

Activity/ Situation	Asymptomatic Testing for Secondary and Special Schools From 8 th March			
Location				
Persons at Risk	Pupils <input type="checkbox"/>	Employees <input type="checkbox"/>	Visitors <input type="checkbox"/>	Contractors <input type="checkbox"/>
HAZARD(S)	<p><i>Note: this list is not exhaustive and must be adapted for your own needs</i></p> <ul style="list-style-type: none"> ■ Inadequate Staffing/Information/Instruction/Training ■ Inadequate Infection Prevention and Control (IPC) ■ Inadequate Setting Up Of Testing Environment and Testing Arrangements ■ Inadequate Testing of SEND Pupils ■ Inadequate PPE for Staff ■ Inadequate Self-Swabbing Sample Collection Procedure ■ Inadequate Sample Processing and Analysis Procedure ■ Recording of Results ■ Negative Results ■ Invalid Results ■ Positive Results ■ Travel Advice for Positive Results ■ Inadequate Infection Prevention and Control: Equipment ■ Inadequate Cleaning Regime ■ Spillages ■ Inadequate Waste Management 			
CONTROL MEASURES	ADDITIONAL INFORMATION	YES	<input type="checkbox"/>	N/A
<p><i>Note: you must amend and adapt this generic risk assessment to suit your own needs by selecting the controls from the examples provided (adding and amending others where necessary) and then evaluate the overall risk for the activity/situation.</i></p>				
<p>Schools MUST follow the Clinical Standard Operating Procedure (SOP) for Mass Testing with Lateral Flow Antigen Testing Devices in Schools and Colleges to ensure they are administering the tests correctly and that they are covered from an indemnity perspective</p>				
<p>Inadequate Staffing/Information/Instruction/Training</p>				
<p>School follows the Clinical Standard Operating Procedure (SOP) for Mass Testing with Lateral Flow Antigen Testing Devices in Schools and Colleges and ensures that tests are administered correctly</p>		Y	<input type="checkbox"/>	<input type="checkbox"/>

Covid Coordinator/Team Leader is Teresa Drtinkwaterer	Responsible for the overall on-site operations at the test site, including day-to-day workforce management	Y	<input type="checkbox"/>	<input type="checkbox"/>
The nominated Quality Leads are Teresa, Drinkwater, Chay Bell and Tom Mcnaught Roberts Team leaders are: Jason Fillingham, Pete grayburn, Rikki Barnett, Nicky Garton and Anne Richards	This individual will have accountability for the quality of the service within the context of a non-laboratory environment testing	Y	<input type="checkbox"/>	<input type="checkbox"/>
Queue Coordinator in place each day	Ensures orderly entry of subjects onto the testing site	Y	<input type="checkbox"/>	<input type="checkbox"/>
Registration Assistant in place each day	Responsible for ensuring subjects have registered and distributing test kits on arrival	Y	<input type="checkbox"/>	<input type="checkbox"/>
One or more Test Assistants in place each day	Provides guidance to subjects on swabbing as requested and ensures cleaning of booths or sample collection stations.	Y	<input type="checkbox"/>	<input type="checkbox"/>
One or more Processing Operatives in place each day	Prepares test sample for analysis and interprets result	Y	<input type="checkbox"/>	<input type="checkbox"/>
Results Recorder in place each day	We are not recording results due to a break down in the DfE software		N	<input type="checkbox"/>

Cleaner(s) in place at the time of testing	Keeps the test site clean to prevent cross contamination and Spread of Covid 19 Cleaners clean before and after testing and are always available on site. Testing colleagues are asked to clean the area after they have completed their test	<input type="checkbox"/>	N	<input type="checkbox"/>
Appropriate training package in place for operators to be trained to be able to conduct the test in a safe and effective manner		Y	<input type="checkbox"/>	<input type="checkbox"/>
Staff have watched the approved video package which demonstrates how physical tests are conducted		Y	<input type="checkbox"/>	<input type="checkbox"/>
Staff have read through of materials outlining the infection prevention and control measures and the appropriate use of personal protective equipment, including the proper procedure for donning and doffing		Y	<input type="checkbox"/>	<input type="checkbox"/>
Staff have undertaken several tests under supervision		Y	<input type="checkbox"/>	<input type="checkbox"/>
School conducts a regular audit of performance and overall testing process PPE, dealing with any contamination or other untoward incidents	Frequent QA checks are carried out.	Y	<input type="checkbox"/>	<input type="checkbox"/>
Regularly (minimum six monthly) undertaking updated online training to ensure standards are adhered to and any new requirements are included. Or as required should new training modules be provided		Y	<input type="checkbox"/>	<input type="checkbox"/>
Staff who are required to top up supplies within test areas should do so at the beginning of each testing group and when no subjects are present	Store room has spare stock, this is next to the testing area.	Y	<input type="checkbox"/>	<input type="checkbox"/>
All staff are reminded of the importance of IPC guidance. Regular handwashing and consistent social distancing are key to ensuring safety for all roles		Y	<input type="checkbox"/>	<input type="checkbox"/>
Inadequate Infection Prevention and Control (IPC)				

