is identified as having associated specific risks, is the use of such equipment restricted to specifically authorised persons? – pregnancy, pace maker fitted, etc.	✓		
2. Is all repair, maintenance, modification and servicing of work equipment with specific risks conducted by competent persons specifically trained to perform such work?	✓		

6 INFORMATION AND INSTRUCTION	Yes	No	N/A
1. Have all users and supervisors been provided with adequate written information and instruction on:	✓		
a) The conditions and methods with which the work equipment may be used?	✓		
b) Foreseeable abnormal situations and the action to be taken if such situations occur?	✓		
c) Any conclusions to be drawn from experience in using the work equipment?	✓		
2. Have all users and supervisors been provided with adequate training in the above requirements?	✓		
3. Has their understanding of the information, instruction and training been assessed?	✓		

List here any actions or points raised in regard to the assessment:

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager
 Name 2: [REDACTED] – South West Team Leader
 Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Task Risk Assessment Spray Extraction

Task: Spray Extraction	Date: October 2020
Type of Assessment: Generic	
Employee group subject of risk assessment - Cleaning Staff	
Describe briefly the work activity subject to risk assessment: This task involves the use of a spray extraction carpet cleaner, applying water and chemical to the carpet and extracting the soiled solution from the carpet.	

1 LOOK FOR THE HAZARDS
List any hazards likely to affect health and safety: <ol style="list-style-type: none"> 1. Warning signs not properly displayed resulting in slip/trip/fall hazard. 2. Inadequate ventilation where required 3. Manual handling hazard if equipment is used, transported, lifted/emptied incorrectly 4. Chemical splashes through improper use of chemical 5. Trailing cables resulting in slip/trip/fall hazard. 6. Electric hazard through inappropriate use of power supply.

2 DECIDE WHO MIGHT BE HARMED AND HOW
List groups of people at risk from the identified hazards: <ol style="list-style-type: none"> 1. Cleaning Staff 2. All building users

3 EVALUATE THE RISKS	
List the precautions already being taken: <ol style="list-style-type: none"> 1. Staff adequately trained to carry out the task (including manual handling issues, portable appliance testing and colour coding system) using Cleanings Induction & Training Manual 2. Correct use of warning signs. 3. PPE supplied, including goggles and gloves. 4. Manual handling poster on display in unit detailing the correct manual handling technique. 5. Staff supplied with R.C.D. 6. Staff trained to ventilate area if required. 7. Safety issues audited by Management Team on a regular basis. 8. Training effectiveness audited by Management Team on a regular basis. 9. Equipment maintenance carried out by a competent contractor. 	
Are the precautions adequate to reduce the risks to an acceptable level? (Yes)	✓

Task Risk Assessment Prompt Sheet

List the risks that are not being adequately controlled

1. None

List the further actions to be introduced to further reduce the risks

(Note: Also record who will be responsible for doing this and the planned completion date)

1. Specific risk assessments carried out on individual employees, including pregnant/nursing mothers, young people, etc.

Overall Assessment of Risk: Low

Assessment completed by:

Name 1: [redacted] – South West Locality Manager

Name 2: [redacted] – South West Team Leader

Name 3: [redacted] – South West Team Leader

Date: October 2020

Task Risk Assessment Prompt Sheet

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	YES	NO	NA
1 WORKPLACE			
1. Does the activity introduce hazards into the workplace?	✓		
2 WORK EQUIPMENT			
1. Does the work activity involve work equipment? <i>If yes, then refer to the guidance on Work Equipment and continue below. If no, then go on to the next section (Manual Handling)</i>	✓		
2. What is the equipment? Hot water extractor			
3. Has an assessment of the work equipment been carried out? <i>Refer to the guidance on Work Equipment</i>	✓		
4. Does the work equipment generate noise levels so high that a person cannot be heard from a distance of approximately 2 metres without raising their voice? <i>If yes, then refer to guidance on Noise Assessment. If no, continue below.</i>		✓	
5. Is the equipment electrical? <i>If yes, refer to guidance on Work Equipment, if no continue below</i>	✓		
3 MANUAL HANDLING			
1. Does the work activity involve moving or handling objects? <i>If yes continue below. If no, then go on to the next section (People)</i>	✓		
2. Can these operations be carried out in such a way as to avoid hazardous handling? <i>If no, then refer to guidance on Manual Handling</i>	✓		
4 PEOPLE			
1. Does the activity hazard employees with a pre-existing health problem that affects their capabilities or affects the work activity?		✓	
2. Is there a risk to female employees of childbearing age?		✓	
3. Is the work activity suited to the range of capabilities of all employees involved?	✓		
4. Where necessary, have employees received relevant training?	✓		
5. Is there a potential for violence or aggression towards employees		✓	

