



SCHOOL FULL CAPACITY - RISK ASSESSMENT

1. Assessment No:	StJCPS/COV19 - 4 (Issue 2)		
2. Activity/Process:	CONTAINMENT		
Assessment Date:	July 2020		
Assessor:	BBH		
Next Review Due:	As and when required by authority directive		
3. Number of Persons at Risk:		Employees	Others
	1	<input type="checkbox"/>	<input type="checkbox"/>
	2-5	<input type="checkbox"/>	<input type="checkbox"/>
	6-10	<input type="checkbox"/>	<input type="checkbox"/>
	10 Plus	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<p>4. Hazards:</p> <ul style="list-style-type: none"> a) Staff member becomes unwell during the school day with Covid-19 symptoms¹ b) Child becomes unwell during the school day with suspected Covid-19 symptoms^{2 and 3} c) School advised that a child's family member has become unwell with suspected Covid-19 symptoms (child in school at the time) <p>1. E.g. a new continuous cough, high temperature, sore throat, headache, onset of respiratory difficulty, loss of smell and/or taste</p> <p>2. The first 5 symptoms documented above are relatively easy to recognize in both children and adults. The loss of senses however will only be realised by the affected person and children cannot be expected to offer this information</p> <p>3. Children of families with a BAME origin may also display additional symptoms that are similar to toxic-shock: (a sunburn like rash, reddened eyes, nausea and vomiting, diarrhoea, dizziness, fainting, and acute tiredness) as well as abdominal pains and/or gastrointestinal problems</p>			
<p>5. Proposed procedures/controls:</p> <ul style="list-style-type: none"> • Establish two Isolation Zones, an Isolation Room inside the school, and an outdoor Isolation Area • Equip both Isolation Zones with 'Standard' PPE and sanitization materials • Remove all non-essential items and/or furniture from the Isolation Zones • If an Isolation Zone is activated a specific toilet will be assigned for Isolationist use only <ul style="list-style-type: none"> ○ An activated Isolation Zone must not be used again for a period of 72 hours after being vacated ○ The Isolation Zone will then undergo a 'Deep Clean' before being declared as available ○ An activated Isolation Zone toilet must not be used again for a period of 72 hours after the Isolation Zone has been vacated ○ The Isolation Zone toilet will then undergo a 'Deep Clean' before being declared as available • All used PPE is to be 'double-bagged' and held in a safe area for 72 hours before disposal • Appoint a First Aid qualified staff member to assist where necessary 			

- Engage the HPT and NHS Test and Trace system if a case of Covid 19 infection is suspected or proven [see PHE Guidance extracts below]

- a) The staff member is to immediately advise other staff and recover to an Isolation Zone with any personal belongings

The staff member is to perform a rigorous sanitization protocol, and don PPE including a Face Mask

The staff member is to arrange for their own transport to their home. If necessary, an appointed First Aider may be required to assist in calling for an Ambulance

- b) The First Aider (a supervising adult) is to be alerted and called to assist; the First Aider is to don PPE including a Face Mask before attending to the child

The child is to be taken to an Isolation Zone; personal items are to be 'bagged-up' and stay with the child

The child is to carry out a sanitization protocol and don PPE including a Face Mask (a Face Visor is available but not essential); the First Aider may have to assist in both actions

The school is to notify the child's parents immediately¹ and advise that the child needs to be taken home without delay and undergo an NHS Test & Trace procedure asap. The parent should be asked to provide the test result as soon as it known

The collection point will be at the schools' main entrance gate

1. In the event of BAME child, urgent medical intervention may be needed; if the parent is not readily available to collect the child quickly, consider calling for an Ambulance

- c) The First Aider (a supervising adult) is to be alerted and called to assist; the First Aider is to don PPE including a Face Mask before attending to the child

The child is to be taken to an Isolation Zone; personal items are to be 'bagged-up' and go with the child

The child is to carry out a sanitization protocol and don PPE including a Face Mask (a Face Visor is available but not essential); the First Aider may have to assist in both actions

