

Health and Safety Risk Assessment – AUGUST 2021 - COVID-19

RISK ASSESSMENT

School House School & Tursery Assessment To. Covid - 1	School	Holmwood House School & Nursery	Assessment No.	COVID - 1
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THIS DOCUMENT COVERS ALL PARTS OF THE SCHOOL INCLUDING THE NURSERY. THE TERM 'SCHOOL' IS USED FOR ALL AREAS.

Site	Holmwood House School & Nursery			Location	Chitts Hill, Colo	chester, CO3 9ST + 3	151 Coach Road, Great Horkesley
Subject of Assessment		Opening school to all childre	en, this inc	ludes Nursery, Pre-R	eception, Recept	tion, Years 1 to 8	
Assessed by		FMM/ERLB Date		Date 26 August 2021		Review date	30 September 2021
Details of	tails of Pupils and employees partaking in school acti		hool activi	ties within the school	1	Persons	s Affected
workplace/activity	workplace/activity premises, including general classroom activities, dining, (Who may be harmed)		be harmed)				
	break-times, playgrounds, pick-up and drop off (where applicable),						
First aid and external visitors to the school.				Pupils, Emplo	oyees, Contractors an	d Visitors.	

Hazards and Risks	Existing Control Measures	Risk Level (Very High, High, Medium, Low)	Further Actions \sqrt{X} (If \sqrt{See} Actions)
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1.	Spread/contraction of COVID-19 due to interaction with a person who has symptoms of the disease, a person who may be asymptomatic or lack of information.	 The school has informed parents, carers, employees and visitors not to enter the school building on any occasion without a clear negative lateral flow result. Employees have been briefed on updated school procedures - with clear guidance on hand hygiene, ventilation and testing procedures Employees have had sufficient training/briefing regarding infection control and school protocols Employees have been contacted prior to the start of term to confirm negative test and consideration of their wellbeing Staff are up to date on other related guidance and support in relation to themselves and pupils such as stress and wellbeing including: https://www.gov.uk/government/publications/covid-19-guidance-on-supportin g-children-and-young-peoples-mental-health-and-wellbeing/guidance-for-pare nts-and-carers-on-supporting-children-and-young-peoples-mental-health-and-wellbeing-during-the-coronavirus-covid-19-outbreak In relation to mental health and stress support organisation, details are available to staff including confidential employee helplines and information that can be provided to pupils; There are communication and support networks in place for staff and if there are particular concerns staff can raise them quickly and effectively; Hazard reporting mechanisms are in place and easily accessible 	Medium	X
2.	Spread/contraction of COVID-19 due to normal school activities	 Additional measures are put in place on top of normal actions for cleanliness or communication Tables are wiped clean with appropriate disinfectant before and after lunch; Pupils are advised to clean hands before and after eating lunch in the classroom. Where possible, all spaces are well ventilated using natural ventilation (opening windows); Hand sanitizing stations are positioned at each pupil, staff and visitor entrance to the school; 	Low	Х



		• Hand washing stations/sanitizers are located on each floor, at various points		
		around the site, within each classroom and on entry to the dining hall;		
		 Hand washing sinks are located within each toilet provision; Signage is in place reminding all to wash their hands and how to do it. 		
		• Signage is in place reminding all to wash their hands and how to do it effectively;		
		 Hand washing is recommended frequently and required at the following 		
		times:		
		Entry and exit from the school;		
		After using the toilet;		
		On entry to the dining hall;		
		Before and after eating;		
		On entry and exit from each classroom.		
		 The school has implemented additional cleaning regimes. 		
		• Toilets will be fully cleaned at the end of the school day and daily inspections		
		will take place and any additional cleaning will be undertaken during the day;		
		• Staff are able to choose to video conference parents if face to face meetings		
		are required;	_	
3.	Spread/contraction of COVID-19	• The school's Lead First Aider is on site to be called upon;	Low –	
	due to insufficient First Aid	• This assessment takes into account numbers and ages of pupils, number and	excellent staff	
	measures. This includes:	training of employees;	to pupil first	
	• Dealing with general First	• This information forms the decision on what activities and groups can safely	aid ratio	
	Aid;Lack of trained first aiders;	be managed within the school;This includes sufficient first aiders for the school to the number of pupils with		
	 Dealing with a suspected 	• This includes sufficient first aiders for the school to the number of pupils with a particular focus on early years provision;		
1	 Dealing with a suspected case of Covid-19; 	 The school will specify a dedicated room for suspected cases of COVID-19; 		
	 Inappropriate handling / 	 Occupants (staff or pupils) who display symptoms of the virus during the 		
	removal of clinical waste	school day will be isolated in the designated room until additional medical		