Task Risk Assessment Prompt Sheet

5 PERSONAL PROTECTIVE EQUIPMENT (PPE)			
1. Do the employees involved in this activity need to use PPE? <i>If yes, refer to guidance on PPE. If no, go to the next section (Hazardous Substances)</i>	✓		
6 HAZARDOUS SUBSTANCES			
	YES	NO	NA
1. Does the activity involve hazardous substances, (e.g. cleaning products, wood dust, bodily fluids)? <i>If yes, continue below. If no, go to the next section (Fire)</i>		✓	
2. Is the hazardous substance a chemical product? If yes, then refer to guidance on the Control of Substances Hazardous to Health, <i>If no continue below.</i>	✓		
3. Is there likely to be contact with blood, faeces or other bodily fluids?		✓	
4. Is the correct personal protective equipment provided to minimise risk?	✓		

Manual Handling Assessment For Spray Extraction

Task: Spray Extraction	Date October 2020		
Type of Assessment: Generic			
List names of employees subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1. TASK			
Does the task involve:			
1. Lifting/lowering?	✓		
2. Pushing/pulling?	✓		
3. Stooping?	✓		
4. Holding load away from body?		✓	
5. Reaching upwards?		✓	
6. Long carrying distances?		✓	
7. Large vertical movements?		✓	
8. Unpredictable movement of loads?		✓	
9. Repetitive handling?		✓	
10. Insufficient rest or recovery?		✓	
11. A work rate imposed by a process?		✓	
2. INDIVIDUAL			
Does the task:			
1. Require unusual capability?		✓	
2. Require special skills?		✓	
3. Hazard those with a health problem (e.g. back pain, hernia, etc)?		✓	
4. Require specific or protective clothing? (e.g. is clothing restrictive?)		✓	
5. Require special information/training?	✓		

Please mark appropriate column		
Yes	No	N/A

3. LOAD		Yes	No	N/A
Is the load:				
1. Heavy? What weight is it? kg			✓	
2. Bulky/unwieldy?			✓	
3. Difficult to grasp?			✓	
4. Unstable/unpredictable?			✓	
5. Weight unevenly distributed?			✓	
6. Inherently harmful? (e.g. sharp/hot)			✓	

List here any actions or points raised in regard to this assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Work Equipment Assessment For Spray Extraction

Task: Spray Extraction	Date: October 2020
Type of Assessment: Generic	
Equipment used: Spray extractor, wands, hoses, buckets.	

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 STATUTORY REGULATIONS AND ARRANGEMENTS			
1. Have applicable regulations and statutory requirements and standards been identified?	✓		
2. Are formal arrangements in place to meet the requirements of these regulations and standards?	✓		

2 SELECTION OF WORK EQUIPMENT			
1. Is there a nominated person to ensure that appropriate work equipment is: a) Specified; and b) Purchased	✓ ✓		
2. Where applicable is the work equipment specified within established systems of work?	✓		
3. Where appropriate are checks made to ensure that the work equipment is fit for the purpose?	✓		
4. Are specific risks to the health and safety of any person associated with the work equipment identified?		✓	

3 MAINTENANCE	Yes	No	N/A
1. Are appropriate arrangements in place for monitoring the safety of work equipment?	✓		
2. Are appropriate arrangements in place for safe maintenance of work equipment?	✓		
3. Are appropriate arrangements in place for the safe repair of work equipment?	✓		
4. Are records kept of failures, especially of safety devices, their possible causes and remedial work conducted?	✓		
5. If the machinery has a maintenance log, is the log kept up to date?	✓		

