## Ryecroft C.E. Middle School Lateral Flow Testing Risk Assessment Record Form

- 1. School/Academy Name Ryecroft C.E. Middle School ....................... 2. Assessor(s)... T Evans
- 2. **Description of Task:** Testing of staff and Post 16 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, throat swabs, or sputum samples 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	risk rating	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	Main Hall identified as: - large enough to set up one-way queuing system, registration area, multiple test stations, areas for processing and recording results - Allows for social distancing measures between all areas - has door(s) to outside (where possible) to facilitate one-way systems with external entry and exit - can be kept separate from all other activities - has internet access/mobile signal - is well lit - is clean, and easy to clean with non-porous flooring - can be ventilated - is secure	M	To plan for scaling up to more test stations if mass testing expected.	M	

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p ie	nappropriate premises dentified for esting	Staff and pupils attending – failure to follow agreed Standard Operating Procedures may jeopardise the validity of testing and cause harm from possible infection	<ul> <li>has had unnecessary items removed other than the wipeable furniture required for testing layout</li> <li>Has access to toilets/washing facilities dedicated to testing staff (or if not, with an increased cleaning regime)</li> <li>separate donning and doffing 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> </ul>	M			

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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	Testing staff are: - Appropriately trained, employed by Ryecroft/DBS checked. Training includes test preparation and test results, clinical swabbing, safe donning and doffing of PPE etc Individual training certificates obtained and appropriately recorded - 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 - Team leader ensures quality of testing and adherence to Standard Operating Procedures (SOP) - Respiratory hygiene, hand washing, safe donning and doffing of PPE and social distancing guidance are regularly reinforced by Team Leader and monitored.	M	Initial training done 12 <sup>th</sup> Jan 2021 and practical training 13 <sup>th</sup> Jan 21  Complete competency assessment once up and running – review/monitor on a regular basis  To train staff when new people introduced to the process / team as necessary.	13.01.2021	M

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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	- For those people unable to give informed consent due to age (<16) or mental capacity, written consent is obtained from parent /carer/guardian - the school stores a copy of consent forms as required by their information governance policy	M			
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	-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 - Anyone with symptoms must attend for a PCR test through the national system - 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	M	Limited clutter – chairs only on request  To monitor when system in operation RB/TE		M

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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	-Testing staff wear surgical face masks and visors/goggles, disposable gloves and aprons/long sleeved aprons as per role guidance in SOP - all staff regularly reminded of infection prevention & control guidance - PPE is worn for sessional or individual use as required by the SOP and changed if soiled/contaminated -School has timetabled testing to avoid overcrowding of test station and immediate vicinity - "Business as usual" school staff not to enter the testing site - Signage is displayed at entrance/exits to test area for: Wearing of face coverings (staff) Use of hand sanitiser Not to attend with symptoms -70% alcohol hand sanitiser (EN1500 standard) provided by entrance, exit and at each testing area and workstation - Use of sanitiser/wearing of face coverings/social distancing is enforced by queue monitor - Pupils/staff are tested from the same bubble - test centre is fogged at the end of each day  Lateral Flow Ris	M sk Assessment	Cleaning – Regular cleaning of the site including wipe down of all potential touchpoints in accordance with PHE guidance.  To monitor when system in operation RB / TE  Poster to be made – do not attend with symptoms.	Ongoing – continual (monitored by Business Manager)	M

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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	- Face coverings to be worn at all times by those staff being tested except when lowered for swabbing purposes - Spare IIR face masks are available for participants if needed - Tables and chairs are easily cleaned - All touch points are disinfected with anti-viral spray between tests - No equipment is shared - No physical handling of documents to participants except barcodes/test kits - Perspex screens installed at swabbing and processing desks where possible (testing staff to wear IIR face masks/visors/goggles where these are not available) - Floor markings identify 2m social distance requirements in queue and testing areas - Pupils return to class immediately after testing and do not wait in vicinity for results - Staff supporting top up of supplies within test premises do so when no testing activity is taking place	M	To monitor when system in operation RB / TE		M

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Difficulty with carrying out throat and midturbinate 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	- Only sealed swabs are given out - Any damaged swab/test packaging is not used, is treated as clinical waste and this non-use recorded - Pupil to sanitise hands, use a tissue, and sanitise hands again before opening swab packet - Verbal explanations are provided of how to use the swab in throat and nose - Laminated posters explaining swabbing process are displayed - Test subject advised to avoid touching swab on any surface within mouth other than tonsils - Freestanding mirror's provided in testing area - Disposable vomit bowls/bags are provided for those with gag reflex and spillage guidelines followed - Test area/booths are thoroughly cleaned and disinfected before next use e.g: table, chair, mirror and laminated posters are wiped between each test with disposable cloths and disinfectant effective against enveloped viruses	M	To monitor when system in operation RB / TE		M

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Failure to manage samples and coding	Failure to follow agreed Standard Operating Procedures – participants may receive wrong results	- Registration staff ensures 2 identical barcodes are provided to participants - Barcodes are attached by testing staff at sample collection desk - Barcodes are checked for a match at the analysis desk and attached to Lateral Flow Device - LFD is processed in accordance with SOP and manufacturers guidance - Samples are processed one at a time - Tube racks are used to avoid spillage - Extraction solution bottles are cleaned with anti-viral disinfectant wipes between samples - Test processor changes gloves between each test - The correct amount of extraction solution is used - Enough time is allowed for each sample to register the results (30 minutes) 'Recorder' registers the 'testers' details to the unique ID barcode – maintains school record and scans/uploads to NHS Track and Trace Portal	L	To monitor when system in operation RB / TE  Currently due to being unable to access online portal only paper records kept	L	

