

Medical Risk Assessment in the COVID-19 Environment

	Hazard	Control Measures	Outcome	Remarks / Re-assessment
1	Sickness management rules and the “don’t come to work if you are ill” not understood or observed.	This is explained to staff in inset day and followed up with formal communication from SLT. This has been explained to parents pupils via a letter	Staff and families understand not to come to work unless well	
2	Staff and pupils who are ill or tested positive in the last 10 days do not know or are unwilling to stay at home.	Communication sent all staff parents and pupils state that if you have tested positive you must stay at home for 10 days. Communication sent to let it be known that PHE request to be informed if testing is not undertaken.	No Student/Staff are allowed on site while still in their period of isolation	
3	The procedure for isolating or sending staff and pupils home for 10 days and arranging a COVID-19 test is not understood (if anyone becomes unwell in school).	The procedure is outlined in the return to school documentation. When a student or staff member is sent home the procedure will be explained again to make sure it is clear.	No one who is needing to isolate does not understand the arrangements.	
4	Given above, household or group members do not understand that they must self-isolate for 14 days.	Communication already sent to the parents/staff state the households must self isolate for 14 days. This will be communicated to the parent if a pupil is sent home.	Isolation guidelines adhered to	
5	No isolation room and separate bathroom available, inadequate signs (from reception?) for those waiting collection and no access to PPE for those attending to unwell staff and pupils.	Medical centre has been reorganised to have a hot isolation space with separate bathroom. Walls are able to be wiped down and PPE is available. Further accommodation is available in Luke for isolation of boarders.	Isolation rooms and bathrooms available for unwell staff and pupils.	
6	Procedure is not clear for those Staff who have helped someone with symptoms and pupils who have been in “close contact”.	COVID procedures have been written and circulated to all staff. Specific training given to Medical and Boarding staff. General training will be given on 3 rd September 2020.	Procedures clear	
7	Staff not aware of meaning of “close contact” i.e.: • Direct close contacts: face-to-face contact with an	This is shared with all staff in training.	Staff understand what “Close contact	

	<p>infected individual for any length of time, within 1 m, including being coughed on, talking face to face, or unprotected physical contact (skin-to-skin).</p> <ul style="list-style-type: none"> • Proximity contacts: extended close contact (within 1 to 2 m for more than 15 minutes) with infected individual. • Sitting in a small vehicle (car) with an infected person. 		means”	
8	<p>Procedures for reporting COVID-19 instances to external authorities not known or applied.</p>	<p>Medical team has a flow chart of reporting COVID in the medical management procedure.</p> <p>Head will make contact on COVID Education Line if pupil or staff tests positive.</p>	<p>All staff know the steps taken to notify external authorities.</p>	
9	<p>Procedure for washing hands thoroughly for 20 seconds with soap and running water or using hand sanitiser after any contact with someone who is unwell is not understood or applied.</p>	<p>Signage is up around the school</p> <p>Younger students are taught how to wash hands for 20 seconds through games.</p> <p>Hand sanitiser is in all rooms. The exceptions are Science labs where liquid soap is provided.</p> <p>Staff in medical team told to wash hands between students.</p> <p>Training on 3rd September for staff who will disseminate to pupils.</p>	<p>Reduction of spread from pupils to nurses/teacher</p>	
10	<p>Procedure for cleaning, with normal household bleach, the area around a person with symptoms after they have left (to reduce the risk of infection) is not understood or applied.</p>	<p>Cleaning routines are outlined in the COVID procedures document and the Infectious Disease Protocol.</p>	<p>All medical staff know the appropriate cleaning routines.</p>	
11	<p>Science of risk not understood</p>	<p>Explanation of risk and infection spreading discussed in training</p> <ul style="list-style-type: none"> • Droplet • Airborne • vulnerabilities 	<p>Staff have a better understanding of the risks and therefore less likely to ignore precautionary measures put in place. Lower number of cases in school</p>	