Asymptomatic: All subjects are advised in advance not to attend if they have any symptoms of COVID 19, or live with someone who is showing symptoms of COVID 19 (including a fever and/or new persistent cough) or have been in close contact with someone who is displaying symptoms	Symptomatic individuals are advised to book a PCR test on the NHS App, online or by calling 119	Y	<input type="checkbox"/>	<input type="checkbox"/>
Those staff who may be exposed to symptomatic individuals will be provided with IPC advice based on government guidance for managing a Subject with possible COVID-19	https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control To follow Academy guidance and systems at all times	Y	<input type="checkbox"/>	<input type="checkbox"/>
All workers on site are fully briefed and trained about PPE and IPC standards, including those approved by the NHS/IIPC Cell	Certificates provided on completion of the course	Y	<input type="checkbox"/>	<input type="checkbox"/>
Guidance of IPC standards is clearly displayed	Sites will display appropriate signage, including: 1. Hand washing 2. Respiratory hygiene - 'Catch it, bin it, kill it' 3. Personal Protective Equipment (PPE) (Donning and Doffing) 4. Social distancing: All workers should always remain 2 metres apart where possible, in accordance with government guidance 5. Equipment distancing and cleaning	Y	<input type="checkbox"/>	<input type="checkbox"/>
All staff members are encouraged to not neglect the importance of hand hygiene, not to touch their face whilst working with samples, and importantly stay at home if they develop COVID-19 related symptoms		Y	<input type="checkbox"/>	<input type="checkbox"/>

Testing booths or sample collection areas are equipped with hand sanitiser dispensers for use throughout the testing process	In accordance with guidance from the WHO 2020 – effective alcohol-based hand rub products should contain between 60% - 80% of alcohol and its efficacy should be proved according to EN1500	Y	<input type="checkbox"/>	<input type="checkbox"/>
Staff will focus on maintaining social distancing when communicating with subjects		Y	<input type="checkbox"/>	<input type="checkbox"/>
Inadequate Setting Up Of Testing Environment and Testing Arrangements				
On-site testing: schools establish an Asymptomatic Test Site (ATS) on the premises to test all pupils/students during their initial return. Pupils/students self-swab with the processing and reporting being undertaken by a trained workforce. Confirmatory PCR requirement has been suspended where testing takes place at an ATS		Y	<input type="checkbox"/>	<input type="checkbox"/>
Transition to testing at home (self-test): schools/colleges distribute test kits to pupils/students who are responsible self-swabbing and self-reporting to NHS Test & Trace and the school/college (or with parent/carer support where appropriate). The test should ideally be done in the morning of a school day and the spacing should be such that provides adequate testing coverage during the school week for e.g. an <i>ideal regime would be for testing on Monday and Thursday</i> mornings at home prior to school start. In the event of a positive result from self-testing, the participant is required to book a Confirmatory PCR	To share details as we approach the end of the third test.	Y	<input type="checkbox"/>	<input type="checkbox"/>
Retention of ATS: All schools/colleges are advised to retain a pared-down on-site testing facility on an ongoing basis to assist students who are unable to swab at home		Y	<input type="checkbox"/>	<input type="checkbox"/>

The move to self-test has been tailored to each institution and the specific needs of its pupil/student population, but should not be before the three tests in ATS mode for Test on Return	See section 10.2 of the SOP for exceptional circumstances where a pupil/student would not be able to access testing via ATS and could move to home testing	Y	<input type="checkbox"/>	<input type="checkbox"/>
It is acceptable for individuals to test 3-5 days apart using Lateral Flow Devices, and maximum flexibility will be required whilst education settings are dealing with a large volume of pupils/students in an ATS setting	Schedule is in place.	Y	<input type="checkbox"/>	<input type="checkbox"/>
Testing at home does not infer the same constraints so a habit of testing routinely 3-4 days apart is recommended		Y	<input type="checkbox"/>	<input type="checkbox"/>
Testing at the school/college Asymptomatic Testing Site (ATS) will be using on the current test kit, PPE etc. provided previously by DHSC for this testing		Y	<input type="checkbox"/>	<input type="checkbox"/>
The self-testing/testing at home referred to in this SOP uses Lateral Flow Device (LFD) kits specifically designed for this purpose and issued by DHSC to schools/colleges, who in turn would provide them to the eligible people for their personal use (not any other person)		Y	<input type="checkbox"/>	<input type="checkbox"/>
A record of each box of kits issued to a person for home testing will be recorded in the Test Kit Log for the purpose of stock management and to facilitate any recall		Y	<input type="checkbox"/>	<input type="checkbox"/>
On-site testing: schools establish an Asymptomatic Test Site (ATS) on the premises to test all pupils/students during their initial return. Pupils/students self-swab with the processing and reporting being undertaken by a trained workforce. Confirmatory PCR requirement has been suspended where testing takes place at an ATS		Y	<input type="checkbox"/>	<input type="checkbox"/>
The ATS test kits in sets of 25 should not be repurposed for home use by schools/colleges	Specific home test kits of the Innova Lateral Flow Device will be made available for the self-test component of this programme	Y	<input type="checkbox"/>	<input type="checkbox"/>

For self-testing at home , those testing themselves and parent/carer should ensure they have duly read the instruction for use (https://www.gov.uk/government/publications/instructions-for-covid-19-self-test) and watched the approved video (https://www.youtube.com/watch?v=S9XR8RZxKNo&list=PLvaBZskxS7tzQYIVg7lwH5uxAD9UrSzGJ&index=1) which demonstrates how physical tests are conducted	To be shared as tests in school; are nearing completion	Y	<input type="checkbox"/>	<input type="checkbox"/>
The test cartridge and extraction solution is stored at ambient temperature (2-30 degrees Centigrade)		Y	<input type="checkbox"/>	<input type="checkbox"/>
The reagents and devices are at room temperature (15-30 degrees centigrade) when used for testing		Y	<input type="checkbox"/>	<input type="checkbox"/>
The manufacturer's instructions for use are shared with all relevant members of staff	Innova SARS-Cov-2 Antigen Test IFU	Y	<input type="checkbox"/>	<input type="checkbox"/>
Test Site set up in accordance with the "Rapid Testing in Schools and Colleges – How To Guide"	And signed off by the MAT	Y	<input type="checkbox"/>	<input type="checkbox"/>
Test Site is separate from the main area of business operations for privacy, safe queue management, and to limit disruption to both testing and BAU activity		Y	<input type="checkbox"/>	<input type="checkbox"/>
Sufficient space for appropriate social distancing	Where space is limited, test queues should be managed safely to avoid disruption – for example, a waiting room may be separate and adjacent to a testing room and must allow for appropriate social distancing A rota is in place for year groups so they avoid breaking bubbles	Y	<input type="checkbox"/>	<input type="checkbox"/>
Test Site contains easy to clean floor and surfaces	Using the gym with a hardwood flooring	Y	<input type="checkbox"/>	<input type="checkbox"/>
Test Site has resistant, non-absorbent, non-porous flooring		Y	<input type="checkbox"/>	<input type="checkbox"/>

