

The Church of Scotland

Church Buildings COVID-19 Risk Assessment (V1)

This risk assessment must be completed before any church building reopens. This risk assessment will help congregations identify

appropriate control measures that must be in place to protect members of the congregation, volunteers and visitors from the

risk of Covid-19 infection. The control measures highlighted in this risk assessment reflect current best practice and should be regarded as the minimum standard for your church buildings and congregation. Additional control measures may be implemented to reflect local circumstances. Please note: this risk assessment reflects current policy in Scotland and may not be suitable for congregations in England or those within the International Presbytery. Further advice should be sought from the Church of Scotland General Trustees OR by emailing Covid19guidance@churchofscotland.org.uk. Your presbytery may request a copy of this risk assessment as they work with the congregations to reopen church buildings.

Congregation	Meldrum & Bourtie		
Presbytery	Gordon		
Which building(s) does this risk assessment relate to?	Meldrum Church		
Name of assessor(s)	W. Paterson, W. Dalzell		
Date	23 rd June 2020		
Date of review			
Signature			
Hazards associated with the coronavirus pandemic	Potential risks to members of the congregation, volunteers and visitors to the church caused by hazards	Control measures	Further actions required
Infection prevention, cleaning and members, volunteers and visitors Safety			
As church buildings reopen after the restrictions on places of worship are eased, congregations must ensure that their buildings are safe and do not increase the risk of virus transmission.	<p>There is a direct threat to anyone who enters a church building due to its public nature that they may be exposed to Covid-19.</p> <p>People can catch the virus from others who are infected in the following ways:</p> <ul style="list-style-type: none"> • virus moves from person-to-person in droplets from the nose or mouth spread when a person with the virus coughs or exhales • the virus can survive for 72 hours or longer on surfaces which people have touched or coughed on, etc. • people can pick up the virus by breathing in the droplets or by touching contaminated surfaces and then touching their 	<p>The congregation will comply with its statutory duty to provide a safe environment, with particular reference to the Covid-19 pandemic by:</p> <ul style="list-style-type: none"> • ensure that all members, volunteers and visitors are aware of the infection prevention and control precautions that are in place within your buildings and the behavior expected of them during the pandemic to keep themselves and others safe • require all members, volunteers and visitors to practice physical distancing when in or around your building, including outside areas <p>The congregation will communicate and reinforce key Government</p>	<p>Publicise a summary of measures being taken on the church website.</p> <p>Welcoming personnel to reinforce message.</p> <p>Welcoming team to be briefed prior to being on duty.</p>

	<p>eyes or mouth</p> <p>Not all people infected with Covid-19 show symptoms. Therefore, it is vitally important that reasonable precautions are in place and followed at all times.</p>	<p>public health messages to all members, volunteers and visitors who visit their buildings:</p> <ul style="list-style-type: none"> • anyone who is unwell or who shows symptoms of Covid-19 (High temperature/fever, cough or loss of smell), who is in the extremely vulnerable group, who is shielding, who is isolating, or who is living with someone who is isolating or is unwell must not attend church • recommend the use an appropriate face covering when inside the building. • if a face covering is not used for medical or other reasons, cover the mouth and nose with a tissue or sleeve (not hands) when coughing or sneezing (Catch it — Bin it — Kill it) • put used tissues in the bin straight away • wash hands regularly with soap and water for at least 20 seconds (use alcohol base hand sanitiser/ gel if soap and water are not available) • avoid close contact with people who becomes unwell when within your buildings • clean and disinfect frequently touched objects and surfaces • do not touch face, eyes, nose or mouth if hands are not clean <p>The congregation will fully implement in all areas of their church buildings Health Protection Scotland (Public Health Scotland), Health and Safety Executive (HSE) and Scottish Government advice and guideline relevant to the Covid-19 Pandemic, including the following safety precautions:</p> <ul style="list-style-type: none"> • make any adjustments to the space within your buildings to facilitate effective infection prevention and physical distancing • follow Government health and travel advice • provide alcohol based hand sanitiser/gel as required • provide infection control and personal protective equipment (PPE) such as gloves, and 	<p>Make a supply of face coverings available at the door or those who require one</p> <p>Make sanitising gel available at entrance</p> <p>All surfaces liable to be touched by congregation are to be sanitised before and after services, including pews, pew boards, door handles and light switches.</p> <p>Sanctuary, toilet and entrance hallway and passage to back door are to be sanitised by HPL Fogging on a monthly basis. Separate Risk Assessment for HPL Fogging to be prepared.</p>
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Physical distancing			
Effective physical distancing is a key element in reducing the transmission of COVID-19	<p>Physical distancing refers to people being required to maintain a distance from each other of 2 meters, wherever possible</p> <p>Physical distancing effectively puts people at a safe range from anyone coughing</p> <p>The main route of virus transmission is through droplets exhaled or coughed by an infected person</p>	<p>All members, volunteers and visitors are required to practice effective physical distancing while in and around the building by:</p> <ul style="list-style-type: none"> • avoiding non-essential contact with others • keeping a safe distance of at least 2 metres (about 3 steps) from others whenever possible • avoiding physical contact (e.g. hugs, handshakes, etc) <p>Adaptations to the building to support physical distancing will include:</p> <ul style="list-style-type: none"> • a review of the church building to identify suitable adaptations which will support physical distancing, for example layout changes, appropriate signage, stickers and floor markings to denote safe distances, etc • establishing maximum occupancy limits for all areas of the buildings • all meetings will take place using telephone or video conferencing facilities <p>The congregation will display notices in throughout the church building reminding members, volunteers and visitors of the key infection prevention requirements, including the need to maintain safe</p>	<p>An usher within the church to guide congregation to their seats</p> <p>As per plan of seating areas</p> <p>Notices to prepare and print</p>