The parent is to be urged to collect the child without delay from the school's main entrance gate

The child should undergo a test via the NHS Test & Trace system before deciding on further admission into school; the parent should be asked to provide the test result as soon as it known

Note: In both cases of b) and c) the child may be distressed, so considerable care and compassion may well be required throughout the procedure

- In all cases parents of all children in the school are to be advised of the occurrence and any follow-up action that the school plans to implement
- In the cases of a) and b) the affected classroom is to undergo a 'Deep Clean' before further use
- All soft material PPE used during the occurrence is to be 'double-bagged' and left in a safe area for 72 hours before eventual disposal (Eye Protection/Face Visors etc. may be retained, left idle for 72 hours and then subjected to a Deep Clean procedure)
- The First Aider should perform a sanitization protocol before and after removing the PPE
- The PHE HPT is to be advised of the instance¹; request their advice and instigate a Coronavirus Testing and/or a Tracing and Tracking procedure [See the PHE Guidance below]
- If the affected individual subsequently tests positive, the rest of their school group and staff members are to remain at home and self-isolate for 14 days
- If several individuals from the same group develop symptoms the LA will be advised to alert PHE who will then initiate wider testing and provide appropriate directives according to their findings
- See the PHE Guidance and extract (attached below) for details on all of the above

1. If the suspected case is a BAME child, ensure that the HPT are made aware of this

<p>6. The Residual Risk(s) Remaining: (After implementation of proposed procedures)</p> <ul style="list-style-type: none"> • School advised of a Positive Covid-19 instance overnight, child, or staff member 	<p>Risk Rating:</p> <p>Likelihood x Severity = Rating/Action</p> <p>3 x 4 = 12 Revise Procedures - Stop All</p>
<p>7. Additional procedures suggested/required: (Reduce residual risks if practicable to a Risk Rating of 4 or below)</p> <ul style="list-style-type: none"> • Parents are to be advised that a child is not to attend school if the child or any member of the home family develops, or is showing signs of, Covid-19 symptoms • PPE in each 'PPE EMERGENCY' box, including those in the Isolation Zones (for patient use) includes: <ul style="list-style-type: none"> - Eye Protection/Face Visor - Oro-Nasal Face Mask - Apron/Poncho - Gloves 	
<p>8. Headteacher Approval:</p> <p>Date Implemented: 1 Sept 2020 Procedures Effective: Yes/No</p> <p>Comments:</p> <p>Signed and Appointment: (Headteacher St Joseph's Primary School)</p> <p>Name: Mrs Susan Woods</p> <p>Next Review Date: As determined by an Authority directive that requires changes to the implemented procedures</p>	
<p>9. Chair of Governors Awareness:</p> <p>Date: 1 Sept 2020 Procedures Effective: Yes/No</p> <p>Comments:</p> <p>Signed and Appointment: (Chair of Governors St Joseph's Primary School)</p> <p>Name: Mrs Nuala Oughton</p>	

RISK RATING		RATING ACTION BANDS	
LIKELIHOOD	SEVERITY OF HARM	RATING BANDS	ACTION REQUIRED
1. Most unlikely	1. Minimal	1 Minimal Risk	Maintain Procedures
2. Unlikely	2. Requires isolation	2 - 4 Low Risk	Monitor Procedures
3. Likely	3. Requires quarantine	6 - 9 High Risk	Improve Procedures
4. Most Likely	4. VSI/Fatal	12 -16 Very High	Revise Procedures - stop all



Public Health
England



Putting on personal protective equipment (PPE) for non-aerosol generating procedures (AGPs)*

Please see donning and doffing video to support this guidance: https://youtu.be/-GncQ_ed-9w

Pre-donning instructions:

- Ensure healthcare worker hydrated
- Tie hair back
- Remove jewellery
- Check PPE in the correct size is available

- 1** Perform hand hygiene before putting on PPE.



- 2** Put on apron and tie at waist.



- 3** Put on facemask – position upper straps on the crown of your head, lower strap at nape of neck.



