Staffordshire County Council General Risk Assessment Record Form

CHURNET VIE WMIDDLE SCHOOL

Assessor(s) S FRYER / S BURGESS

Schools full opening September 2021 - Minimising the risk of transmission of COVID-19 Version 9

What are the hazards?	Who might be harmed and how?	What are you already doing? List the control measures already in place	What is the risk rating – H, M, L? See section 5	What further action, if any, is necessary, if so what action is to be taken by whom and by when?	Action Completed State the date completed and sign.	What is the risk rating now – H, M, L? See Section 5
Exposure to COVID-19 through contact with an infected person. The virus is spread in minute water droplets that are expelled from the body through sneezing, coughing, talking, and breathing. These particles can be breathed in by another person. The particles can also land on surfaces and be passed from person to person via touch. Particles can survive on surfaces for a period after transfer (depending on such things as the surface	Everyone on site. General transmission may occur: Through close contact between colleagues, pupils and visitors and touching contaminated surfaces.	 Anyone with COVID-19 symptoms, has a positive test result or is required to isolate or quarantine does not attend school. Anyone developing COVID-19 symptoms during the school day is sent home and procedures followed to manage transmission risks. Symptomatic staff and pupils advised to access testing. Home test kits offered to individuals who would not be able to access testing by the normal testing routes. Staff and secondary pupils provided with 2 lateral flow device tests 3 to 5 days apart to use prior to return to school. Twice weekly home testing for staff and (secondary) pupils until the end of September. 	M L L	 Contingency/Outbreak Management Plan developed outlining extra actions to be taken if there is an outbreak in school or local area, if advised to take extra measures or to respond to a Variant of Concern. Follow advice given by local outbreak/health protection teams. Encourage staff and parents to engage with Test and Trace process and to inform them immediately of the results of a test. Rapid testing (LFDs) encouraged and promoted. Review COSHH 	20/09/21 SJB	

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type, its moisture content and temperature).		 Active engagement with NHS Test and Trace service. Aware of LA Local Outbreak Control Plans. Attendance in school in line with national/local restrictions. Staff and eligible pupils encouraged to have COVID-19 vaccination. Frequent handwashing is regular practice. Hand sanitiser available in classrooms, shared spaces, entrance and exit points and twice daily sanitising of pupils before school and after lunch. Good respiratory hygiene encouraged by promotion of 'catch it, bin it, kill it' approach. Cleaning schedule includes regular cleaning of areas and equipment with a focus on frequently touched surfaces. Ventilation in the building maximised by opening windows, doors or using ventilation units. Control measures in place for staff and pupils who are clinically vulnerable or at higher risk. 		assessment for hand sanitiser and cleaning materials. Signage to promote hygiene. Maintain stocks of soap, hand sanitiser, number of hand sanitiser stations, tissues. Consider if skin friendly cleaning wipes are needed for younger children and pupils with complex needs. Disposable tissues available in classrooms and bins for tissues emptied regularly. Review number, type and location of waste bins consider replacing with foot operated. Poorly ventilated areas identified, and steps taken to improve fresh air flow in these areas. Ensure increased ventilation measures do not compromise pupil or		

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		 Wellbeing support in place for staff and pupils. Staff, pupils, parents and visitors informed of the measures in place to reduce transmission. Risk assessment reviewed following changes in guidance and national/local restrictions. 	L	staff safety. Review how good ventilation is achieved whilst maintaining a comfortable environment. Individual risk assessments carried out for staff and pupils who are clinically extremely vulnerable or at higher risk. Review team stress risk assessment. Consider publishing risk assessment on school website.		

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Exposure to COVID-19 The virus is spread in minute water droplets that are expelled from the body through sneezing, coughing, talking, and breathing. These particles can be breathed in by another person. The particles can also land on surfaces and be passed from person to person via touch. Particles can survive on surfaces for a period after transfer (depending on such things as the surface type, its moisture content and temperature).	Pupils Transmission may occur: When travelling to and from school When arriving and leaving school.	 Dedicated school transport arrangements and plans revised. Pupils aged 11 and over wear a face covering on public and dedicated transport (unless exempt). Vehicles are well ventilated when occupied. Active travel promoted. Parents, staff, and pupils encouraged to walk, scoot or cycle to school. Staff, pupils and visitors informed to wash/sanitise hands on arrival at school. 	L	 Discuss transport arrangements with providers, LA and parents. Contingency supply of face coverings available where pupils cannot access a face covering, where they have forgotten it or are unable to use their face covering due to having become soiled/unsafe to use. Review of cycle storage facilities. Review arrangements for parents to "drop off" pupils. 		

