

**General Risk Assessment Record Form**

1. **School/Academy Name**...Thomas Alleyne’s High school - Uttoxeter...2. **Assessor(s)** Andrew Storer and Julie Rudge
2. **Description of Task: Testing of staff and students.** Lateral Flow Antigen testing is used to estimate the incidence and prevalence of COVID19 in the school population. It involves the processing of human nasal swabs and throat swabs with a Lateral Flow Device (LFD) in accordance with Staffordshire and Stoke Standard Operating Procedure. The testing may take place weekly or daily if serial testing for close contacts of cases. The LFD test kit uses immunochromatography, which draws the sample along the device in a similar way to a home pregnancy test kit. LFDs are designed to be used outside a formal laboratory setting and can be used for frequent testing of large numbers of asymptomatic people.

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
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Inappropriate premises identified for testing	Staff and pupils attending – failure to follow agreed Standard Operating Procedures may jeopardise the validity of testing and cause harm from possible infection	<p>Ede Studio Identified as:</p> <ul style="list-style-type: none"> <li>- large enough to set up one-way queuing system, registration area, multiple test stations, areas for processing and recording results</li> <li>- Allows for social distancing measures between all areas</li> <li>- has entry door direct from outside exit door into a foyer space and then outside to facilitate one-way systems.</li> <li>- can be kept separate from all other activities</li> <li>- has internet access/mobile signal</li> <li>- is well lit</li> <li>- is clean, and easy to clean with non-porous flooring</li> <li>- can be ventilated</li> <li>- is secure</li> </ul> <p>Centre reviewed as suitable for 4 test stations</p>	H	To plan for scaling up to 6 test stations if mass testing expected.		

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Inappropriate premises identified for testing	Staff and pupils attending – failure to follow agreed Standard Operating Procedures may jeopardise the validity of testing and cause harm from possible infection	<ul style="list-style-type: none"> <li>- unnecessary items removed other than the wipeable furniture required for testing layout</li> <li>- testing staff to use identified disabled toilet.</li> <li>PPE to be doffed when leaving the Ede studio and replaced with new on return in donning stations</li> <li>- Has an ambient temperature of 15-30C during testing</li> <li>- Has appropriate and secure storage for test equipment (2-30C) and PPE</li> <li>- Test site has been registered as a test station by the SCC Testing Cell</li> <li>Inspection by SCC completed.</li> </ul>	H	<p>Actions following inspection – separate donning and doffing stations.</p> <p>Remove stands from mirrors.</p>		
Pupils/staff cannot register for a test	Participants will not be able to be tested without registration	<p>The following is not possible as people tested are under 16.:</p> <p>Those to be tested must have:</p> <ul style="list-style-type: none"> <li>- a mobile “smart” phone with internet access/ability to scan</li> <li>- Have downloaded the NHS app</li> <li>- Have registered for a test</li> <li>- Are supported to scan the barcode with their phones</li> </ul>	H	<p>Information currently recorded in paper file as (as at 05 Jan 2021) unable to access the Gov.uk website error message ‘technical error’ AS / JR.</p> <p>Website now operational and recording to be put in place.</p>		

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Inappropriate staff supporting testing	Failure to follow agreed Standard Operating Procedures (SOP) may jeopardise the validity of testing of staff and pupils and cause harm from possible infection	<p>Testing staff are:</p> <ul style="list-style-type: none"> <li>- appropriately trained, DBS checked and/or supervised for the role. Training includes test preparation and test results, clinical swabbing, safe donning and doffing of PPE, mistake management etc.</li> <li>- Testing staff understand their duties and have appropriate time allocated for their role e.g.: Team Leader, queue co-ordination, registration; test assistant, test processor and recording results</li> <li>- Team leader ensures quality of testing and adherence to Standard Operating Procedures (SOP)</li> <li>- Respiratory hygiene, hand washing, safe donning and doffing of PPE and social distancing guidance are regularly reinforced by Team Leader and monitored.</li> <li>- All training recorded and signed off.</li> </ul>	H	<p>Initial training done 4<sup>th</sup> Jan 2021 and practical training 5<sup>th</sup> Jan 21</p> <p>To train staff when new people introduced to the process / team as necessary.</p> <p>DBS checks done as required.</p>	4 <sup>th</sup> and 5 <sup>th</sup> Jan 2021	