- 4** With both hands, mould the metal strap over the bridge of your nose.



- 5** Don eye protection if required.



- 6** Put on gloves.





Taking off personal protective equipment (PPE) for non-aerosol generating procedures (AGPs)*

Please see donning and doffing video to support this guidance: https://youtu.be/-GncQ_ed-9w

- PPE should be removed in an order that minimises the risk of self-contamination

- Gloves, aprons (and eye protection if used) should be taken off in the patient's room or cohort area

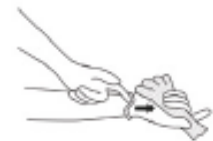
1 Remove gloves. Grasp the outside of glove with the opposite gloved hand; peel off.

Hold the removed glove in the remaining gloved hand.



Slide the fingers of the un-gloved hand under the remaining glove at the wrist.

Peel the remaining glove off over the first glove and discard.



2 Clean hands.



3 Apron.
Unfasten or break apron ties at the neck and let the apron fold down on itself.



Break ties at waist and fold apron in on itself – do not touch the outside – **this will be contaminated.** Discard.



4 Remove eye protection if worn.
Use both hands to handle the straps by pulling away from face and discard.



5 Clean hands.



6 Remove facemask once your clinical work is completed.

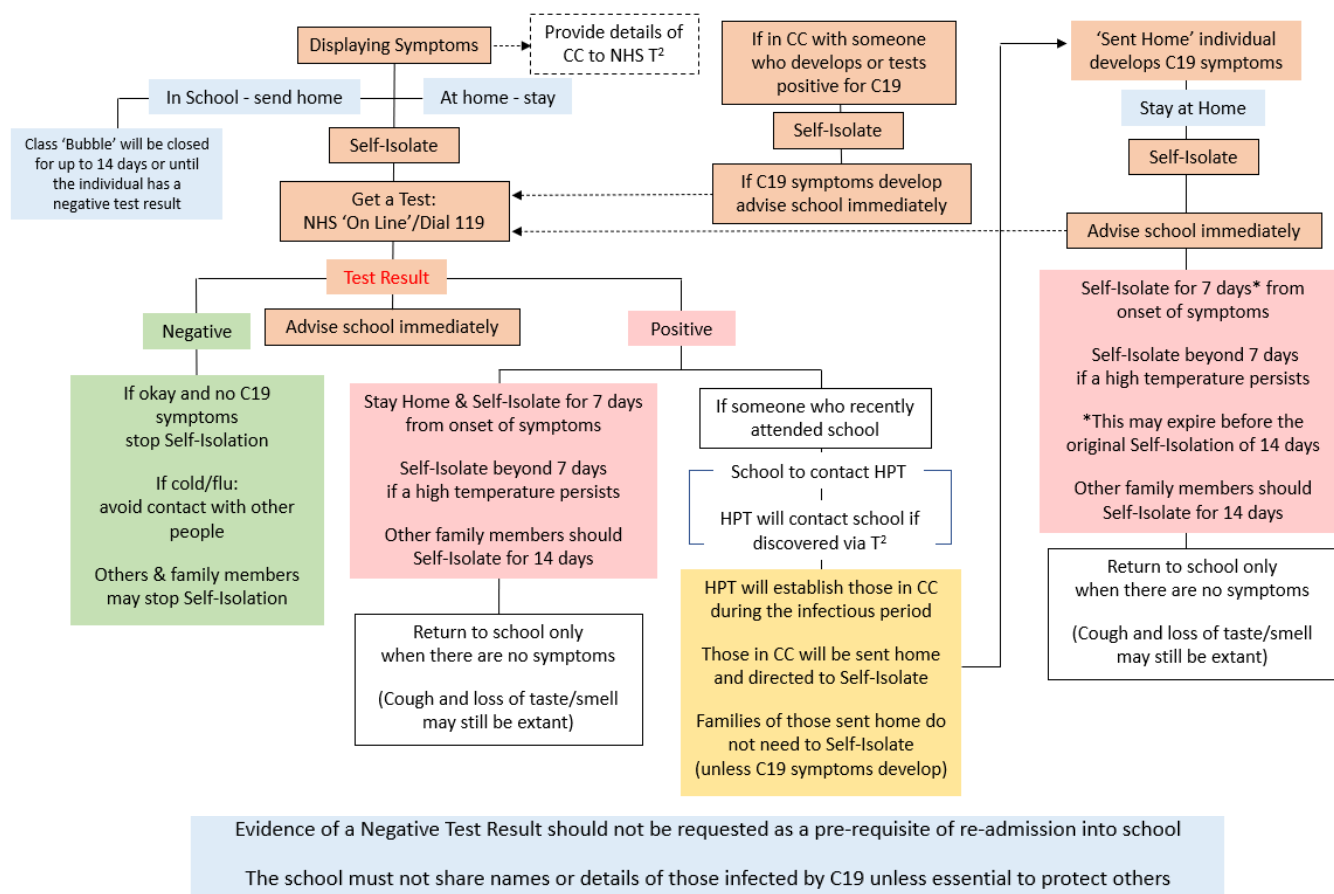
Untie or break bottom ties, followed by top ties or elastic, and remove by handling the ties only. Lean forward slightly. Discard. **DO NOT** reuse once removed.



