C: Customer; ST: Staff; Co: Contractors

No	RISK	WHO	MITIGATION	COMPLETE DATE
1.0	Primary Risk	C,ST,Co		
	Someone bringing Covid19 into the business		Our obligation is to provide a "safe as reasonably practicable" environment for all	
	and infecting other people, be they staff,		people. We need both protective measures and visible confidence building	
	customers or contractors		measures	
1	Covid19 Transmission Methods?		Our understanding is:	
1			Covid19 is transmitted in breath water droplets from one person being inhaled	4.4.20
			by another person. The WHO guidance is to keep people 1m apart while the UK	
			Government guidance is to keep people 2m apart. Both these guide lines are	
			approximation as studies show transmission is a function of time in proximity and	
			distance apart, as well as environmental conditions, such as is it breath or a	
			sneeze (sneeze travels farther) and is there a breeze to dilute breath.	
			Both UK and Scottish Governments have moved to a 2m or 1m+with enhanced	9.7.20
			protection policy	
			Spending time (minutes) close to someone in a confined space is more dangerous	
			that spending the same amount of time with someone outdoors.	
			The secondary transmission is via surfaces. Someone with the virus wipes their	
			nose and then puts their hand on a surface, which someone else then touches	
			with their hand and then touches their face. Guidance suggests that this is a	
			secondary transmission mechanism, BUT it can be significant in high touch	
			surfaces. For instance a grab handle that is repeatedly touched by many people	
			may build up a viral load from one or more people that can be transmitted to	
			others.	
			Reducing transmission risk depends upon:	
			a) Identification of high touch surfaces and either eliminating them or	
			cleaning them between use or frequent periodic cleaning	

	 b) Keeping people indoors 2m apart as far as possible and or limiting the time they are in-front of each other with a 1m+alternative. c) Personal hygiene. Coughing into armpit, using disposable tissues for sneezing and blowing nose. Regular hand washing, use of eye protectors, disposable or cleanable face masks and disposable gloves. The use of PPE and frequency of change depends on the situation. d) Scottish Government requires face coverings to be worn in Shops and on Public Transport. This is not a requirement in Hotels and Restaurants at the moment. 	9.7.20
How long does virus stay live or surfaces?	Review of government guidance does not provide an answer to this. Various journalist and technical papers on the internet give a wide range of conflicting information. At the moment it is not sensible to use any particular "time to decay" on surface guidance and this is not used as part of our prevention programme	
What temperature kills the virus?	This is important when considering cooking; dish, glass, cutlery cleaning, and washing of towelling/cloths. Evidence presented by ARPAL (Supplier of our cleaning chemicals) suggests that a reasonable time/temperature guide to killing the virus is: 30 min @60C 15 min @65C 1 min @80C We need to check the operating temperatures of Glass Washer, Dish Washer, Plate Warmer and Laundry Dryer to make sure they operate above 60C The washer cycle does not need to be 60C if the dryer cycle is. Confirmed It is worth noting that a Bacteria is a living organism, so it can be killed. A virus is not a living organism, so it cannot be killed. The mechanism is either to remove it or to destroy the cell structure by heat or chemical.	1/7/20

	What cleaning chemicals will de-activate the virus?	The advice from ARPAL is that the types of chemicals we can use for cleaning hotel and restaurant surfaces will not de-activate COVID19. The types of chemicals (concentrated bleach) that will de-activate COVID19 would also destroy the surfaces they were cleaning The advice from ARPAL is: SPRAY-WIPE-BIN This is removing the virus not killing it. Therefore, the process of doing this is important. Staff would use the normal spay, but then, wipe the surface dry with disposable cloth (Blue Roll) and immediately bin the cloth. It becomes very important that cloths are not re-used, and disposable paper products are used. The second important concept is "High Touch Areas". As noted above, picking the virus up from surfaces is less likely, but the probability rises for any surface that is used again and again by many different people. High Touch areas must be identified and then a high frequency cleaning routine adopted for each area	6/6/20
		Examples are the front door – replace with automatic door, Room door handles – clean more frequently Reception Phone – clean at start of shift and used only by receptionist Card machine – offer contactless and if pin used then clean each time after use. ARPAL have provided useful training aids and graphics.	3/7/20
2.0	Overall Objective		
	To reduce transmission risk and give staff and customers confidence in No11	Appropriate/Regular/Visible cleaning of high touch surfaces, appropriate cleaning of all other surfaces and materials	