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Failure to obtain consent from those being tested	Staff and pupils attending – failure to follow agreed Standard Operating Procedures and breach of safeguarding protocols	<ul style="list-style-type: none"> <li>- Consent is obtained from each participant before the test is performed.</li> <li>- For those people unable to give informed consent due to age (&lt;16) or mental capacity, written consent is obtained from parent /carer/guardian</li> <li>- The school stores a copy of consent forms as required by their information governance policy</li> </ul>	H	<p>To monitor when system in operation JR / AMY / Team Leader</p> <p>Where written consent is not available from parents verbal consent has been sought and accepted.</p> <p>Consent forms are stored virtually.</p>		
Contact between persons increasing the risk of transmission of COVID19	Testing staff or participants may be harmed by transmission of the virus leading to ill health or potential death	<ul style="list-style-type: none"> <li>-Those to be tested are advised NOT to attend if they have any symptoms of COVID 19, or live with someone who is showing symptoms of COVID 19 or if tested positive in last 90 days.</li> <li>- Anyone with symptoms must attend for a PCR test through the national system</li> <li>- Those to be tested must NOT attend if have been advised to self-isolate with a household member/have ongoing contact with someone who has received a positive test</li> </ul>	H	To monitor when system in operation JR / AMY / Team Leader		

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Contact between persons increasing the risk of transmission of COVID19	Testing staff or participants may be harmed by transmission of the virus leading to ill health or potential death	<ul style="list-style-type: none"> <li>-Testing staff wear surgical face masks and visors/goggles, disposable gloves and aprons/long sleeved aprons as per role guidance and provided by gov .uk in SOP</li> <li>- all staff regularly reminded of infection prevention &amp; control guidance</li> <li>- PPE is worn for sessional or individual use as required by the SOP and changed if soiled/contaminated</li> <li>-School has timetabled testing to avoid overcrowding of test station and immediate vicinity</li> <li>- “Business as usual” school staff not to enter the testing site</li> <li>- Signage is displayed at entrance/exits to test area for: <ul style="list-style-type: none"> <li>Wearing of face coverings</li> <li>Use of hand sanitiser</li> </ul> </li> <li>-70% alcohol hand sanitiser (EN1500 standard) provided by entrance, exit and at each testing area and workstation</li> <li>- Use of sanitiser/wearing of face coverings/social distancing is enforced by queue monitor</li> <li>- Pupils/staff are tested from the same bubble</li> </ul> Sign displayed that the test centre is fogged at the end of each day.	H	To monitor when system in operation JR / AMY / Team Leader  Poster to be made – do not attend with symptoms.		

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Contact between persons increasing the risk of transmission of COVID19	Testing staff or participants may be harmed by transmission of the virus leading to ill health or potential death	<ul style="list-style-type: none"> <li>- Face coverings to be worn at all times by those being tested except when lowered for swabbing purposes</li> <li>- Perspex screens installed at registration, testing and processing desks</li> <li>- Testing staff wear appropriate PPE at all times in the Test Centre</li> <li>- Personal items including phones are not allowed in the test centre other than the recorder.</li> <li>-No eating or drinking ion the test area or storage/donning area.</li> <li>- Spare face masks provided by gov.uk are available for participants if needed</li> <li>- Tables and chairs are easily cleaned - All touch points are disinfected with anti-viral single use wipes between tests</li> <li>- No equipment is shared</li> <li>- No physical handling of documents to participants including barcodes/test kits</li> <li>- Floor markings identify 2m social distance requirements in queue and testing areas</li> <li>- Pupils return to class immediately after testing and do not wait in vicinity for results</li> <li>- Staff supporting top up of supplies within test premises do so when no testing activity is taking place</li> </ul>	H	<p>To monitor when system in operation JR / AMY / Team Leader</p> <p>If supplies do run out the team leader will source additional supplies from the store room</p>	Site Team from 6 <sup>th</sup> Jan 2021	

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Difficulty with carrying out throat and mid-turbinate nasal swab or contamination of swabs	Testing staff or participants may be harmed by transmission of the virus leading to ill health or potential death	<ul style="list-style-type: none"> <li>- Only sealed swabs are given out – the processor will open the tip of the swab to hand over</li> <li>- Any damaged swab/test packaging is not used, is treated as clinical waste</li> <li>- Pupil to sanitise hands, use a tissue, and sanitise hands at swabbing station</li> <li>- Verbal explanations are provided of how to use the swab in throat and nose</li> <li>- Test subject advised to avoid touching swab on any surface within mouth other than tonsils</li> <li>- Mirrors provided in testing area</li> <li>- Disposable vomit bags/bowls are provided for those with gag reflex and spillage guidelines followed</li> <li>- Test areas are thoroughly cleaned and disinfected before next use e.g: table, chair and mirror are wiped between each test with disposable wipes</li> <li>- screens wiped if sneezing occurs</li> <li>-Screens protect testers from sneezing</li> <li>- Screens fogged daily</li> <li>- Participants completing the test centre are observed and if unsatisfactory cleaned by test centre staff</li> </ul>	H	<p>To monitor when system in operation JR / AMY / Team Leader</p> <p>Laminated posters explaining swabbing process are to be displayed from 6<sup>th</sup> Jan 2021</p>	AS from 6 <sup>th</sup> Jan 2021	