		physical distancing	
Higher risk areas of the building			
Some areas of the church building may present a higher risk than others; for example toilets and restrooms.	<p>Heavily used areas of the building are more likely to present an infection transmission risk</p> <p>Toilets are essential for members, volunteers and visitors to wash their hands regularly but also the toilets must be kept clean and free of coronavirus contamination</p> <p>A number of people going to the toilet together may compromise their ability to comply with physical distancing</p> <p>Increased risk of people coughing and touching door handles, taps and toilet flush handles</p>	<p>Ensure higher-risk/ high-traffic areas of the building are effectively controlled by applying appropriate safety precautions, including:</p> <ul style="list-style-type: none"> • stressing the need for everyone to follow good hygiene practice at all times (i.e. regular handwashing, using tissues and disposing of them appropriately, etc) • the congregation will ensure that adequate hand-cleaning resources are provided; all toilets to be supplied with adequate supplies of hot water, liquid soap and paper towels • printing handwashing instructions/posters and displaying throughout the building, especially in toilets • limiting numbers of people who can use high traffic areas such as corridors, stairs, toilets and restrooms at any one time to ensure physical distancing • limiting lift occupancy • monitor high-traffic area use and regulate access as necessary • prioritise disabled use where necessary, e.g. disabled toilet use, use of lifts, etc • establishing safe queuing systems by use of room occupancy limits and floor markings/signage, etc • placing alcohol hand sanitisers/ gels at convenient places around the building with instructions for use • increasing environmental cleaning, especially in and around toilets and; special attention to be paid to frequently touched surfaces such as door handles, toilet flush handles, light switches, etc • increasing toilets/washrooms inspections to check for cleanliness/adequate stock of soap/toilet paper, etc • where possible, providing paper towels as an alternative to hand dryers in handwashing facilities 	<p>Implement a one way system for people entering and leaving the building,</p> <p>Enter by main front door – Exit by rear door</p> <p>Beadle to ensure that water heater is switched on in adequate time for water to heat before the building is occupied.</p> <p>Close off Organ gallery to all apart from Minister & Session Clerk</p> <p>Remove all non essential materials from toilet area and store elsewhere.</p>

Vulnerable and Extremely Vulnerable members, volunteers and visitors			
Some members, volunteers or visitors may have pre-existing medical conditions which render them more vulnerable to the dangers of coronavirus infection	<p>Those who are classified by the Scottish Government as being at greater risk from COVID-19 include people in the vulnerable (higher-risk) and extremely vulnerable (extremely high risk) categories</p> <p>Vulnerable (higher risk) people include those who:</p> <ul style="list-style-type: none"> • aged 70 or older (regardless of medical conditions) • under 70 and instructed to get a flu jab as an adult each year on medical grounds • pregnant <p>And those with:</p> <ul style="list-style-type: none"> • chronic (long-term) respiratory diseases, such as asthma, chronic obstructive pulmonary disease (COPD), emphysema or bronchitis • chronic heart disease, such as heart failure • chronic kidney disease • chronic liver disease, such as hepatitis • chronic neurological conditions, such as Parkinson's disease, motor neurone disease, multiple sclerosis (MS), a learning disability or cerebral palsy • diabetes • problems with their spleen, for example sickle cell disease • a weakened immune system as the result of conditions such as HIV and AIDS, or medicines such as steroid tablets or chemotherapy • a BMI of 40 or above who are seriously overweight <p>Extremely vulnerable (</p>	<p>The congregation will ensure that those in the extremely vulnerable category will still be able to participate in church life during the Covid-19 pandemic without the need to attend church.</p> <p>The congregation will ensure that those in the vulnerable category will be appropriately supported in their choice to participate in church life in a way that meets their own individual needs and preferences whilst safeguarding their own health, safety and welfare and those of the wider congregation and community.</p>	