7 Clean hands with soap and water.



PHE Guidance, Section 1: Individuals Personal Response Actions to an Infection. v1.0 Issued 2 July 2020



Notes:

- Essential Workers (which includes Teachers) have a T² priority
- Schools will be supplied with Home Test Kits to be given to parents of children who are being sent home with suspected C19 symptoms
- Shielding advice is being withdrawn from 1 August 2020
- Those who are living with family members who are shielding can return to school
- If 2 or more cases of C19 Infection are discovered within a 14-day period the HPT may declare 'An Outbreak'
 - In this instance the HPT will announce the measures to be applied, who and how many will be required to Self-Isolate
 - The closure of the school will only be implemented if directed by the HPT
 - A Mobile Test Unit will undertake to test all those who have been in contact with the C19 infected individuals with the initial tests being conducted on classmates and other school personnel if the HPT deem it necessary

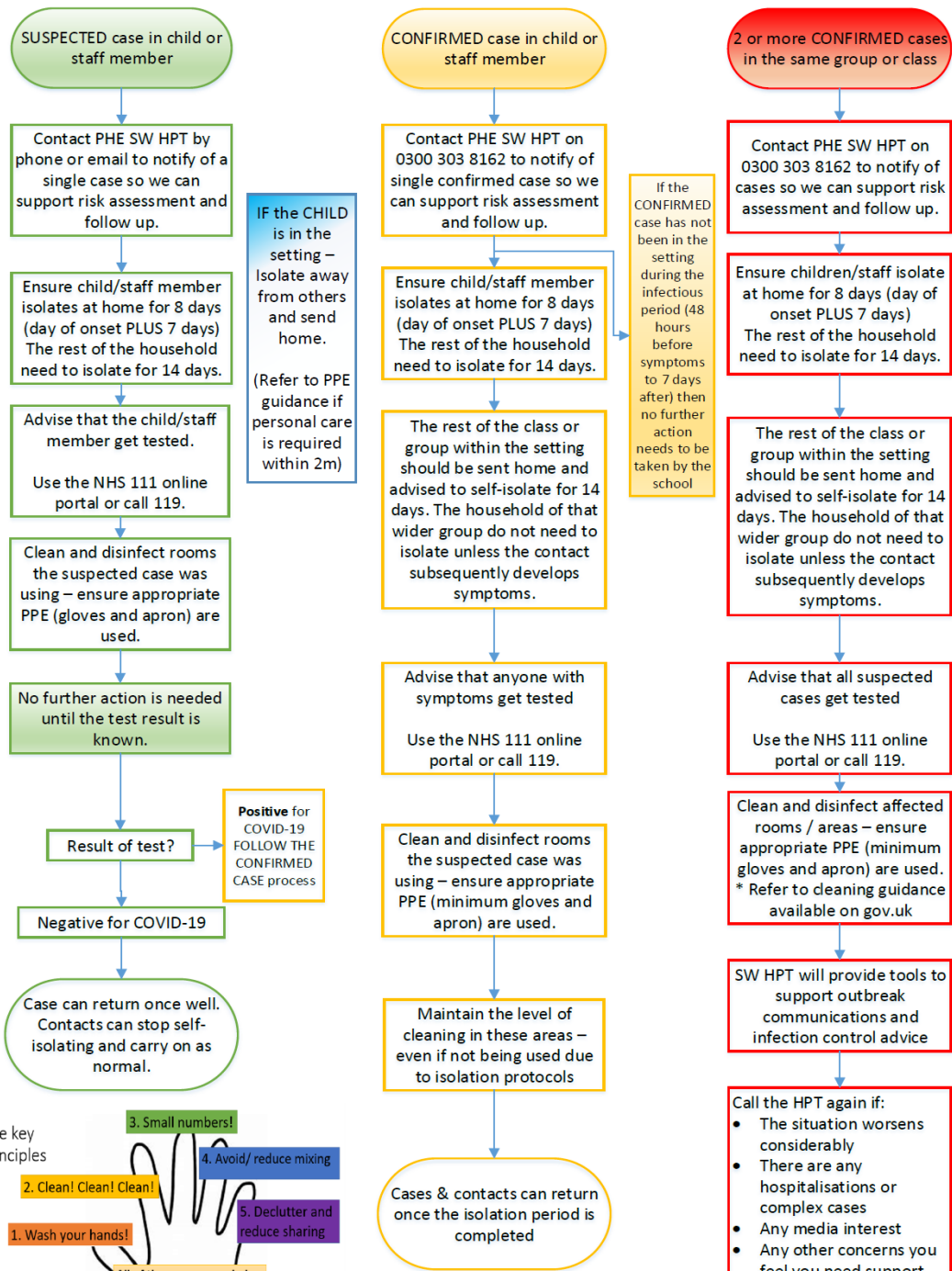
Abbreviations used:

- CC - Close Contact
- HPT - Health Protection Team
- T² - Test and Trace
- C19 - Coronavirus (Covid 19) infection

Definition:

Close Contact - 'Face to Face', including conversations, for any amount of time within 1m
 Extended conversation of over 15 minutes and within 2m s
 If coughed on
 Any unprotected physical contact
 Travelling in a confined space (a vehicle)