12	Although a useful confidence, measuring routine temperature testing is not a reliable method to identify COVID-19 (PHE advice refers).	Boarders have daily temperature check. Family of day pupils asked to follow the same arrangement.	Reduces the number of students at school with a high temperature.	
13	Insufficient medical staff to deal with temperature testing (if used), isolating and monitoring suspect COVID-19 cases, outside appointments and normal medical issues.	St Terea's Medical Team consists of three trained nurses. One day a week overlaps to allow for an admin day. GP visits are available for Boarders. Sufficient staffing in place to meet the requirements of temperature testing of the boarders.	Assessment of unwell pupil always available	
14	No or insufficient training for those operating temperature testing or other precautions that require new equipment. Training not recorded for future reference.	Boarding staff have been trained to take temperature and to use the PPE.	Boarders and medical staff trained to take temperature recordings.	
15	Medical staff have insufficient or unsuitable PPE, cleaning materials and training for tasks.	Sufficient PPE is in place for the start of the school, as are cleaning products. Regular orders will be made to keep up with demand.	Medical Staff fully protected at all times	
16	Temperature testing undertaken using unsafe methods, not reflecting SD rules, not recorded or kept appropriately.	Staff trained to take temperature tests safely using PPE. Medical centre reflects SD and the ability to isolate. Records kept of all students who visit the medical centre via patient tracker	Medical Staff fully protected at all times	
17	No separate area for temperature testing, holding and isolation of pupils/staff. Areas not easily identified or regularly cleaned?	There is a 'hot' room – for those pupils who are showing signs and symptoms of COVID-19	Medical Staff fully protected at all times and other pupils kept away from suspected cases	
18	Insufficient registration, induction, supervision (and temperature checking) of contractors working on site.	Contractors are supervised by the maintenance team. These people are not temperature tested, but the rules for entrance are explained. The school expects that contractors to inform the school if they test positive to COVID-19. Contractors should be asked if they feel well on arrival at the school. If not they should be asked to leave or taken to the medical centre for temperature checking.	Ensures safety and lowers risk to employees and pupils on site	
19	Young children not supervised using hand sanitiser (risk of ingestion). (Note: Skin friendly cleaning wipes is an alternative).	Teachers to supervise younger children with the hand washing and sanitiser.	Better hand washing technique and hand hygiene	

20	Young children and those with complex needs not supported in understanding importance of hygiene rules.	N/A		
21	Lack of information on how to react to coughing and sneezing using tissues (and their disposal), crook of arm and immediately cleaning hands with soap and water or hand sanitiser.	Will be covered this is lessons with the pupils.	Ensures safety and lowers risk to employees and pupils on site	
22	Hygiene rules not effective. "catch it, bin it, kill it" not re-publicised or applied.	Signage up around the school. Discussed in staff training on 3 rd September and reiterated by form teachers to pupils.	Ensures safety and lowers risk to employees and pupils on site	
23	Pupils not aware of behaviours which may increase the risk of droplet transmission (such as biting, licking, kissing or spitting).	Students are told about what behaviours to be careful of. Discussed in staff training on 3 rd September and reiterated by form teachers to pupils.	Ensures safety and lowers risk to employees and pupils on site	
24	Insufficient staff supervising and supporting normal medical staff particularly in their liaison with GPs, LA(?) etc.	The increased use of first aiders to help out with everyday injuries while nurse is dealing with COVID-related illness. Medical staff to liaise with GP about support and additional care requirements for boarders. Lead nurse to monitor work load of nurses to ensure that cross infection risk is not compromised.	Ensures safety and lowers risk to employees and pupils on site	
25	Visits of or to GPs / nurses / dentists and local surgeries changed and not known by staff and or pupils.	GP visits to be via appointment only, 2m distancing observed or masks and gloves to be work similar procedure for other HP's off site	Safe interaction with medical professionals	
26	Staff and families are not aware those with COVID-19 symptoms should not go to a GP surgery, pharmacy, urgent care centre or hospital.	Training on 3 rd September Communication with families.	Staff and parents aware of procedure for suspected case of COVID-19	
27	No procedure considered if a mobile testing unit is dispatched to test others in school. (Testing will focus on the person's class, followed by their year group, then the whole school if necessary.	Nurse to liaise with LHPA on how this process will work in the eventuality it is required. Currently no information forthcoming from LHPA		
28	Insufficient or no procedure for summoning emergency	Nurse to contact 999 or NHS 111 if condition of casualty	Support from	