Airflow and ventilation is natural not recirculated air	And external doors	Y	<input type="checkbox"/>	<input type="checkbox"/>
Ambient temperature of 15-30 C maintained in Test Room	Checked by QA and colleague sin the Gym,	Y	<input type="checkbox"/>	<input type="checkbox"/>
One-way flow from entry to exit in place as much as possible		Y	<input type="checkbox"/>	<input type="checkbox"/>
Test subject chairs in the swabbing bay are a minimum of 2m apart		Y	<input type="checkbox"/>	<input type="checkbox"/>
Each swabbing desk has a processing desk close by no more than 1m away		Y	<input type="checkbox"/>	<input type="checkbox"/>
Recording desk is located close to the swabbing desks		Y	<input type="checkbox"/>	<input type="checkbox"/>
There is clear division between swabbing and processing area		Y	<input type="checkbox"/>	<input type="checkbox"/>
Individuals being tested must not enter the processing area		Y	<input type="checkbox"/>	<input type="checkbox"/>
Clear access maintained to PPE donning and doffing area	Using designated changing rooms	Y	<input type="checkbox"/>	<input type="checkbox"/>
Ready access to hand hygiene (soap and water/appropriate alcohol-based hand rub) available		Y	<input type="checkbox"/>	<input type="checkbox"/>
Consideration of the need for privacy for participants to self-administer a test has been given		Y	<input type="checkbox"/>	<input type="checkbox"/>
Health and safety, disability access, and fire safety regulations that govern deployment sites	Fire, health and safety, and evacuation routes should be clearly marked in line with the rest of the building Fire door at the end of the room	Y	<input type="checkbox"/>	<input type="checkbox"/>
All surfaces are de-cluttered with no personal or non-essential equipment		Y	<input type="checkbox"/>	<input type="checkbox"/>
Adequate space available for storage		Y	<input type="checkbox"/>	<input type="checkbox"/>
Appropriate testing site waste management arrangements in place	Specific contract is in place.	Y	<input type="checkbox"/>	<input type="checkbox"/>
Participation is voluntary for the programme and consent has been received from either by participants or parents /legal guardians, as appropriate	Via a Google form	Y	<input type="checkbox"/>	<input type="checkbox"/>

School will need to identify the contacts of a confirmed case		Y	<input type="checkbox"/>	<input type="checkbox"/>
People who are identified as close contacts of a confirmed will follow the usual national guidelines and are legally obliged to self-isolate according to the advice given to them by the NHS Test and Trace service		Y	<input type="checkbox"/>	<input type="checkbox"/>
For looked after children, local authorities may already have arrangements in place that cover medical treatment, which may extend to this sort of testing. Where that is not the case, parental consent should be secured via the child's social worker, who may need to contact the birth parents or other persons who hold parental responsibility		Y	<input type="checkbox"/>	<input type="checkbox"/>
For children or young people where it has been determined that they will be unable to swab themselves, and the parent/guardian is not swabbing, consent should be sought to enable a third party to do this.	ASA colleagues will not be swabbing	Y	<input type="checkbox"/>	<input type="checkbox"/>
11 year olds ATS: may self-swab under supervision of ATS staff. Self-test: should be tested by an adult who should also report their results to NHS Test & Trace and the school/college.		Y	<input type="checkbox"/>	<input type="checkbox"/>
12-year -17-year olds ATS: may self-swab under supervision of ATS staff. Self-test: may self-test at home and report results to NHS Test & Trace and the school/college under supervision of an adult.		Y	<input type="checkbox"/>	<input type="checkbox"/>
18 and above ATS: may self-swab in ATS without supervision. Self-test: may self-test at home without supervision and report results to NHS Test & Trace and the school/college.		Y	<input type="checkbox"/>	<input type="checkbox"/>
If the student refuses to take the test despite consent by their parent/ guardian/ carer, their wishes are respected		Y	<input type="checkbox"/>	<input type="checkbox"/>

Current advice is that for most a previously confirmed Covid-19 diagnosis in the last 90 days is likely to make testing with an LFD antigen test not necessary. If these individuals choose to have an LFD test as part of this programme, please ensure the LFD test is not taken whilst they are within a period of isolation following the last confirmed test. If symptoms persist, this could be longer than the normal 10-day self-isolation period for confirmed cases.	They are still required to self-isolate if identified as a close contact of a positive case, even if this is within the 90-day window	Y	<input type="checkbox"/>	<input type="checkbox"/>
Face masks: Prominent signage reminding attending subjects of the above to be displayed at the entrance to the building	Individuals should not attend a test site unless wearing an appropriate face covering. Face coverings are not required for individuals who: <ul style="list-style-type: none"> • cannot put on, wear or remove a face covering because of a physical or mental illness or impairment or disability • speak to or provide assistance to someone who relies on lip reading, clear sound or facial expression to communicate 	Y	<input type="checkbox"/>	<input type="checkbox"/>
Face coverings/masks to be worn by subjects at all times whilst on the premises except for brief lowering at time of swabbing		Y	<input type="checkbox"/>	<input type="checkbox"/>
Requirement to wear face covering/mask to be reminded to all subjects in advance at time of test booking	Also signs in the Academy building	Y	<input type="checkbox"/>	<input type="checkbox"/>
Compliance with wearing of face covering/mask of all subjects to be visually checked on arrival by reception / security staff		Y	<input type="checkbox"/>	<input type="checkbox"/>
Compliance with wearing of face covering/mask of all subjects to be visually checked through building by queue managers and all other staff		Y	<input type="checkbox"/>	<input type="checkbox"/>
If an individual arrives at an ATS without a face covering and indicates they are exempt in accordance to latest government guidance, they are permitted to enter the test site and perform the test		Y	<input type="checkbox"/>	<input type="checkbox"/>

