<<Insert Company Name>> COV Job Assessor **Assessment Location** Persons at Risk The risk assessment and controls/measures below have be and to eliminate/reduce the potential for infected person according to both the premises and tasks undertaken by st This risk assessment has been completed in accordance v Secure Notice are on display at selected parts of the Locat **Factors Causing Spread of Virus Action Required**

C Assessment		RA Ref No:		
Assessment Date		Review Dates		
		ractors and visitors in resposes, and to maintain socia		
nce on man	aging the ri	sk of COVID-19. Copies o	f the signed (COVID-19
	Further Measures			
	Actioned I	Ву		Date

Workplace Premises			S	
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			A	
Action Required			M	
Workplace Tasks				
			P	
Action Required				
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Assessor's Signature

Approver's Signature:

Approved by

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