4 OPERATION OF WORK EQUIPMENT	Yes	No	N/A
1. Are appropriate arrangements in place to ensure work equipment is safe for use in the intended working environment?	✓		

5 WORK EQUIPMENT WITH SPECIFIC RISKS	Yes	No	N/A
1. Where work equipment is identified as having associated specific risks, is the use of such equipment restricted to specifically authorised persons? (e.g. age, qualifications)			✓
2. Is all repair, maintenance, modification and servicing of work equipment with specific risks conducted by competent persons specifically trained to perform such work?			✓

6 INFORMATION AND INSTRUCTION	Yes	No	N/A
1. Have all users and supervisors been provided with adequate written information and instruction on: a) The conditions and methods with which the work equipment may be used? b) Foreseeable abnormal situations and the action to be taken if such situations occur? c) Any conclusions to be drawn from experience in using the work equipment?	✓ ✓ ✓		
2. Have all users and supervisors been provided with adequate training in the above requirements?	✓		
3. Has their understanding of the information, instruction and training been assessed?	✓		

List here any actions or points raised in regard to the assessment:	
Assessment completed by: Name 1: [REDACTED] – South West Locality Manager Name 2: [REDACTED] – South West Team Leader Name 3: [REDACTED] – South West Team Leader	Date: October 2020

Personal Protective Equipment For Spray Extraction

Task: Spray Extraction	Date: October 2020		
Type of Assessment: Generic			
List names of employees subject to this risk assessment - Cleaning Staff			
			Please mark appropriate column
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 ACTIVITY			
1. Has a general risk assessment been carried out for this activity?	✓		
2. Have assessments for any other legislation been carried out for this activity?	✓		
3. Have all identified control measures been applied?	✓		
4. Have the areas of the body that require protection been identified? If YES, list parts of body to be protected: eyes, hands	✓		

2 PERSONAL PROTECTIVE EQUIPMENT			
1. Has suitable PPE been identified and purchased?	✓		
2. Have individuals been supplied with PPE where required?	✓		
3. Have individuals received information and instruction on the use of the PPE?	✓		
4. Is the PPE being worn where necessary?	✓		
5. Are there any signs and notices to mark PPE zones?	✓		
6. Are regular checks made to ensure that PPE is worn where required?	✓		
7. Are additional supplies of PPE available?	✓		
8. Do employees know how to obtain replacement PPE?	✓		
9. Is all the PPE supplied free of charge?	✓		

List here any actions or points raised in regard to this assessment:	
Assessment completed by: Name 1: [REDACTED] – South West Locality Manager Name 2: [REDACTED] – South West Team Leader Name 3: [REDACTED] – South West Team Leader	Date: October 2020

Task Risk Assessment Mechanical Sweeper

Task: Mechanical Sweeper	Date: October 2020
Type of Assessment: Generic	
Employee group subject of risk assessment - Cleaning Staff	
Describe briefly the work activity subject to risk assessment: This task involves the use of a mechanical sweeping machine that picks up debris from hard surfaces (No power supply required).	
1 LOOK FOR THE HAZARDS	
List any hazards likely to affect health and safety: 1. Warning signs not properly displayed resulting in slip/trip/fall hazard. 2. Inadequate ventilation where required 3. Manual handling hazard if equipment is used, transported, lifted/emptied incorrectly	
2 DECIDE WHO MIGHT BE HARMED AND HOW	
List groups of people at risk from the identified hazards: 1. Cleaning Staff 2. All building users	
3 EVALUATE THE RISKS	
List the precautions already being taken: 1. Staff adequately trained to carry out the task 2. Correct use of warning signs. 3. Manual handling poster on display in unit detailing the correct manual handling technique. 4. Staff trained to ventilate area if required.	
Are the precautions adequate to reduce the risks to an acceptable level? (Yes)	✓

Task Risk Assessment Prompt Sheet

List the risks that are not being adequately controlled

1. None

List the further actions to be introduced to further reduce the risks

(Note: Also record who will be responsible for doing this and the planned completion date)

1. Specific risk assessments carried out on individual employees, including pregnant/nursing mothers, young people, etc.

Overall Assessment of Risk: Low

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager

Name 2: [REDACTED] – South West Team Leader

Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Task Risk Assessment Prompt Sheet

