

# Process Risk Assessment

## Building Cleaning

<b>A Administration Section</b>	Company:	Service:	Location:
Date:	Reference:	Assessor:	Manager:

**B Assessment of risk for:** **Cleaning of Washroom/Toilet Areas**

C List Hazards Here	List Groups of People at Risk	Cat	List Existing Controls
1 Slips, trips and falls.	Cleaning operatives and all other users of the buildings.	High	All operatives undertake appropriate Induction Course that includes specific guidance on effective infection control.
2 Contact injuries to skin.	Cleaning operatives.	Medium	Supervisor provides in-situ, practical training to all new starters in colour-coding systems used, in compliance with the agreed procedures. All operatives are issued with adequate stocks of appropriate colour-coded equipment.
3 Splash injuries to eyes and skin.	Cleaning operatives.	Medium	All operatives are issued with Health and Safety Policy containing Best Practice Guidance.
4 Injuries caused by inhalation of noxious/poisonous fumes.	Cleaning operatives.	Low	All operatives are made aware of the contents and location of a comprehensive COSHH Risk Assessment file which is held on site. The file is updated annually and also includes hazard data sheets produced by manufacturers of all products used.
5 Infections contracted through exposure to bodily fluids.	Cleaning operatives.	Medium	All operatives are issued with appropriate Personal Protective Equipment and provided with guidance in its safe and proper use.
6 Needlestick injuries.	Cleaning operatives and other users of the building.	Low	Warning signs are placed at the extremes of work area during all operations to restrict access of other users of the building.  All operatives are instructed to wear appropriate footwear that provides adequate whole-foot protection.  All operatives are made aware of the relevant First Aid procedures.

<b>D Controls</b>		<b>E To be completed by manager</b>			
<b>Additional controls required</b>	<b>Action to be taken</b>	<b>By whom</b>	<b>Completion date</b>	<b>Task completed (signed and dated)</b>	
<p><b>Ser No.:</b></p>					
<b>Copies:</b>					
		<b>Assessment review date:</b>			
		<b>Signed:</b>			
		<b>Name (in capitals)</b>			
		<b>Date:</b>			

<b>F This risk assessment is cross-referenced with:</b>		<b>COSHH risk assessments</b>	<b>Other documents</b>