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Exposure to COVID-19 The virus is spread in minute water droplets that are expelled from the body through sneezing, coughing,	Staff and pupils. Transmission may occur when providing personal or intimate care	 PPE provided (such as disposable gloves, disposable apron) Hand washing before and after providing care. 	M L	Staff using PPE instructed on the safe "donning and doffing" of PPE. Review personal care plans to assess PPE requirements.		

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talking, and breathing. These particles can be breathed in by another person. The particles can also land on surfaces and be passed from person to person via touch. Particles can survive on surfaces for a period after transfer (depending on such things as the surface type, its moisture content and temperature).	Staff and casualty. Transmission may occur when providing First Aid	 Wash/sanitise hands before and after treating a casualty. Minimise time sharing a breathing zone. Wear appropriate PPE (such as disposable gloves, disposable apron). When directly treating people with symptoms of COVID-19 a fluid repellent surgical mask should be worn and eye protection may be needed where there is a risk of body fluids entering the eyes. When performing CPR: Call an ambulance Use chest compressions or defibrillator Use a cloth or towel to cover the casualty's mouth and nose while still permitting breathing Use PPE – gloves, apron, fluid repellent surgical mask, eye protection. 	M M M	 Review first aid needs assessment and PPE requirements. First aiders instructed on the safe "donning and doffing" of PPE. Maintain stocks of PPE. Where this is not available contact LA. Emergency.ppe@staffordshire.gov.uk List of LA PPE suppliers communicated to schools. Special schools may be able to access PPE Portal Resuscitation Council UK advice: https://www.resus.org.uk/covid-19-resources/covid-19-resources-general-public/resuscitation-council-uk-statement-covid-19 		

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	It is likely that a chil risk of transmitting t action as this will re	Resuscitation Council UK Statement: ld/infant having an out-of-hospital cardiac arr the COVID-19 virus, either to the rescuer or t esult in certain cardiac arrest and the death o	he child/infant. H		cue breaths will	
	Staff Transmission may occur when supervising pupils taken ill with symptoms of COVID-19 and need direct personal care until they return home.	 Increase ventilation in the room if possible. PPE provided for supervising adult: Fluid resistant surgical mask if a 2-metre distance cannot be maintained. Where contact with the pupil is needed: Fluid resistant surgical mask, disposable gloves and disposable apron. 	M M M	 Maintain stocks of PPE. Supervising adult instructed on the safe "donning and doffing" of PPE. Consider using first aiders to supervise to reduce numbers of staff who need access to PPE. 		
	Staff and pupil. Transmission may occur when staff administer medicines or supervise pupils who self- administer.			Review medication plans to assess PPE requirements (if any) for staff administering medication.		

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4. Tick ($\sqrt{\ }$) if any of the identified hazards relate to any of the following specific themes:

Hazardous Substance	Manual Handling	Display Screen Equip	Fire	Work Equip / Machinery	Stress	Individual Person such as Young Person New/ Expectant Mother or Service User
\checkmark			✓		\checkmark	\checkmark

If any are ticked a specific risk assessment form must be completed separately. For example a COSHH form must be completed if a hazardous substance is used.

5. Risk Rating

The risk rating is used to prioritise the action required. Deal with those hazards that are high risk first.

Risk Rating	Description	Action Priority
High	Where harm is certain or near certain to occur and/or	Urgent action
	major injury or ill-health could result	
Medium	Where harm is possible to occur and/or serious injury	Medium priority
	could result e.g. off work for over 3 days	
Low	Where harm is unlikely or seldom to occur and/or minor	No action or low priority action
	injury could result e.g. cuts, bruises, strain	

6. Assessment

Signature of Assessor(s): Print Name: S Fryer, S Burgess

Date Assessed:20th September 2021 Review Date:20/9/22 or as required

7. Communication and Review

This risk assessment should be communicated to all employees and relevant persons who may come into contact with the hazards being assessed. The assessment must be reviewed annually or following a significant change, accident or violent incident.