	Please mark appropriate column		
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	YES	NO	NA
1 WORKPLACE			
1. Does the activity introduce hazards into the workplace?		✓	
2. Has a workplace inspection checklist been completed? <i>See guidance on Workplace Health, Safety and Welfare</i>	✓		
3. Are there any hazards, including the layout of the workplace, which affect the activity?		✓	
4. Are there hazards identified on the Workplace Inspection Checklist?		✓	
2 WORK EQUIPMENT			
1. Does the work activity involve work equipment? <i>If yes, then refer to the guidance on Work Equipment and continue below. If no, then go on to the next section (Manual Handling)</i>	✓		
2. What is the equipment? Mechanical Sweeper			
3. Has an assessment of the work equipment been carried out? <i>Refer to the guidance on Work Equipment</i>	✓		
4. Does the work equipment generate noise levels so high that a person cannot be heard from a distance of approximately 2 metres without raising their voice? <i>If yes, then refer to guidance on Noise Assessment. If no, continue below.</i>		✓	
5. Is the equipment electrical? <i>If yes, refer to guidance on Work Equipment, if no continue below</i>		✓	
3 MANUAL HANDLING			
1. Does the work activity involve moving or handling objects? <i>If yes continue below. If no, then go on to the next section (People)</i>	✓		
2. Can these operations be carried out in such a way as to avoid hazardous handling? <i>If no, then refer to guidance on Manual Handling</i>	✓		
4 PEOPLE			
1. Does the activity hazard employees with a pre-existing health problem that affects their capabilities or affects the work activity?		✓	
2. Is there a risk to female employees of childbearing age?		✓	
3. Is the work activity suited to the range of capabilities of all employees involved?	✓		
4. Where necessary, have employees received relevant training?	✓		
5. Is there a potential for violence or aggression towards employees		✓	

Task Risk Assessment Prompt Sheet

5 PERSONAL PROTECTIVE EQUIPMENT (PPE)			
1. Do the employees involved in this activity need to use PPE? <i>If yes, refer to guidance on PPE. If no, go to the next section (Hazardous Substances)</i>	✓		
6 HAZARDOUS SUBSTANCES			
	YES	NO	NA
1. Does the activity involve hazardous substances, (e.g. cleaning products, wood dust, bodily fluids)? <i>If yes, continue below. If no, go to the next section (Fire)</i>		✓	
2. Is the hazardous substance a chemical product? <i>If yes, then refer to guidance on the Control of Substances Hazardous to Health, If no continue below.</i>		✓	
3. Is there likely to be contact with blood, faeces or other bodily fluids?		✓	
4. Is the correct personal protective equipment provided to minimise risk?			✓

Manual Handling Assessment For Mechanical Sweeper

Task: Mechanical Sweeper	Date October 2020		
Type of Assessment: Generic			
List names of employees subject to this risk assessment - Cleaning Staff			
Please mark appropriate column			
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1. TASK			
Does the task involve:			
1. Lifting/lowering?		✓	
2. Pushing/pulling?	✓		
3. Stooping?		✓	
4. Holding load away from body?		✓	
5. Reaching upwards?		✓	
6. Long carrying distances?		✓	
7. Large vertical movements?		✓	
8. Unpredictable movement of loads?		✓	
9. Repetitive handling?		✓	
10. Insufficient rest or recovery?		✓	
11. A work rate imposed by a process?		✓	
2. INDIVIDUAL			
Does the task:			
1. Require unusual capability?		✓	
2. Require special skills?		✓	
3. Hazard those with a health problem (e.g. back pain, hernia, etc)?		✓	
4. Require specific or protective clothing? (e.g. is clothing restrictive?)		✓	
5. Require special information/training?	✓		

Please mark appropriate column

	Yes	No	N/A
3. LOAD			
Is the load:			
1. Heavy? What weight is it? kg		✓	
2. Bulky/unwieldy?		✓	
3. Difficult to grasp?		✓	
4. Unstable/unpredictable?		✓	
5. Weight unevenly distributed?		✓	
6. Inherently harmful? (e.g. sharp/hot)		✓	

List here any actions or points raised in regard to this assessment:

Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020

Work Equipment Assessment For Mechanical Sweeper

Task: Mechanical Sweeper	Date: October 2020
Type of Assessment: Generic	
Equipment used: Mechanical Sweeper	

Please mark appropriate column

Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1 STATUTORY REGULATIONS AND ARRANGEMENTS			
1. Have applicable regulations and statutory requirements and standards been identified?	✓		
2. Are formal arrangements in place to meet the requirements of these regulations and standards?	✓		

2 SELECTION OF WORK EQUIPMENT			
1. Is there a nominated person to ensure that appropriate work equipment is: a) Specified; and b) Purchased	✓ ✓		
2. Where applicable is the work equipment specified within established systems of work?	✓		
3. Where appropriate are checks made to ensure that the work equipment is fit for the purpose?	✓		
4. Are specific risks to the health and safety of any person associated with the work equipment identified?		✓	

3 MAINTENANCE	Yes	No	N/A
1. Are appropriate arrangements in place for monitoring the safety of work equipment?	✓		
2. Are appropriate arrangements in place for safe maintenance of work equipment?	✓		
3. Are appropriate arrangements in place for the safe repair of work equipment?	✓		
4. Are records kept of failures, especially of safety devices, their possible causes and remedial work conducted?	✓		
5. If the machinery has a maintenance log, is the log kept up to date?	✓		

4 OPERATION OF WORK EQUIPMENT	Yes	No	N/A
1. Are appropriate arrangements in place to ensure work equipment is safe for use in the intended working environment?	✓		

5 WORK EQUIPMENT WITH SPECIFIC RISKS	Yes	No	N/A
1. Where work equipment is identified as having associated specific risks, is the use of such equipment restricted to specifically authorised persons? (e.g. age, qualifications)			✓
2. Is all repair, maintenance, modification and servicing of work equipment with specific risks conducted by competent persons specifically trained to perform such work?	✓		

6 INFORMATION AND INSTRUCTION	Yes	No	N/A
1. Have all users and supervisors been provided with adequate written information and instruction on: a) The conditions and methods with which the work equipment may be used? b) Foreseeable abnormal situations and the action to be taken if such situations occur? c) Any conclusions to be drawn from experience in using the work equipment?	✓ ✓ ✓		
2. Have all users and supervisors been provided with adequate training in the above requirements?	✓		
3. Has their understanding of the information, instruction and training been assessed?	✓		

List here any actions or points raised in regard to the assessment:

Assessment completed by:

Name 1: [REDACTED] – South West Locality Manager
 Name 2: [REDACTED] – South West Team Leader
 Name 3: [REDACTED] – South West Team Leader

Date: October 2020

Personal Protective Equipment For Mechanical Sweeper

Task: Mechanical Sweeper	Date: October 2020		
Type of Assessment: Generic			
List names of employees subject to this risk assessment - Cleaning Staff			
			Please mark appropriate column
Note: Please do not mark the Not Applicable (N/A) box if you are unsure of the correct response. Please leave blank and seek further guidance	Yes	No	N/A
1. ACTIVITY			
1. Has a general risk assessment been carried out for this activity?	✓		
2. Have assessments for any other legislation been carried out for this activity?	✓		
3. Have all identified control measures been applied?	✓		
4. Have the areas of the body that require protection been identified? If YES, list parts of body to be protected: eyes, hands	✓		

2. PERSONAL PROTECTIVE EQUIPMENT			
1. Has suitable PPE been identified and purchased?	✓		
2. Have individuals been supplied with PPE where required?	✓		
3. Have individuals received information and instruction on the use of the PPE?	✓		
4. Is the PPE being worn where necessary?	✓		
5. Are there any signs and notices to mark PPE zones?	✓		
6. Are regular checks made to ensure that PPE is worn where required?	✓		
7. Are additional supplies of PPE available?	✓		
8. Do employees know how to obtain replacement PPE?	✓		
9. Is all the PPE supplied free of charge?	✓		

List here any actions or points raised in regard to this assessment:	
Assessment completed by: Name 1: ████████ – South West Locality Manager Name 2: ████████ – South West Team Leader Name 3: ████████ – South West Team Leader	Date: October 2020