		Social distancing protocols Health monitoring	
	Health Monitoring	Things we could do: a) Staff training on symptoms b) Staff self certification daily log that they believe that they are fit to come to work	14/7/20 14/7/20
		 c) Temperature monitoring of everyone entering the business d) Asking or insisting that everyone who comes into the business has activated the NHS app and can show that they have NOT had an isolating warning – REMOVED as there is no APP 	15/7/20
		 e) UK and Scottish Governments Require that we take the name and phone number of the LEAD booker for every booking so that if someone reports COVID then everyone can be traced. 	15/7/20
3.0	Infrastructure		
	Main entry door is manual meaning each person has to put their hand on the door	Make main door motorised and sensor operated	3/7/20
	Public Toilets: hand operated door handles, locks, and manual toilet flush	Make w/cs sensor flush	To Be Completed
		Change hand dryer in 1 wc from manual to automatic	12/7/20
	Hand Sanitiser Availability	Add Hand Sanitiser push operation to: LGF at bottom of stairs First Floor: by room 5 Second Floor: by room 8 Brasserie: by entrance door inside Buy 4 dispensers and 2*5L Jugs sanitiser	15/7/20 4/4/20
		We have considered hand sanitiser on each table/in w/c and in each room.	

	We need to supply appropriate PPE to staff and customers to reduce risk of transmission	Typical mitigations are:	
4.0	PPE		
		Covid policy repeated in each room Covid policy on back of public wc doors	
	Information	Clear and large sign in reception hall stating COVID policy	15/7/20
		Menus: all menus to be replaced by single use disposable menus	10/7/20
		bannisters, wipe every 50 min with polish	10-15/7/20
		Till Ipads, printer, till box: wipe every 30 mins Bannisters, wipe every 30 min with polish	Training
		at during shift or wiped between users	
		Keyboard & Reception Phone: at start of each shift and used only by receptionist	
	equipment/menus/guest books in rooms	Card Machine: - wipe each time it is used	
	keyboard/reception phones/till screens and	Guest Book – wipe each page during HK	
	High touch: Card Machine/Reception	High Touch: Disposable wipes to be used	
	and stairs	entrance hall and one in lobby at bottom of stairs. 2-3 in brasserie	2/7/20
	around reception desk/brasserie/kitchen/w/c	2m foot stand on stickers as a guide to gests. One in front of reception, on in	- 1- 1
	Footfall: entrance hall, circulation space	Screen in front of reception	2/7/20
	High touch and high footfall items/areas	Footfall:	
		All three of the above to be reviewed as government guidance develops	
		may be the wrong incentive. Signs on W/C doors to remind people to Wash Hands & COVID rules	15/7/20
		In w/cs we think that hand washing is better than sanitising so having sanitiser	
		each table is needed as it can be used at each entry/exit to brasserie.	
		not think sanitiser in each room is needed. Similarly, we do not think sanitiser on	
		Given rooms will be a clean environment and doors can be elbow opened we do	