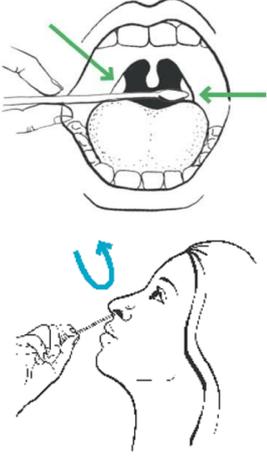
All subjects to use hand sanitiser provided on arrival & adherence to this enforced by reception staff		Y	<input type="checkbox"/>	<input type="checkbox"/>
Two metre social distancing to be maintained between subjects with measured floor markings in place to ensure compliance in addition to verbal reminders if necessary from reception, queue management & sampling staff		Y	<input type="checkbox"/>	<input type="checkbox"/>
One-way flow of subjects through the building is to be initiated and maintained at all times. Compliance with this is to be ensured by queue management staff		Y	<input type="checkbox"/>	<input type="checkbox"/>
Limited clutter such as chairs available only on request; no physical handling of documents to subjects except barcodes and PCR test kits for first 200 subjects		Y	<input type="checkbox"/>	<input type="checkbox"/>
There is a legal obligation to ensure all test kits are registered via the Lite Registration service	Tests can be registered via the Lite Registration service in the following timescales: · up to 24 hours before a test · up to 24 hours after a test for a positive or void result · up to 7 days after a test for a negative result	Y	<input type="checkbox"/>	<input type="checkbox"/>
Inadequate Testing of SEND Pupils				
The setting will decide whether the pupil can reasonably provide informed consent on their own behalf and may need to consider undertaking a Mental Capacity Assessment if appropriate. Settings may draw on any MCAs completed for the student previously, including referring to parents if the parent has acted as the Appropriate Person for previous decisions. Students themselves should be given the opportunity to express their views and preferences to the extent that they are able	If school has any queries they should seek their own legal advice on the particular circumstances	Y	<input type="checkbox"/>	<input type="checkbox"/>
Schools keep a record of how the decision on consent was made	On a case by case basis	Y	<input type="checkbox"/>	<input type="checkbox"/>

People with special needs (this could be physical or cognitive disability) might not be able to self-swab and self-test but may have the capacity to consent. They are asked if they will allow someone to help them do the test, or to allow someone to do the test for them		Y	<input type="checkbox"/>	<input type="checkbox"/>
Under circumstances where a subject is unable to swab or test themselves such as due to physical disability or special needs, they are swabbed, under due consent, by: <ul style="list-style-type: none"> • Parent/guardian, guided by a Test Assistant • An adequately trained school staff member (where permission and consent of the parent/guardian has been taken as part of initial consent process) • trained swabbers who are part of testing workforce 	ASA colleghases will not be swabbing	Y	<input type="checkbox"/>	<input type="checkbox"/>
For children or young people where it has been determined that they will be unable to swab themselves, and the parent/guardian is not swabbing, consent has been sought to enable a third party to do this	ASA colleghases will not be swabbing	Y	<input type="checkbox"/>	<input type="checkbox"/>
Carers or other accompanying individuals should only be asked to assist or test the person if this falls into their normal responsibilities and they feel comfortable and confident on doing so		Y	<input type="checkbox"/>	<input type="checkbox"/>
Each case is assessed on a case-by-case basis and if required, the carer or family member can consult their physician in case specific care is required to swab the person		Y	<input type="checkbox"/>	<input type="checkbox"/>
Appropriate hand sanitisation is used before and after the swabbing process for both, the test subject and the accompanying person		Y	<input type="checkbox"/>	<input type="checkbox"/>
Consideration given to implementing traffic flow or sample collection areas for those who require assisted swabbing by a carer or family member to mitigate the risk to other subjects coming in close proximity of those individuals i.e. highlight an area that can be used safely, that maintain 2 metres social distancing from others		Y	<input type="checkbox"/>	<input type="checkbox"/>
If assisted swabbing is performed by a family member and they are considered part of the person's support bubble, no extra PPE is required apart from a face covering		Y	<input type="checkbox"/>	<input type="checkbox"/>
If a pair of gloves is requested, they are issued with gloves to perform the swabbing		Y	<input type="checkbox"/>	<input type="checkbox"/>