Intimate care procedures.	 assistance can be gained. This may be 111 support, an ambulance or until they leave the site to self-isolate; First aiders required to assist this person will wear full PPE including, apron, gloves, mask and visor; First aiders have completed appropriate training for 'donning and doffing' PPE – NHS video / advice https://www.hse.gov.uk/news/face-mask-ppe-rpe-coronavirus.htm PPE is disposed of in accordance with NHS COVID-19 waste management guidance; https://www.gov.uk/government/publications/covid-19-decontamination-in-no n-healthcare-settings/covid-19-decontamination-in-no healthcare-settings/covid-19-decontamination-in-no healthcare-settings The first aid room will be cleaned frequently and after each use (when first aid care has been provided). Waste disposal measures Waste control measure from possible cases of COVID-19 and cleaning of areas where possible cases have been identified (including disposable cloths and tissues) are as follows:
	 Put in a plastic rubbish bag and tied when full; The plastic bag is placed in a second bin bag and tied; It is put in a suitable and secure place and marked for storage until the individual's test results are known; Waste is stored safely and kept away from children; Waste is not put in communal waste areas until negative test results are known or the waste has been stored for at least 72 hours; If the individual tests negative, this can be put in with the normal waste; If the individual tests positive, then waste is stored for at least 72 hours and then put in with the normal waste; If storage for at least 72 hours is not appropriate, a collection as a Category B infectious waste is arranged by either local waste collection authority if they currently collect your waste or otherwise by a specialist clinical waste



		contractor. They will supply you with orange clinical waste bags for waste bags which can be sent for appropriate treatment.		
4.	Hazardous substance management, unsuitable COSHH management and use of chemicals leading to ill-health or fire.	 Suitable storage and management of flammable hand sanitizer is in place; All chemicals used for the cleaning of school buildings and equipment is COSHH assessed and managed appropriately; Material safety data sheets are held for all chemicals and readily available to all staff; All cleaning chemicals are stored safely and securely in accordance with requirements; COSHH safety training has been completed by all those using chemicals for cleaning; Appropriate PPE is available for all cleaning including suitable PPE for cleaning of potential coronavirus contaminated rooms or equipment. 	Low	
	Autumn Term 2021 - Testing			
	1.Explanatory T&T letters / emails not sent to parents and staff.	All communications regarding testing in place and sent by email. Consent forms utilise Google forms for efficient monitoring.		
	2 No school "COVID-19 Testing Privacy statement".	GDPR considerations taken into consideration and covered during training.		
	3 "COVID-19 Testing Privacy statement" not communicated to staff and parents	Government Privacy Statement available for parents and staff.		
	4 T&T data not recorded securely with consideration given to deletion after 14 days.	T&T data recorded securely in limited access drive. Retention guidance followed.		
	5 Those that have had "close contact" with someone tested positive for COVID-19 do not know they are able to return to school if they agree to a test once a day for 7 days, and the test is negative.	Contact arrangements communicated to staff and pupils as appropriate and when required in line with Government PHE guidance.		



6 Age-appropriate consent statement for testing (under / over 16) not properly completed.	All pupils' parents emailed with Google form version of the consent form. This includes a statement about parents discussing the matter with their children.	
7 Test instruction posters, booklets, FAQ and briefings not readily available and apparent.	Government signage used at Test Centre.	
8 Tests not supervised or conducted by trained staff.	Team Leaders and operatives have all done the government training.	
9 Testing area not sufficiently controlled to limit access to testers, those being tested and supervisors	Signage and communications state one way system and need to follow instructions.	
10 Test process not maintaining social distancing where appropriate, good hand and respiratory hygiene or keeping occupied spaces well ventilated.	Queue managed by Reception/Welcome operative and signage in place. 2m distancing required by subjects and operatives as well as appropriate PPE.	
11 Social distancing advice between testing staff and those being tested including distances between desks, chairs etc not being observed and supervised.	Testing Centre set up to enable social-distancing between cubicles and operatives. Staff trained to remind subjects to socially-distance.	
12 Staff assisting with taking and processing swabs not wearing appropriated PPE.	All operatives have undergone appropriate training; appropriate PPE supplied and over seen by Team Leaders.	
13 Process of swabbing not following training and / or updated guidance.	Most current guidance on swabbing being followed by operatives based on training.	
14 Tested sample incorrectly handled safely during the process including disposal.	Most current guidance on swabbing being followed by operatives based on training. Quality control measures in place to over see operatives' actions.	