	Regular hand washing/sanitising: We can enforce this by staff, but only request it	
Potential transmission routes:	of customers.	
Direct: Breath to breath customer-staff and		
vice versa	PPE: Masks; goggles/visors; gloves	
ndirect: Via surfaces suctemer staff	HK: masks, eve protectors and gloves while using shemicals, but not gloves for	
nuirect. Via surfaces-customer-stan		
ndirect: Via virus on prepared food and	rooms	
plates/glasses/cutlery		
	Kitchen: masks, & regular hand wash. Kitchen staff wash hands between actions	
	in any case. This to be re-enforced. Masks to be used while doing any food prep	
	or service or cleaning	
	9	
	Restaurant: see below	
Restaurant Service:	See later section on operating plan for restaurant	
ransmission from surface to hand to surface		
petween both staff and customers. Staff need	my someone with a covered face and a guest cannot eat a meal with a face mask	
to handle plates/glass both for service to	on. We have provided booths for customers and staff will maintain distance	
customers and to clean away. Staff will serve	from customers except when serving and clearing plates which will be done from	
multiple customers so could transfer between	the end of tables. In the absence of specific guidance staff wearing masks will be	
customers	optional.	
	•	
	, ,	
	customers.	
	Visors: Potentially less obtrusive than masks but do they limit breath risk as	
	· · · · · · · · · · · · · · · · · · ·	
	mach optional for staff	
	Direct: Breath to breath customer-staff and vice versa Indirect: Via surfaces-customer-staff Indirect: Via virus on prepared food and plates/glasses/cutlery Restaurant Service: The risks are transmission through breath or ransmission from surface to hand to surface between both staff and customers. Staff need to handle plates/glass both for service to customers and to clean away. Staff will serve multiple customers so could transfer between	of customers. Direct: Breath to breath customer-staff and vice versa of customers. PPE: Masks; goggles/visors; gloves HK: masks, eye protectors and gloves while using chemicals, but not gloves for other cleaning. Clean one room at a time. Wash hands and sanitise between rooms Kitchen: masks, & regular hand wash. Kitchen staff wash hands between actions in any case. This to be re-enforced. Masks to be used while doing any food prep or service or cleaning Reception: Regular hand wash/sanitise (every 30 min). Can work behind screen and therefore no need for either mask or gloves Restaurant Service: The risks are transmission through breath or ransmission from surface to hand to surface between both staff and customers. Staff need on handle plates/glass both for service to customers and to clean away. Staff will serve multiple customers so could transfer between untiple customers so could transfer between the end of tables. In the absence of specific guidance staff wearing masks will be

		Limit service to 1 person behind the bar so that staff are socially distanced (will	
		limit no of covers) visible hand cleaning between each service action	
		,	
5.0	Check-In/Check Out Risk Reduction		
	Objective is to reduce loitering contact time at	Limit no of people at reception desk by having clear floor markings.	
İ	reception and limit surface to surface transfer	Check In Process:	
Ī		Remove need to guest to sign registration form	
		Still talk guest through their booking	
Ī		Check guest payment card number and expiry date; guest to read out	
		information not hand over card.	
		Key and fob wiped with antiviral wipe as handed over to guest	
		Guest directed to room NOT shown to room.	
		Guest who wants help with bags, bags to be delivered to room after the guest	
		has gone up the stairs and only when the stairs are free of people	
		Check Out Process	
		Bill (till receipt) to be put in envelope under guest door overnight. Instructions	
		for guest to sign bill (if happy with it) and had key and bill to reception. Guest	
		will not be asked to insert card in card machine and give pin. Guest authorisation	
		is for guest to put through card holder not present transaction.	
		Guests can leave luggage, handles to be anti viral wiped when taken and	
		returned to guest.	
6.0	Breakfast		_
	Risks are having too many people in the	Restaurant Layout adjusted with less tables and screes. Capacity reduced to six	P
	brasserie at any one time and having too	tables of 2 or 4 covers, so between 12 and 24 covers	
	many people in circulation spaces.		
		Room Service	
	Risks are surface to surface and body to	Offer free room service breakfast.	
	surface to body transmission	Process will be to complete a breakfast pre-order form the night before and sign	
		up for a breakfast time. Time slots staggered every 15 mins from 07:45.	
		Breakfast prepared on try and left on tray stand outside the room. Guest	