If assisted swabbing is performed by a carer who is paid to provide care, they need to follow their organisational policy	They may have their own PPE or may need to be issued with gloves to perform the swabbing	Y	<input type="checkbox"/>	<input type="checkbox"/>
In circumstances where a pupil/student would not be able to be tested through an ATS but who could be tested at home by a suitably competent adult, settings can provide home testing kits to them from the outset (without the pupil being tested at an ATS first), where this is appropriate for the pupil/student	This may for example be suitable for pupils/students where a parent/carer would be able to support with testing at home whereas the setting is unable to	Y	<input type="checkbox"/>	<input type="checkbox"/>
The approach should be agreed with the parent/carer and, wherever possible, the young person themselves, following a guided conversation with the school on what is best for the child, whilst ensuring the accuracy of the results		Y	<input type="checkbox"/>	<input type="checkbox"/>
As a minimum, the first three tests done at home (if not initially done via ATS) should be administered by the pupil/student's parent/carer (i.e. the parent/carer should do the swab as well as the other steps)		Y	<input type="checkbox"/>	<input type="checkbox"/>
If the pupil/student feels confident enough in doing so and can do it effectively, they can self-swab from the fourth test onwards as long as they are supervised by an adult		Y	<input type="checkbox"/>	<input type="checkbox"/>
When preparing to test another person the subject can watch a demonstration video at www.gov.uk/covid19-self-test-help	One has been created and shared by the Academy	Y	<input type="checkbox"/>	<input type="checkbox"/>
The test kit is shown to the person and they are taken through the steps		Y	<input type="checkbox"/>	<input type="checkbox"/>
The person is asked to open their mouth as wide as they can and say 'Ahhh' (this will make the tonsils easier to see) for as long as they can while the tonsils are swabbed (or where their tonsils would be if they have been removed)		Y	<input type="checkbox"/>	<input type="checkbox"/>
The fabric tip of the swab is rubbed over both tonsils (and where they would have been) with firm contact 4 times on each side		Y	<input type="checkbox"/>	<input type="checkbox"/>
The swab is carefully removed. (If their tonsils cannot be swabbed, both nostrils can be swabbed)		Y	<input type="checkbox"/>	<input type="checkbox"/>

The fabric tip of the same swab is placed gently into one of their nostrils until they feel some resistance		Y	<input type="checkbox"/>	<input type="checkbox"/>
The swab is rolled firmly around the inside of the nostril, making 10 complete circles		Y	<input type="checkbox"/>	<input type="checkbox"/>
Inadequate PPE for Staff				
School ensures that Processing Operatives wear disposable gloves, disposable plastic aprons, Fluid-resistant (Type IIR) surgical masks (FRSM) and eye protection.	Processing Operatives should wear apron/visor and mask sessionally and change gloves between samples	Y	<input type="checkbox"/>	<input type="checkbox"/>
School ensures that Cleaning Staff wear disposable gloves, disposable plastic aprons, Fluid-resistant (Type IIR) surgical masks (FRSM) and eye protection.	Cleaners need to change gloves and apron if cleaning a spillage	Y	<input type="checkbox"/>	<input type="checkbox"/>
School ensures that Test Assistant(s) wear Fluid-resistant (Type IIR) surgical masks (FRSM)	In this SOP the Test Assistant is not administering the swab and is only supervising, therefore Test Assistants do not need to wear apron, gloves and visor, but they need immediate access to gloves if intervening	Y	<input type="checkbox"/>	<input type="checkbox"/>
School ensures that the Covid Coordinator / Team Leader wears Fluid-resistant (Type IIR) surgical masks (FRSM)		Y	<input type="checkbox"/>	<input type="checkbox"/>
School ensures that Registration Assistant(s) wear Fluid-resistant (Type IIR) surgical masks (FRSM)		Y	<input type="checkbox"/>	<input type="checkbox"/>
School ensures that the Results Recorder wears Fluid-resistant (Type IIR) surgical masks (FRSM)		Y	<input type="checkbox"/>	<input type="checkbox"/>
If Results Recorders handle LFD cartridges, they wear gloves on sessional basis		Y	<input type="checkbox"/>	<input type="checkbox"/>
School ensures that the Supplies Coordinator wears Fluid-resistant (Type IIR) surgical masks (FRSM)		Y	<input type="checkbox"/>	<input type="checkbox"/>

School ensures that the Queue Coordinator wears Fluid-resistant (Type IIR) surgical masks (FRSM)		Y	<input type="checkbox"/>	<input type="checkbox"/>
Disposable gloves are single use and are changed after each test		Y	<input type="checkbox"/>	<input type="checkbox"/>
Disposable aprons are replaced after each testing session		Y	<input type="checkbox"/>	<input type="checkbox"/>
Fluid-resistant (Type IIR) surgical masks (FRSM) are replaced after each testing session		Y	<input type="checkbox"/>	<input type="checkbox"/>
Eye protection is replaced after each testing session		Y	<input type="checkbox"/>	<input type="checkbox"/>
PPE is changed if protective properties are compromised, if contaminated, or if suspected to be contaminated		Y	<input type="checkbox"/>	<input type="checkbox"/>
Inadequate Self-Swabbing Sample Collection Procedure				
Before commencing swabbing, the process must be explained to the subject	The subject should also be informed that the swab may sometimes make them gag and they should use a sick bowl for any expectoration or vomit	Y	<input type="checkbox"/>	<input type="checkbox"/>
Subject is given a sealed sterile swab directed to a sample collection booth from the check-in zone	These are provided at the testing desk.	Y	<input type="checkbox"/>	<input type="checkbox"/>
Once at the sample collection station, the barcode is handed to the Processing Operative		Y	<input type="checkbox"/>	<input type="checkbox"/>
The subject should remove mask to administer swab		Y	<input type="checkbox"/>	<input type="checkbox"/>
The subject should open their mouth and visually identify the left and right tonsils (or tonsillar pits for subjects with the previous tonsillectomy). A mirror is provided in each booth for this		Y	<input type="checkbox"/>	<input type="checkbox"/>
The subject completes hand hygiene using the alcohol-based hand rub provided in the booth		Y	<input type="checkbox"/>	<input type="checkbox"/>
The swab is removed from sterile packaging by the subject		Y	<input type="checkbox"/>	<input type="checkbox"/>