	<p>extremely high risk) people include those with:</p> <ul style="list-style-type: none"> • cancer who are receiving active chemotherapy • lung cancer who are either receiving or previously received radical radiotherapy • cancers of the blood or bone marrow, such as leukaemia, lymphoma or myeloma who are at any stage of treatment • severe chest conditions such as cystic fibrosis, severe asthma, severe COPD, severe bronchiectasis and pulmonary hypertension • rare diseases, including all forms of interstitial lung disease/sarcoidosis, and inborn errors of metabolism (such as SCID and homozygous sickle cell) that significantly increase the risk of infections • an absent spleen or have had their spleen removed • significant heart disease (congenital or acquired) and are pregnant <p>And those that have had:</p> <ul style="list-style-type: none"> • solid organ transplants • bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs <p>Or receiving:</p> <ul style="list-style-type: none"> • immunotherapy or other continuing antibody treatments for cancer • other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors • immunosuppression therapies that 		
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	<p>significantly increase the risk of infection</p> <ul style="list-style-type: none"> • renal dialysis treatment <p>The following advice applies:</p> <ul style="list-style-type: none"> • Those in the extremely vulnerable category are subject to special “shielding” arrangements by the Scottish Government. • those in the vulnerable category are advised to stay at home as much as possible • people in both categories are advised by the Scottish Government to be particularly stringent in complying with physical distancing requirements <p>There is some evidence that people from ethnic minority backgrounds are hit harder by COVID-19</p>		
Premises access and travel			
Members, volunteers and visitors who come to your church building must be able to access your building safely	<p>Travel to and from your building may lead to a greater risk of virus transmission</p> <p>Public transport may be restricted in order to achieve physical distancing on trains, buses, etc</p> <p>Access to church buildings may create a virus transmission risk if people all seek entrance at once or are channeled through single points of entry</p> <p>Risks may be increased for disabled people who may have reduced options for access</p>	<p>The congregation will apply the following arrangements to ensure safe access to their building:</p> <ul style="list-style-type: none"> • ensure that sufficient access points to the church building are provided so that people do not congregate at entrances and exits; ensure that all access points have supplies of hand sanitiser/gel available for use • review disabled access arrangements to ensure safe entrance or exit for disabled people • use floor markings and signage at entrances and exits and introduce one-way flow systems at entry and exit points where appropriate. Consideration to the historical nature of the building will inform the extent of this provision. • provide alcohol based hand sanitiser/gel at entrances and exits 	Implement a one way system for people entering and leaving the building and provide usher service to guide attendees to the appropriate seating.

Cases of possible infection in the church building			
A members, volunteer or visitor may become unwell whilst attending the church building, or a symptomatic person may attend the building	High risk of transmission	<p>If a member, volunteer or visitor of becomes unwell in the church building with coronavirus symptoms (a new, continuous cough or a high temperature) they should be sent home and advised to follow Government advice to self-isolate</p> <ul style="list-style-type: none"> Health Protection Scotland (HPS) "Covid-19 guidance for non-healthcare settings" guidance will be followed. <p>The following actions should be taken within the building:</p> <ul style="list-style-type: none"> all surfaces that a symptomatic person has come into contact with must be cleaned and disinfected, especially objects visibly contaminated with body fluids and all potentially contaminated high-contact areas such as toilets public areas where a symptomatic individual has passed through and spent minimal time, such as corridors, but which are not visibly contaminated with body fluids, can be cleaned thoroughly as normal cleaning staff should use disposable cloths or paper roll and a combined detergent disinfectant solution at a dilution of 1000 parts per million available chlorine cleaning staff must wear appropriate PPE waste from cleaning of areas where possible cases have been (including disposable cloths and tissues) should be "double-bagged" and tied off; it should be placed in a secure holding area for 72 hours before being disposed of in general waste 	<p>In this event, additional disinfection HPL fogging should be undertaken.</p> <p>Ensure that cleaner is briefed on requirements and provide necessary materials and PPE</p> <p>Welcoming team to record names of attendees where possible to enable contact tracing should a case arise.</p> <p>After a service, all door handle, and pew surfaces are to be washed down.</p> <p>Building to be closed for 72 hours before being reopened</p>
<p>REVIEW</p> <p><i>This risk assessment must be kept under constant review as we move through the different phases of the Scottish Government's four-stage approach to easing the Covid-19 restrictions. It is recommended that this risk assessment be reviewed at least monthly or before moving on to a different phase of the plan. A note of the review date and any amendments should be recorded and retained by the congregation.</i></p>			