knocked on door to tell them it is ready for collection from tray stand. Guest asked to leave breakfast in room once complete. Equipment: 3 tray stands (one for each floor positioned on the floor corridor) 10 large round trays Smaller breakfast plates Cloches to keep food warm and tray rings to stack hot food plates Tea and coffee in flasks/thermal cafetieres? 20 off Cutlery pre folded in napkins Juice in glasses with paper covers Cups turned upside down on saucers Butter/marg/jams in portion sachets Toast in toast rack – should this be covered? Milk in jug with cling film cover? Single use breakfast menu with tick box **Restaurant Service** Tables stripped except something to make them look good (see above) **Table Numbers** Tables that can be used to be obvious to maintain social distancing Guest pre-book time slot One person serving breakfast Menu sheet on table: order taken by waiter First service: tray prepared: Cutlery in napkin, condimets, jams/butters, juice, milks, tea/coffee in flask, toast on toast rack, cereal (if ordered) all delivered at one time. Second service: only to delivery main course hot meal and clear to tray any used plates. Tables cleared only when the guests have left the tables.

		All single use materials to be binned. Condiments not used returned to 24hr holding box before being used again
		Condiments to be taken from covered boxes and placed in holder for use by customer. Condiment jars not to be made up and left standing?
7.0	Casual Drinks/Coffee in lounge or room	
	Risk is breath to breath between staff/customer and person-surface-person transfer via cups/glasses etc that are handled by both staff and customers	Single use drinks menu Order taken from more than 2m away Staff handwash before making up order Drinks made up as normal – ice/lemons etc kept in covered holders and used by cleaned scoop, tongs or single use toothpick Drinks taken on tray and tray deposited adjacent to guests for them to take the drinks from. Ensure guest groups are seated 2m apart Drinks to rooms served on tray left on tray stand outside room
8.0	Dinner in Restaurant	
	Risk is breath to breath between staff/customer and person-surface-person transfer via cups/glasses etc that are handled by both staff and customers	Limit number of tables to allow social distancing and screens Limit total number of covers and phasing of covers to enable service to be delivered by one table staff and one kitchen staff Limit the number of times a waiter physically visits a table Guest arrival at reception: check booking at reception. Guest directed to coat stand, told where w/cs are and told where their table is. Need icon chart with table numbers visible at restaurant entrance. Guest to self hang coats and self seat at a specified numbered table
		Tables bare except for table dec, table number and single use menus for food and drinks. Waiter to explain menu and take drinks order.

		Drinks made up as above and served to table	
		Each course served to table All 2 or 4 or 6 customers served at one time.	
		Similarly clearing at the end of each course. The waiter do this.	
		Tables cleaned as per normal once guest has left.	A
		Bill paying: still accept card or cash. Bill to guest on platter as normal. Guest to pay by card: card machine taken to guest and wiped in-front of them. Bill preentered in machine and guest just put card in and do pin number. Waiter to wear mask and stand back while pin being entered. Card machine wiped after use.	А
		Cash: cannot avoid handling and risk. Staff asked to sanitise/clean hands after each time they handle cash.	
9.0	Dinner in Room		
3.0	See breakfast	See breakfast – essentially the same process and mitigation as breakfast in room.	
10.0	House Keeping		
	Person-Linen/Towelling-Person transfer of virus	Make sure that washing/drying cycle of supplier laundry and our laundry is good enough to eliminate Covid. See prime risks above OK	
	Risk is breath to breath between staff/customer and person-surface-person transfer via cups/glasses etc that are handled	Limit the circulation of HK staff and customers. Start HK at 10:00 or 11:00 and finish at 15:00. 11-15 is 4hrs	
	by both staff and customers	Each HK to a floor. Not HK's on same floor or in same room.	
		HK with Mask, eye protectors and gloves optional	

	Clean and or tidy room as normal. However DO NOT use re-usable polishing and wiping cloths. Use single use cloths for all wiping/polishing actions and bin after use or for washable cloths put in wash pile but do not use in separate rooms	
	Use disposable wipes on TV wand and phone wand and all switch plates, and all door handles.	
	Once room is clean, wipe door handles inside and out before leaving room.	
	Wash hands between cleaning rooms	