<p>The swab should be kept dry before taking a sample from the back of the throat and therefore it must not touch any surfaces including the teeth, gums, and tongue or cheek surfaces when conducting the test</p>		<p>Y</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Holding the swab in their hand, the subject should open their mouth wide and rub the fabric tip of the swab over both tonsils (and where they would have been) at the back of the throat with good contact at least 3 times. Carefully remove the swab stick from the back of the throat taking care to ensure that it does not come into contact with any other structure or surface</p>	<p>The swab will be invalid if it touches these parts during or after sampling and all test materials are placed into the waste bag, sealed and a fresh swab selected.</p>	<p>Y</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>In the event that a subject vomits, operations at the testing bay shall be ceased and the site personnel should follow the spillage guidelines until the area has been cleaned adequately to allow resumption</p>		<p>Y</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>The subject should then insert the same swab into one nostril. The swab tip should be inserted up to 2.5 cm (1 inch) from the edge of the nostril. Roll the swab 5 times along the mucosa of the inside of the nostril to ensure that both mucus and cells are collected</p>	<p>Note: Where there are physical/medical issues or an individual has a very sensitive gag reflex that prohibits the throat swab from being completed successfully, double nasal swabbing can be undertaken. Under circumstances, where a nasal swab is not feasible (e.g. a student is prone to nasal bleeds), it is acceptable to swab only the back of the throat without nostrils</p>	<p>Y</p>	<input type="checkbox"/>	<input type="checkbox"/>

The subject will be required to place their swab directly into the prepared extraction tube on the bench at the window with the cotton bud end facing down	Note: The subject should not grasp the cotton bud end, which has been in contact with the tonsils and nostril	Y	<input type="checkbox"/>	<input type="checkbox"/>
The subject will complete hand hygiene using alcohol-based hand rub in the booth		Y	<input type="checkbox"/>	<input type="checkbox"/>
If the operational model includes the subject handling any equipment (e.g. hand mirror) they should disinfect the surfaces with antiviral wipes		Y	<input type="checkbox"/>	<input type="checkbox"/>
The subject will put back on their face covering and leave the site		Y	<input type="checkbox"/>	<input type="checkbox"/>
Inadequate Sample Processing and Analysis Procedure				
The Processing Operative prepares the area in advance of receiving the sample and barcode from the subject		Y	<input type="checkbox"/>	<input type="checkbox"/>
The Processing Operative only processes one sample at a time and watch not more than 5-6 samples at a time		Y	<input type="checkbox"/>	<input type="checkbox"/>
The Processing Operative will receive the barcode directly from the subject		Y	<input type="checkbox"/>	<input type="checkbox"/>
The Processing Operative will remove the LFD device from the pouch and apply the barcode to the underside of the LFD cartridge	LFD cartridges should be used as soon as possible after opening the pouches in which they are supplied.	Y	<input type="checkbox"/>	<input type="checkbox"/>
The Processing Operative sets up the extraction tube by following these steps: a) Place the extraction tube in the tube rack with the opening facing up (or use some alternatives like disposable cups as holders or hold the tube in hand) b) Press the extraction solution bottle to drip 6 drops of extraction solution into the extraction tube without touching the edge of the tube. c) If a rack or alternate is available, the extraction tube should be left in it on the processing bench next to the window for the subject to place the swab	Do not let the buffer bottle touch the edge of the tube. The extraction solution bottle should be decontaminated with antiviral using wipes between samples to prevent cross-contamination	Y	<input type="checkbox"/>	<input type="checkbox"/>

<p>The Subject will place the swab sample into the prepared extraction tube (as described in self-swab section above) located on the table at the window (to potentially prevent the swab from drying out)</p>		<p>Y</p>	<p><input type="checkbox"/></p>	<p><input type="checkbox"/></p>
<p>The Processing Operative then takes the swab and commences the following steps:</p> <p>a) Extract: Hold and press the swab head against the wall of the tube with force while rotating the swab for about 10 seconds to release the antigen into the extraction solution from the swab head</p> <p>b) Remove swab: Squeeze the swab head by squeezing the lower end of the tube while removing the swab in order to remove as much liquid as possible from the swab</p> <p>c) On withdrawal, immediately dispose of the swab into the general waste bin.</p> <p>d) Install a nozzle cap onto the extraction tube</p> <p>e) Load: drip 2 drops of the sample inside the extraction tube into the sample well of the LFD cartridge</p> <p>f) Record the time of the test in marker on the LFD and make sure you have set a timer to read the results at 30 minutes.</p> <p>g) Re-check that the liquid can be seen seeping through the cartridge (to ensure the drop was not an air bubble)</p> <p>h) If the cartridge appears dry, the subject will need to be recalled for a further sample to be taken.</p> <p>i) If needed, move the cartridge to a defined processing space for reading and leave for between 20-30 minutes as below.</p>	<p>The LFD movement should be kept to a minimum and where it is required to be moved, keep horizontal using a tray</p>	<p>Y</p>	<p><input type="checkbox"/></p>	<p><input type="checkbox"/></p>
<p>The sample preparation area and equipment are cleaned thoroughly with disinfectant (e.g. anti-viral wipe)</p>		<p>Y</p>	<p><input type="checkbox"/></p>	<p><input type="checkbox"/></p>
<p>Recording of Results</p>				

All LFD results must be logged on the government Log Results Website	Within the remit of the website working and accepting data flows.	Y	<input type="checkbox"/>	<input type="checkbox"/>
The LFD results are reported into the public health bodies in the UK as per the latest amendments to the Health Protection Regulations relating to notifiable diseases reporting		Y	<input type="checkbox"/>	<input type="checkbox"/>
Marked LFDs are placed into trays in batches and taken to the recording area		Y	<input type="checkbox"/>	<input type="checkbox"/>
The recorder will collect the tray, pick up the cartridge, only touching the side, and avoiding the sample well, reads the result and inputs the data		Y	<input type="checkbox"/>	<input type="checkbox"/>
The cartridge is disposed of in the general waste bin		Y	<input type="checkbox"/>	<input type="checkbox"/>
The keyboard is wiped and the wipe is disposed of in the general waste bin		Y	<input type="checkbox"/>	<input type="checkbox"/>
The tray is wiped and the wipe is disposed of in the general waste bin		Y	<input type="checkbox"/>	<input type="checkbox"/>
When done, gloves are removed and disposed of in the general waste		Y	<input type="checkbox"/>	<input type="checkbox"/>
Negative Results				
Subjects who return a negative test result do not need to self-isolate unless: a) They are symptomatic (they'll need to book a PCR test) b) someone they live with tests positive (or has symptoms and has not been tested yet) or c) they've been traced as a contact of someone who tested positive		Y	<input type="checkbox"/>	<input type="checkbox"/>
Invalid Results				
Subjects who return an invalid/could not read (where there is no control line) LFD result repeats the test		Y	<input type="checkbox"/>	<input type="checkbox"/>
If the second test also returns an invalid/could not read (where there is no control line) LFD result, report it on the Coronavirus Yellow Card Reporting Site	https://coronavirus-yellowcard.mhra.gov.uk/	Y	<input type="checkbox"/>	<input type="checkbox"/>