	services, lack of safe RV and cleared routes in and out.	deteriorates Maintenance/boarding to direct EMS to archway Information of flow chart discussed on 3 rd sept	school community to ensure help is directed efficiently	
29	No early liaison with local health protection teams and LA who provide advice (and may recommend large groups self-isolate or school closure)	Lead nurse in communication with LHPA	Information updated as received	
30	Insufficient First Aid trained personnel (ratio) for pupils in school and on activities and sport.	Training to continue to ensure numbers of FA is appropriate Lead nurse to monitor numbers and book training accordingly	Sufficient FA support	
31	Actions for using first aid on those with no COVID-19 symptoms unclear and not briefed.	Discussed with staff on inset day 3 rd September	Full understanding by all members of staff	
32	Requirements for EYFS on PFA certification not identified given recent modifications and 3 month extensions .N/A First aiders not aware of changes to First aid imposed by the resus counsel and HSE in response to Covid-19	Modifications for all first aiders holding PFA, EFAW, FAAW certificates will be discussed for CPR <ul style="list-style-type: none"> • Use of face shields • No feeling or hearing when assessing breaths 	First aiders up to date with HSE/resus changes	
33	Medical policy, procedures and appropriate response to spectrum of medical issues not revised or shared?	Medical policies have been updated and can be found on Firefly and Staff Shared Work		
34	Pregnant women are in the 'clinically vulnerable' category and not following the relevant guidance.	Staff questionnaire requests information about whether a staff member is pregnant. Lead nurse to discuss with staff member about additional precautions.	Safe working environment for pregnant workers	
35	Lack of School decision or policy for level of PPE required for staff or pupils.	Decision has been made of PPE to be available in all the required areas. The school has ordered this in advance of the school re opening.	Ensures safety and lowers risk to employees and pupils on site	
36	Insufficient training for all those that wear face coverings including fitting, storing, care and disposal arrangements.	Training has been given to all those who are required to wear PPE on inset day 3 rd September	Ensures safety and lowers risk to employees and pupils on site	
37	Different age groups with different risk profiles for each group of staff and pupils not risk assessed?	Medical staff to keep list of those clinically vulnerable, and act on	Ensures safety and lowers risk to those	

		<p>this information accordingly</p> <p>Update on vulnerabilities requested from parents</p>	at higher risk	
38	Measures in school are not sufficiently robust for extremely clinically vulnerable and clinically vulnerable to return to school.	As above		
39	Medical advice for vulnerable staff and children not being followed and insufficient support both at school and at home.	<p>Patient Tracker (St Teresa's) ISAMS (Cranmore) is used to track children's medical conditions and changes.</p> <p>The school will follow any GP/Medical advice given and provide support for the families accordingly.</p>	Ensures safety and lowers risk to those at higher risk	
40	Those with particular characteristics and an increased COVID-19 risk not identified and sufficient measures taken to reduce risks.	<p>Medical teams identifies those who are at increased risk, and share this information with those who require the information.</p> <p>Staff questionnaire sent.</p> <p>Parent information sent out to inform them of school's procedure and request changes to vulnerabilities</p>	Ensures safety and lowers risk to those at higher risk	
41	Lack of knowledge on whom has tested positive for COVID-19 and if it is recorded (for elimination purposes). Evidence of negative result should not be requested.	Medical Team logs those who have tested positive when they get the information.	Ensures strict monitoring of spread of COVID-19	
42	Insufficient information and / or record of who is still shielding or had contact with anyone tested positive or suspected of COVID-19 and why this may preclude their attendance at school.	<p>Staff questionnaire sent.</p> <p>Parent information sent out to inform them of schools procedure and request changes to vulnerabilities.</p>		
43	Lack of recording of which staff and pupils have been sent home with COVID-19 symptoms (a cough, high temperature or shortness of breath).	<p>ISAMS records staff who are off ill, medical records when pupils are sent home due to illness.</p> <p>Medical staff to keep log of staff and pupils.</p>	Ensures strict monitoring of spread of COVID-19	
44	Lack of regular dialogue with those that have suffered from COVID-19 and / or are isolated at home.	Medical teams keeps in contact with those who are currently at home isolating or self-isolating.		
45	Policy on wearing uniform and if washing also required to prevent infection for staff and pupils not re-considered.	Medical Staff will wear uniform during the day, and leave and arrive in personal outfits to prevent the spread of disease between home and school.		

		School staff told to wash clothes at the end of the day.		
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