PHE Guidance (Extract): Management Headteacher Response Actions to an Infection v3.0 - Issued 5 June 2020



COVID-19 Case Definition: (as of 18/05/20)

- A high temperature
- A new, continuous cough
- A loss of, or change to, your sense of smell or taste

INFECTIOUS PERIOD:
48 hours before the onset of symptoms to 7 days after onset.
IF case has no symptoms but a positive test, it is 48 hours prior to test

Cleaning:
For detailed guidance refer to the guidance on gov.uk:

Routine measures during COVID-19 pandemic should already be to outbreak standard.

PPE should be worn for cleaning – minimum gloves and disposable apron. Consider using face mask and eye protection if risk is high – i.e. cleaning areas where there are visible bodily fluids.

Public areas (e.g. corridors – clean as normal)

Surfaces that could be contaminated need cleaning and disinfection.

All frequently touched surfaces (door handles, taps, table tops, keyboards etc.) should also be cleaned and disinfected.

Use disposable cloths or paper roll, disposable mop heads to clean hard surfaces (e.g. floors, sanitary fittings, chairs, tables)

Use a combined detergent and disinfectant or use a two-stage cleaning process of detergent (household type cleaner) followed by a hypochlorite solution (1000ppm) e.g. diluted Milton. [Check chemicals in use are effective against enveloped viruses]

Avoid splashes and spray when cleaning where possible.

Waste: Any COVID-19 related waste should be double-bagged and stored for 72 hours before usual disposal.