Positive Results				
In the event that a subject tests positive during on-site testing at school, the school follows the school's standard Covid response protocol for when a person becomes symptomatic on site		Y	<input type="checkbox"/>	<input type="checkbox"/>
The subject must self-isolate immediately for 10 days and everyone in their household must self-isolate in line with national policy		Y	<input type="checkbox"/>	<input type="checkbox"/>
School will identify close contacts of the case in the school setting (excluding household and social contacts outside of school) following a positive LFD case	Contacts should self-isolate from this point.	Y	<input type="checkbox"/>	<input type="checkbox"/>
In the event that a subject tests positive after undertaking a home LFD test, it means they are currently infected with coronavirus and risk infecting others. Positive test results are reported to the NHS and school immediately	When the subject reports their result, they will be provided with further information on the next steps to take (taking a confirmatory PCR test)	Y	<input type="checkbox"/>	<input type="checkbox"/>
Staff/students in these situations must not return to school		Y		
They must use the PCR kit provided or go to https://www.gov.uk/get-coronavirus-test to book/ order PCR test immediately after receiving a positive LFD result		Y	<input type="checkbox"/>	<input type="checkbox"/>
Until the subject gets further advice, they must self-isolate immediately for 10 days and everyone in their household must self-isolate in line with national policy	They should only leave home for their follow-up test, if needed	Y	<input type="checkbox"/>	<input type="checkbox"/>
School will identify close contacts of the case in the school setting (excluding household and social contacts outside of school) following a positive LFD case	Contacts should self-isolate from this point.	Y	<input type="checkbox"/>	<input type="checkbox"/>

<p>If the confirmatory PCR test is negative, the individual may stop self-isolating and their contacts do not need to self-isolate or be part of daily contact testing unless</p> <p>a) they are symptomatic (they'll need to book a PCR test),</p> <p>b) someone they live with tests positive (or has symptoms and has not been tested yet) or</p> <p>c) they've been traced as a contact or someone who tested positive</p>		Y	<input type="checkbox"/>	<input type="checkbox"/>
<p>If the confirmatory PCR test is negative, report it on the Coronavirus Yellow Card Reporting Site</p>	<p>https://coronavirus-yellowcard.mhra.gov.uk/</p>	Y	<input type="checkbox"/>	<input type="checkbox"/>
<p>Those who are found to be positive after a confirmatory PCR test, need to inform their school as soon as possible and continue self-isolating in line with the national guidance</p>		Y	<input type="checkbox"/>	<input type="checkbox"/>
<p>In the event that a subject tests positive it means they are currently infected with coronavirus and risk infecting others. Positive test results are reported to the NHS and school immediately</p>	<p>When the subject reports their result, they will be provided with further information on the next steps to take (taking a confirmatory PCR test)</p>	Y	<input type="checkbox"/>	<input type="checkbox"/>
Travel Advice for Positive Results				
<p>Where a child or young person is able to wear a face covering and keep a safe distance from others they could walk or cycle home where this is possible</p>		Y	<input type="checkbox"/>	<input type="checkbox"/>
<p>Those who have tested positive should not travel home using public transport</p>	<p>Exceptionally the local authority may be able to help source a suitable vehicle which would provide appropriate protection for the driver</p>	Y	<input type="checkbox"/>	<input type="checkbox"/>
<p>Asymptomatic contacts of positives cases should go home as they would normally do</p>	<p>If the contact becomes symptomatic, they should follow same travel advice as positive cases</p>	Y	<input type="checkbox"/>	<input type="checkbox"/>
Inadequate Infection Prevention and Control: Equipment				

All digital equipment is regularly wiped between batches of tests and at the beginning and end of each session		Y	<input type="checkbox"/>	<input type="checkbox"/>
Cleanable keyboard and mouse are used in testing areas	If a cover is used silicone option is preferable as it is more user friendly and will last longer than the plastic versions	Y	<input type="checkbox"/>	<input type="checkbox"/>
The cleaning wipe used should meet the requirement set out in the Inadequate Cleaning Regime section and be effective against enveloped viruses		Y	<input type="checkbox"/>	<input type="checkbox"/>
The keyboard and mouse should be cleaned at the start of the day, after each batch of cartridge have been reviewed and uploaded and at the end of the day (and if they become contaminated with any form of spillage)		Y	<input type="checkbox"/>	<input type="checkbox"/>
An equipment cleaning regime is in place and clearly communicated		Y	<input type="checkbox"/>	<input type="checkbox"/>
A replacement schedule is in place to replace damaged covers and the equipment should not be used if the cover is torn/worn		Y	<input type="checkbox"/>	<input type="checkbox"/>
Any trays that are used for e.g. to move LFDs for recording after reading and marking of results should be made from a material that will tolerate being cleaned with chlorine releasing agents at 1000ppm, are straight sides, and smooth		Y	<input type="checkbox"/>	<input type="checkbox"/>
Inadequate Cleaning Regime				
A cleaning schedule that ensures cleaning is generally enhanced and includes more frequent cleaning of surfaces that have been touch frequently	As a minimum frequently touched surfaces should be cleaned twice a day, and one of these should be at the beginning or the end of the working day	Y	<input type="checkbox"/>	<input type="checkbox"/>
Public areas where a symptomatic subject has passed through and spent minimal time, but which are not visibly contaminated with body fluids can be cleaned thoroughly as normal		Y	<input type="checkbox"/>	<input type="checkbox"/>