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Failure to manage samples and coding	Failure to follow agreed Standard Operating Procedures – participants may receive wrong results	<ul style="list-style-type: none"> <li>- Registration staff ensures 2 identical barcodes are provided to participants</li> <li>- Participants register their details to a unique ID barcode before conducting the test</li> <li>- Barcodes are attached by testing staff at sample collection desk</li> <li>- Barcodes are checked for a match at the analysis desk and attached to Lateral Flow Device</li> <li>- LFD is processed in accordance with SOP and manufacturers guidance</li> <li>- Samples are processed one at a time and placed in individual trays</li> <li>- Labelled tube racks are used to avoid spillage and mixing of samples or placed in the tray</li> <li>- Extraction solution bottles are cleaned with anti-viral disinfectant wipes between samples</li> <li>- Test processor changes gloves between each test</li> <li>- The correct amount of extraction solution is used</li> <li>- Enough time is allowed for each sample to register the results (30 minutes)</li> </ul>	H	<p>To monitor when system in operation JR / AMY / Team Leader – currently paper records kept and LA aware.</p> <p>Spoiled bar codes registered.</p>		

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Failure to manage samples and coding	Failure to follow agreed Standard Operating Procedures - Test subject may receive wrong results	<ul style="list-style-type: none"> <li>- Permanent black pen is used to record results</li> <li>- Testing process is supervised</li> <li>- Errors are reported and investigated</li> <li>- Results are monitored/validated as required by SOP</li> <li>- Test areas cleaned between each test</li> </ul>	H	To monitor when system in operation JR / AMY / Team Leader		
Damaged barcode, lost LFD, failed scan of barcode	Orphaned record on registration portal & “No Result” advice to test subject	<ul style="list-style-type: none"> <li>- If a positive test shows- individuals to be contacted. If test void families to be contacted and retest booked</li> <li>Families not contacted if test negative – once online system running this will be updated.</li> </ul>	H	To monitor when system in operation JR / AMY / Team Leader		

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Use of test solutions when processing test kit. Contains the following components: NA <sub>2</sub> HPO <sub>4</sub> (disodium hydrogen phosphate), NaH <sub>2</sub> PO <sub>4</sub> (sodium phosphate monobasic), NaCl (Sodium Chloride)	Testing staff could be harmed by inappropriate use of chemicals	<ul style="list-style-type: none"> <li>- Chemical components are not classified as hazardous for use as designed.</li> <li>- PPE (nitrile gloves, impervious clothing) is worn at all time when handling extraction solution</li> <li>- Tester will not use solution if use by date has expired</li> <li>- Advice on material safety data sheet is followed in case of spillage, inhalation, ingestion or absorption through the skin or disposal of surplus product</li> <li>- Training is provided in handling potentially biohazardous samples, chemicals and good lab practice.</li> </ul>	H	<p>To monitor when system in operation JR / AMY / Team Leader</p> <p>AM to access material safety data sheet</p>		
Test staff feeling unwell/ displaying COVID 19 symptoms	Testing staff and participants could be exposed to COVID19 virus	<ul style="list-style-type: none"> <li>- Member of testing staff will isolate and remove themselves from the test centre and school immediately following safe travel guidance and request a test.</li> <li>- Any PPE worn by testing staff or those supporting them is treated as clinical waste</li> <li>- Their work area is thoroughly cleaned and disinfected before re-use</li> <li>- Spare staff capacity in place to replace their role</li> <li>- If they use the toilet this should then be closed</li> </ul>	H	To monitor when system in operation JR / AMY / Team Leader		

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Failure to manage those who test as Positive for COVID 19	Other occupants of the premises could be exposed to COVID19 virus	<ul style="list-style-type: none"> <li>- Participant with positive test will be taken out of class discreetly, advised of test results and taken to well ventilated isolation area for suspected Covid cases</li> <li>- Pupil/staff member will be advised to leave the site immediately, and to follow safe travel guidance</li> <li>- Pupil/staff member must follow national isolation guidance with their household</li> <li>- Isolation area not to be used again until cleaned and disinfected</li> <li>- School takes advice from Local Outbreak Control and isolate close contacts / or serial tests of close contacts</li> </ul>	H	To monitor when system in operation JR / AMY / Team Leader		