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Failure to manage samples and coding	Failure to follow agreed Standard Operating Procedures - Test subject may receive wrong results	<ul> <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>	L	To monitor when system in operation RB / TE		
Damaged barcode, lost LFD, failed scan of barcode	Orphaned record on registration portal & "No Result" advice to test subject	- If test void participant to be contacted and recalled to take another test	L	To monitor when system in operation RB / TE		L

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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> (sodiur phosphate monobasic), NaCI (Sodium Chloride)	inappropriate use of chemicals	<ul> <li>Chemical components are not classified as hazardous for use as designed.</li> <li>PPE (nitrile gloves/safety glasses with side shields/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> <li>Processors have lab related skill set and knowledge</li> </ul>	L	To monitor when system in operation RB / TE  TE / CC to access material safety data sheet		L

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un dis C0	est staff feeling well/ splaying DVID 19 mptoms	Testing staff and participants could be exposed to COVID19 virus	<ul> <li>Member of testing staff will isolate and remove themselves from the test centre 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 reuse</li> <li>Spare staff capacity in place to replace their role</li> <li>If they use the toilet this should then be closed and sanitised before reopening</li> </ul>	L	To monitor when system in operation RB / TE		L

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Failure to manage those who test as Positive for COVID 19	Other occupants of the premises could be exposed to could be exposed to COVID19 virus	- 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 - Pupil/staff member will be advised to leave the site immediately, and to follow safe travel guidance - Pupil/staff member must follow national isolation guidance with their household -Isolation area not to be used again until cleaned and disinfected - School takes advice from Local Outbreak Control and isolate close contacts / or serial tests of close contacts	M	To monitor when system in operation RB / TE		M

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	and how?	already in place	- H, M, L? See section 5	is to be taken by whom and by when?	State the date completed and sign.	now – H, M, L? See Section 5
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	- First aid support is available at all times that the test site is operating First aiders have the required PPE to support Covid-suspect cases - Fire evacuation notices are displayed in testing premises - All test staff are made aware of fire evacuation procedure - Fire exits from testing site are unlocked at all times during occupancy - 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.	L	To monitor when system in operation RB / TE		L
Unsafe manual handling	Testing staff could be harmed by musculo-skeletal injury	<ul> <li>- all staff have received manual handling training and will adhere to safe handling principles</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>	L	To monitor when system in operation RB / TE		L

	Swabs, LFD test devices, PPE			See Section 5
storage and disposal of clinical waste chain could be exposed to COVID19 virus  N - could be exposed to COVID19 virus  N - could be exposed to COVID19 virus  Training to to South to S	and cleaning cloths and tissues are to be treated as clinical waste. School site is registered for linical waste and complete onsignment paperwork for ransferring waste. Records to be ept for 2 years.  Note: Very Short Term only. Where no clinical waste ontract is in place, the waste is to be triple bagged and marked with date and time and held for 72 ours (when it can enter the formal waste chain) until clinical waste contract is established.  Clinical waste bins/boxes used to collect all waste in line with the SOP at all test stations and eparate collection of PPE waste deally the clinical waste bins sed should be covered and or reddle operated.  If using the Clinical Waste box method, the box is lined with additional orange bag and used to ollect the waste to prevent louble handing.	L Assassment	To monitor when system in operation RB / TE	L

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Inappropriate storage and disposal of clinical waste	Others in the waste chain could be exposed to COVID19 virus	The opening in waste box is small so presents limited risk and the box is to be sealed with orange clinical waste tag once full and the box sealed  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.  Transportation to be completed by appropriate waste management contractor with staff trained to safely handle clinical waste.	L			L

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Exposure of cleaning staff	Cleaning staff could be exposed to COVID19 virus	- Testing staff undertake cleaning of test areas and high touchpoint areas between each test - Processors wipe down between each test - Cleaners only enter test area when testing activity has ended unless called to deal with a spillage - Type IIR masks, gloves and aprons/long sleeved aprons are worn by cleaning staff in non-Covid secure areas - All potentially contaminated surfaces are cleaned and disinfected using single use cloths/wipes, paper roll or disposable mop heads - Supplies of suitable cleaning agents and disinfectants compliant with SOP are available - PPE must be discarded after cleaning up spillage - Cleaning materials and PPE are treated as offensive waste	M	To monitor when system in operation RB / TE		M

**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 severi	Potential severity of harm (this may injury, loss or damage)				
		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: Tracey Evans Print Name: Rachael Baramuszczak

Date Assessed: 12.01.2021 Review Date: 12.01.2021

## 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.

Control In	Control Improvements				
Action No	Recommended additional control measures	Responsibility			
1	Content of risk assessment to be communicated with all workers as part of induction	RB / TE			
2	Talks to be delivered to all workers on a regular basis including slips trips falls and complacency	TE			

Version control						
Version Number	Date issued	Author	Update information			
V1.0	12.01.2021	T Evans	First published version			
V1.1	13.01.2021	T Evans	Updated to include additional operational measures			