Cleaners should only be entering the testing area when testing activity is no longer being conducted	In accordance with NHS guidance 'Cleaning and Disinfection process COVID -19" there should be no subject contact within 2m	Y	<input type="checkbox"/>	<input type="checkbox"/>
In case of a spillage when they need to enter an active test area, cleaners should ensure that they have appropriate PPE		Y	<input type="checkbox"/>	<input type="checkbox"/>
When entering an active test area cleaners ensure that the listed PPE is worn	See below	Y	<input type="checkbox"/>	<input type="checkbox"/>
When entering an active test area to clean up spillages staff ensure they replace their PPE after cleaning		Y	<input type="checkbox"/>	<input type="checkbox"/>
Avoid mixing cleaning products together as this can create toxic fumes		Y	<input type="checkbox"/>	<input type="checkbox"/>
Avoid creating splashes and spray when cleaning		Y	<input type="checkbox"/>	<input type="checkbox"/>
Any cloths and mop heads used must be disposed of and should be put into the general waste		Y	<input type="checkbox"/>	<input type="checkbox"/>
The minimum specifications stipulated by the government for surface disinfectant wipes, is that the disinfectant is effective against envelop viruses		Y	<input type="checkbox"/>	<input type="checkbox"/>
It is recommended were possible that combined detergent and disinfectant wipes is used, as they will both clean and sanitise the surface at the same time		Y	<input type="checkbox"/>	<input type="checkbox"/>
If disinfectant wipes are used, it is important to note that they do not contain a detergent. If this method is used, it is important that the area is cleaned properly with a detergent, rinse before a disinfectant wipe is used		Y	<input type="checkbox"/>	<input type="checkbox"/>
Spillages				
All surfaces that the Subject has come into contact with must be cleaned and disinfected, including all potentially contaminated and frequently touched areas such as handles, light switches, telephones, and the surfaces that the subject may have had contact in between each individual that is tested		Y	<input type="checkbox"/>	<input type="checkbox"/>

Use disposable cloths or paper roll and disposable mop heads, to clean all hard surfaces, floors, chairs, door handles and sanitary fittings – think one site, one wipe, in one direction and place in the general waste bin		Y	<input type="checkbox"/>	<input type="checkbox"/>
Any cloth and mop heads used for cleaning must be disposed of and should be placed into the general waste bin		Y	<input type="checkbox"/>	<input type="checkbox"/>
Surfaces will require to be cleaned at the end of the session before the next session starts i.e. in between test group batches of Subjects		Y	<input type="checkbox"/>	<input type="checkbox"/>
D10 is used to disinfect the area		Y	<input type="checkbox"/>	<input type="checkbox"/>
Inadequate Waste Management				
The waste contractor is required to extend their current collection of general waste from the school. As part of this, the waste collector may be asked by a school to: · Provide extra wheelie bins for waste storage · Provide extra bin bags, as required · Collect waste regularly (frequency to be agreed with individual school)	These have been ordered and there is a contractor in place to remove the clinical water whilst the testing continues.	Y	<input type="checkbox"/>	<input type="checkbox"/>
The bags should be placed into a larger bin ready for collection by their waste contractor		Y	<input type="checkbox"/>	<input type="checkbox"/>
Have you consulted with the people/representatives undertaking the activity as part of the preparation of this risk assessment				
Yes, through the setting up of the area and through ongoing training and QA purposes.		Yes Y	<input type="checkbox"/>	
What is the level of risk for this activity/situation with existing control measures		<input type="checkbox"/>	Med Y	Low <input type="checkbox"/>
Is the risk adequately controlled with existing control measures		Yes Y	<input type="checkbox"/>	
Have you identified any further control measures needed to control the risk and recorded them in the action plan		Yes <input type="checkbox"/>	<input type="checkbox"/>	
ACTION PLAN (insert additional rows if required)	To be actioned by			
Further control measures to reduce risks <i>so far as is reasonably practicable</i>	Name	Date		
Ongoing review of the area and amendments were guidance changes.				

State overall risk level assigned to the task AFTER implementation of control and action plan measures taken as a result of this risk assessment	<input checked="" type="checkbox"/> High	<input type="checkbox"/> Med	<input checked="" type="checkbox"/> Low
Is such a risk level deemed to be as low as reasonably practicable?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Is activity still acceptable with this level of risk?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
If no, has this escalated to the senior leadership team? NA	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Assessor(s):	Chay Bell	Signature(s):	Chay Bell
Position(s):	Academy Principal		
Date:	3.3.21	Review Date:	3.3.21

Distribution:

<input type="checkbox"/>	
HIGH	Urgently review/add controls & monitor, notify H&S Team (if Likely or Highly Likely – stop work, seek competent advice)
MEDIUM	Review/add controls (as far as reasonably practicable) & monitor
LOW	Monitor control measures

POTENTIAL OUTCOME

Catastrophic	Fatal injury/permanent disability
Major	RIDDOR reportable Specified Injury/ Disease/Dangerous Occurrence
Moderate	RIDDOR reportable over 7 day injury
Minor	Minor injury (requiring first aid)
Insignificant	Minor injury

LIKELIHOOD

Highly likely	More likely to occur
Likely	
Possible	
Unlikely	
Remote	

POTENTIAL OUTCOME

Catastrophic					
Major					
Moderate					
Minor					
Insignificant					
	Remote	Unlikely	Possible	Likely	Highly Likely

LIKELIHOOD