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Lack of planning for emergencies	All persons could be harmed by failure to provide first aid in case of injury or from exposure to fire and smoke or a test could be invalidated	<ul style="list-style-type: none"> <li>- First aid support is available at all times that the test site is operating.</li> <li>- First aiders have the required PPE to support Covid-suspect cases</li> <li>- Fire evacuation notices are displayed in testing premises</li> <li>- Fire exits from testing site are unlocked at all times during occupancy</li> <li>- In the event of an emergency, all samples that have been placed into the extraction buffer or have not been marked by pen with a result will be abandoned, and later recorded as invalid. Subjects who receive an invalid result will need to be retested.</li> </ul>	H	<p>To monitor when system in operation JR / AMY / AS / Team Leader</p> <ul style="list-style-type: none"> <li>- All test staff are made aware of fire evacuation procedure from 6<sup>th</sup> Jan 2021</li> </ul>	AS 6 <sup>th</sup> Jan 2021	
Unsafe manual handling	Testing staff could be harmed by musculo-skeletal injury	<ul style="list-style-type: none"> <li>- safe handling principles are followed</li> <li>- PPE and test kits are stored appropriately to avoid reaching and stretching to access items</li> <li>- Two person lifts used (wearing PPE) where furniture needs to be moved to set up test site</li> </ul>	H	To monitor when system in operation JR / AMY		

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Inappropriate storage and disposal of clinical waste	Others in the waste chain could be exposed to COVID19 virus	<ul style="list-style-type: none"> <li>- Swabs, LFD test devices, PPE and cleaning cloths and tissues are to be treated as clinical waste</li> <li>- School site is registered for clinical waste and complete consignment paperwork for transferring waste. Records to be kept for 2 years.</li> <li>Note: Very Short Term only</li> <li>- Where no clinical waste contract is in place, the waste is to be triple bagged and marked with date and time and held for 72 hours (when it can enter the normal waste chain) <b>until</b> clinical waste contract is established</li> <li>- Clinical waste bins/boxes used to collect all waste in line with the SOP at all test stations and separate collection of PPE waste Ideally the clinical waste bins used should be covered and or peddle operated.</li> </ul>	H	To monitor when system in operation JR / AMY / AS / Team Leader		

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Inappropriate storage and disposal of clinical waste	Others in the waste chain could be exposed to COVID19 virus	<ul style="list-style-type: none"> <li>- The opening in waste box is small so presents limited risk and the bag is to be sealed with orange clinical waste tag once full and the bag sealed</li> <li>- Once testing activity is completed all the clinical waste is to be stored in safe and secure location in appropriate clinical waste containers to be collected and transported to waste sites set up for clinical waste disposal.</li> <li>- Transportation to be completed by appropriate waste management contractor with staff trained to safely handle clinical waste.</li> </ul>	H	To monitor when system in operation JR / AMY / AS / Team Leader		

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Exposure of cleaning staff	Cleaning staff could be exposed to COVID19 virus	<ul style="list-style-type: none"> <li>- Testing staff undertake cleaning of test areas and high touchpoint areas</li> <li>Participants wipe down between each test.</li> <li>Processors wipe down between each test</li> <li>- Site cleaners only enter test area when testing activity has ended unless called to deal with a spillage. They only clean the floor and doors.</li> <li>- Type IIR masks, gloves and aprons/long sleeved aprons are worn by cleaning staff in non-Covid secure areas</li> <li>- All potentially contaminated surfaces are cleaned and disinfected using single use cloths/wipes, paper roll or disposable mop heads</li> <li>- Supplies of suitable cleaning agents and disinfectants compliant with SOP are available</li> <li>- PPE must be discarded after cleaning up spillage</li> <li>- Cleaning materials and PPE are treated as offensive waste</li> </ul>	H	To monitor when system in operation JR / AMY / AS / Cleaning Supervisor		



4. Tick (✓) 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

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.

		Potential severity of harm <i>(this may injury, loss or damage)</i>		
		Minor Harm 1	Moderate Harm 2	Serious Harm 3
Likelihood of harm occurring	Highly unlikely 1	Trivial 1	Low 2	Medium 3
	Unlikely 2	Low 2	Medium 4	High 6
	Likely 3	Medium 3	High 6	High 9

Risk Rating	Action Priority
High (6-9)	Immediate action required
Medium (3-4)	Actions to control the risk must now be considered and steps to manage the risk until control measures can be provided must implemented.
Low (2)	Implement reasonable control measures and monitor.

**Trivial (1)**

No action required unless level of harm or likelihood changes.

**6. Assessment**

**Signature of Assessor(s):**

**Signature of Line Manager:**

**Print Name: Andy Storer Andrea McCarthy**

**Print Name: Julie Rudge**

**Date Assessed: 12/01/2020**

**Review Date: 25/01/2020**

**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.

Name	Signature	Name	Signature