15 Process for informing parents / pupils / staff not understood and implemented.	Guidance on informing parents/pupils clearly laid out in email communication.	
16 The process of barcoding, recording and communicating test results is not accurate and supervised	Training and supervision in place to ensure barcoding being used appropriately.	
17 Inadequate supervision / checking to ensure equipment handled correctly and not shared.	Training and supervision in place to ensure equipment being used appropriately.	
18 Process of lost LFD, failed scans or damaged barcodes not understood or properly implemented.	All guidance read and followed for unlikely case of lost LFD, failed scans or damaged barcodes.	
19 Extraction solution with lab test kit (there are no manufacture anticipated hazards) are inappropriately handled, stored and disposed.	Guidance regarding Extraction Fluid understood and followed by Team Leader and operatives.	
20 The training does not reflect hazards identified with testing and these are not communicated to testing and cleaning staff?	Hazards understood and communicated to operatives and cleaners where appropriate.	
21 Those tested positive not confirming the positive result with a Polymerase Chain Reaction (PCR) test and either failing to self-isolate pending the confirmation test or self isolating unnecessarily after a confirmatory PCR test might have	Clear guidance given to all subjects regarding the requirements of a PCR Test following a positive LFD test. Avoidance of unnecessary self-isolation understood as an outcome of this process.	



cleared them as having a false positive.		
23 Insufficient staff available (depending on throughput: Team Leader, Test Assistant, Processor, Coordinator, Registration Assistant, Results Recorder, Cleaner).	Sufficient staffing will be in place to cope with the flow rate. Flow rate can be adjusted with relatively small numbers to enable smaller team to cope.	
24 Training time and content inadequate (3 hrs with introduction video, on-line training and assessment plus rehearsal.)	Adequate training in place. Whole day of online training, reading guidebooks, practising tests and running rehearsals.	
25 Consent forms are not available and properly completed?	All consent forms converted to Google Forms for ease of completion, collection and monitoring.	
26 Test site flooring is not non-porous.	Talbot Room is non-porous surface laminate.	
27 Test site is not well lit with a good airflow	Lighting is excellent in Test Site.	
28 Test site Registration, Swabbing, Recording and Processing Desks and waiting areas not on a one-way system.	One-way system in place and notified to staff and pupils as well as clear signage.	
29 Test area in the swabbing bay not a minimum of 2m apart.	Test bays are 2m apart	
30 Each swabbing desk and associated processing desk not more than 1m away and Recording desk not located close by.	Government guidance on layout followed and distanced allowed for.	
31 No clear division and demarcation between swabbing and processing area.	Clear demarcation exists between different areas catered for in distances used.	



	2 Non-authorised people and test bjects able to enter the processing ea	No Entry to anyone outside the Test Site Team other than scheduled subjects. One way system in place.	
ass	B Inadequate evidence of quality surance, guidance and pervision.	Quality assurance checklist used during training and subsequent testing periods. Feedback to operatives in place.	
cle cli	Processing bays not properly eaned, and waste (including inical waste) is not properly sposed of.	Cleaning regime followed by operatives as part of the testing process. Area cleaned each day by professional cleaners in line with guidance.	
SOC	5 Disorderly entry, processing, icial distancing and exit ovement.	Signage is displayed to ensure subjects enter the correct door in the one way system. 2m apart ensured by operatives on duty.	
pal not	Manual handling of testing kits, illets, boxes, packages and waste ot considered in terms of bulk, eight and access.	Delivery boxes manageable. Where not, support from the caretaker is sought.	
30' apj	⁷ Testing kits not stored at 2 -)°C and tests not given in the propriate ambient temperature of 5 - 30°C	Temperature of the test centre room maintained between the guideline temperatures.	
spa of	B Inadequate provision of a quiet pace to talk with the pupil mindful 7 the need for social distancing / PE / wellbeing.	Adequate areas identified to use in case of wellbeing support being required.	

ACTION PLAN (Additional Control Measures Required/Recommended Actions)



Hazards and Risks	Recommended Actions		
Outbreak crosses PHE threshold	Leadership Team will meet and discuss additional measures. These may include 'bubbles', remote learning, and other actions as guided by PHE and best practice.		

Please note:

All controls are subject to change should government guidance change due to changes to the 'R' rate. This could change on a daily basis. Government and DfE guidance MUST be regularly reviewed. Risk assessment must be reviewed if there is a significant change.

Following assessment if no further actions are assessed to be required please mark an **X** in the "Further Actions" box. If, however additional controls or actions are assessed to be required please place a $\sqrt{}$ in the box and note the action in the action plan. Any further actions identified should be completed before the assessed task is carried out.