|  |  |
| --- | --- |
| Premises Name & address |  |
| Contact name & details |  |
| Form completed by |  |
| Date / Time  |  |

Environmental Health & Trading Standards have developed this form to assist with verifying that all significant Covid-19 controls are being implemented. You should also refer to Scottish Government guidance which can be found on their website:

<https://www.gov.scot/collections/coronavirus-covid-19-guidance/#culture,events,retail,hospitalityandtourism>

|  |
| --- |
| **RISK ASSESSMENT** |
| 1 | Have you completed a COVID-19 risk assessment? This should include all persons who attend your premises including employees, customers, and visitors/contractors including delivery drivers.A template is available here: <https://www.eastlothian.gov.uk/info/210634/covid-19/12514/guidance_on_reopening_businesses> |  | ? |
| 2 | Have you reviewed the risk assessment regularly to reflect any changes from Scottish Government? |  | ? |
| 3 | If you have fewer than five employees, you do not have to write your risk assessment down, but it might help if you do. You will still be required to demonstrate that you have adequately assessed all risks.  |  | ? |
| **ENTRY TO THE PREMISES** |
| 4 | What system do you have in place to ensure staff are fit for work and are not exhibiting symptoms? |  | ? |
| 5 | How is this recorded? |  | ? |
| 6 | What information have staff been given on whether they have concerns about attending work (i.e. whether they or anyone they live with have symptoms)? |  | ? |
| 7 | How is this recorded? |  | ? |
| 8 | Do you carry out any controls before allowing customers or visitors access to the premises?(e.g. ask at the point of booking/entry that no one in the party or anyone they live with has been displaying symptoms of COVID-19)? |  | ? |
| **GATHERING CUSTOMER INFORMATION** |
| 9 | Have you implemented a table booking system? |  | ? |
|  | If **YES**, please provide details of what this is, including any time limits. |  | ? |
| 10 | Are you accepting walk-ins? |  | ? |
|  | If **YES**,how do you collect these customer details? |  | ? |
| 11 | What details are you taking? *Minimum is name and telephone number of at least one member of each household. Arrival time and number from each household visiting.* *Where possible time leaving and table number can also be useful for Test & Protect* |  | ? |
| 12 | What system do you have in place to ensure bookings are made in accordance with the law and guidance? |  | ? |
| 13 | How are staff supported to deal with challenging customers?  |  | ? |
| **PHYSICAL DISTANCING & QUEUE MANAGEMENT** |
| 14 | What do you have in place to control physical distancing? *one-way systems, markings on the floor, staff direction etc* |  | ? |
| 15 | What is the maximum capacity of your premises (both indoor and outdoor seating areas, where applicable)? |  | ? |
| 16 | Are you implementing 1m physical distancing on your premises? Complete question 17Are you implementing 2m physical distancing on your premises? Complete question 18 |  | ? |
| 17 a | Is there clear signage in place to alert customers that they are entering a 1m area? |  | ? |
| 17 b | Have you spaced tables and chairs so that different households are seated at least 1m apart including circulation space? |  | ? |
| 17 c | Do all service staff who will not be behind a barrier/screen have access to adequate supplies of face coverings? Remember that a visor alone is no longer appropriate. |  | ? |
| 17 d | How have you increased ventilation throughout the premises? |  | ? |
| 18 | If you are operating 2m distancing, have you spaced tables and chairs so that different households are seated at least 2m apart, and that staff can maintain 2m from customers at all times? |  | ? |
| 19 | What system do you have in place to avoid queuing/crowding for WCs? |  | ? |
| 20 | How are you ensuring that physical distancing is maintained within toilet and handwashing facilities? |  | ? |
| 21 | Have you removed seating at the bars on your premises? |  | ? |
| 22 | What system are you operating for customers to make orders from their table? |  | ? |
| 23  | What system do you have in place to control queuing outside your premises?*2m spacing, markings on the ground, staff management of the queue etc* |  | ? |
| **CLEANING & HYGIENE**  |
| 24 | What additional cleaning controls have you implemented? *cleaning schedule, chemicals used, frequency etc* |  | ? |
| 25 | What areas have you considered to be “high touch”?*Handles, card machine, light switches, shared equipment etc* |  | ? |
| 26 | What handwashing facilities are available for staff?*Remember 20 second wash advice* |  | ? |
| 27 | Where have you provided hand sanitiser for use by staff and customers? |  | ? |
| **BACKGROUND NOISE** |
| 28 | Are music systems switched off? |  | ? |
| 29 | Are TVs muted with subtitles? |  | ? |
| **ACTION AFTER A SUSPECTED OR CONFIRMED CASE** |
| 30 | What plan is in place should a suspected or confirmed COVID-19 case relate to* Staff
* Customer
* NHS Test and Protect
 |  | ? |
| **FACE COVERINGS**  |
| 31 | Customers & visitors are required wear a suitable face covering whilst on or moving around the premises. For hospitality – customers are exempt whilst seated for food and drink consumption.Please bear in mind some people may be medically exempt from this requirement. | Comments: | ? |
| **NEW BUSINESS ACTIVITIES**  |
| 32 | Are you planning any changes in business activities or layout? *This includes Christmas products or activities*Please provide details and ensure it is included in your risk assessment. |  | ? |

|  |
| --- |
| **ANY OTHER COMMENTS OR QUESTIONS?** |
|  |