

Infection Control Risk Assessment

Risk Assessment carried out by – Karen Telfer	Job title – Headteacher	Date of assessment – May 2022
Review interval – Annually	Date reviews carried out -	

<p>People covered by this assessment – School staff, supply staff, pupils, and visitors</p>	<p>Activities undertaken: Risk of exposure can include</p> <ul style="list-style-type: none"> Infectious diseases / virus including COVID 19. Exposure from bodily fluids including blood when administering first aid, personal care, cleaning spillages. Dealing with challenging pupil behaviour such as scratching, biting, and spitting. Dealing with sharps where they are used to administer medications, or discarded sharps found on school site.
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RISK RATING		Likelihood		
		Probable Occurs repeatedly, to be expected or could affect large number of people	Possible Could occur sometime or effect a few people	Remote Unlikely to occur or not many people to be affected
Impact	Major Major injury, permanent disability, or ill-health	High	High	Medium
	Severe Injury requiring medical treatment	High	Medium	Low
	Minor First aid treatment	Medium	Low	Low

Hazards / issue	Risk Rating H/M/L Before	Recommended controls (circle or ✕ / ✓ if in place)	Further Action needed to reduce risk in addition to controls ticked / any comments	By Whom & When	Risk Rating H/M/L After
Hand Hygiene	H	<ul style="list-style-type: none"> There is a good provision of hand washing and sanitising facilities available in school. All staff and pupils to follow good hand hygiene practices when: <ul style="list-style-type: none"> - Entering and leaving building - At break times - Carrying out any procedure with pupils such as toileting / feeding. 		All staff	L

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		<ul style="list-style-type: none"> - Assisting in providing medication. - Eating or drinking - After coughing or sneezing 			
Frequent cleaning of high contact surfaces	M	<ul style="list-style-type: none"> • Good cleaning regimes in place for high contact areas / items including: <ul style="list-style-type: none"> - Desks - Toilet areas - Door Handles - Handrails - Dining tables - EYFS areas including toys - Staff room surfaces and appliances • Local cleaning supplies such as wipes are available to staff in classroom and office areas. • Staff wipe clean any shared work equipment such as desks, computers, and photocopiers after use. 	<ul style="list-style-type: none"> • When cleaning an area where a member of staff or pupil with COVID 19 symptoms has been present refer to controls for 'Cleaning procedures for blood and body Fluid' for use of PPE and use an effective disinfectant against the virus such as Duo Max to clean area. 	SM & cleaners	L
Cleaning procedures for blood and body Fluid	H	<ul style="list-style-type: none"> • School has a Schools Spillages Policy & Protocols (Including body fluids spillage policy) in place. • Staff aware of the effective cleaning procedures for cleaning up blood/bodily fluids <ul style="list-style-type: none"> - Wear Personal Protective Equipment - Sprinkle Response Super Absorbent Biohazard Powder/Dusmo Medico Sawdust on affected areas. After 90 seconds the blood/bodily fluids would have solidified and can be swept into a suitable container for removal via double bagging in a black bin liner and removed to an external bin. - Disinfect the area using the Duo Max general purpose cleaner - Carpets or upholstered furniture to be cleaned with Good Sense Breakdown a Biological based odour neutraliser - Once the contamination is removed the area/room can be cleaned with neutral detergent, warm water and dried. - Dry mop floor areas. If unable to dry fully prevent 		SM,ER & KT	L

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		<p>access to area e.g., lock the room</p> <ul style="list-style-type: none"> - Wash and dry hands thoroughly - Change any clothing contaminated with blood/bodily fluids immediately and wash clothing at hottest temperature for the fabric - Dispose of all contaminated towels, personal protective equipment etc., as clinical waste if not available double bag and place in external bin. - 			
Personal Protective Equipment	M	<ul style="list-style-type: none"> • PPE is available for all staff who work in areas of possible infection this includes disposable gloves, aprons, and face masks where appropriate. • Staff aware of how and when to change PPE, i.e., when contaminated. • Staff aware of how to dispose of contaminated PPE as Clinical waste or double bagged. 		SM & KT	L
Respiratory Hygiene Measures	M	<ul style="list-style-type: none"> • School promotes good respiratory hygiene, ensuring if staff / pupils cough or sneeze they cover their mouth / nose. • School to ensure classroom and office areas have supply of tissues for staff and pupils to use, and waste bins are available. • 		ER	L
Ventilation Measures	M	<ul style="list-style-type: none"> • School provides natural ventilation via open windows, and doors where appropriate. During colder months windows to be opened just enough to provide constant ventilation or fully opened in areas such as classrooms during breaks/ lunchtimes when area is unoccupied to allow fresh air to circulate. • CO2 levels can continue to be monitored within school. 		KT & all staff	L
Control / Disposal of Sharps	H	<ul style="list-style-type: none"> • Secure facilities available for staff to store medication that may contain needles and syringes. • Sharps disposal bins / kits are available on school site where sharps are likely to be present. • Where Sharps kits are used caretaker / cleaners instructed on use. 		KT	L

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		<ul style="list-style-type: none"> Where Sharps bins are present a waste contract is in place for their removal from site Staff and pupils aware to notify Head Teacher / Premises Manager immediately should they lose/misplace medication that may contain needles/syringes. 			
Incident of Significant Exposure	H	<ul style="list-style-type: none"> Staff in school aware of what a significant exposure is which can include the following: <ul style="list-style-type: none"> - Exposure in which the skin is penetrated or cut by an object which is contaminated with blood or body fluid - Exposure to blood or saliva – contamination of broken skin, conjunctiva, or mucous membrane - And from which transmission of HIV, Hepatitis B or C may result e.g., the source patient is known to be positive for HIV or blood borne virus Staff aware of actions to take in event of accidental contamination including needlestick injuries. Information detailed in Appendix 1 at end of document. All incidents to be reported to the Health and Safety Team using the online accident form. 	<ul style="list-style-type: none"> Where pupils demonstrate biting/scratching or spitting behaviours ensure this risk is documented in their behaviour management plan / care plan etc and all staff working with a pupil are aware of this. 	KT	L
Immunisations	H	<ul style="list-style-type: none"> Where staff are exposed to a high risk of infection for example when frequently working with pupils presenting biting / spitting behaviours routine immunisation such as Hep B to be considered. Any decision for routine vaccination to be approved by Head Teacher and School Occupational Healthy provider. Staff encouraged to have the COVID 19 vaccination and subsequent boosters. 		KT	L
Exclusion of staff / Pupils	H	<ul style="list-style-type: none"> Staff aware of the need to stay off school if suffering from infectious diseases e.g., influenza, jaundice, etc. For Respiratory infections including Covid 19 follow UK Health Security Agency Guidance, (see Appendix 2 at end of document) Staff, parents, and carers aware of what to do in the 	Information of recommended exclusion periods for staff and pupils: Extranet	KT	L

Hazards / issue	Risk Rating H/M/L Before	Recommended controls (circle or ✕ / ✓ if in place)	Further Action needed to reduce risk in addition to controls ticked / any comments	By Whom & When	Risk Rating H/M/L After
		event of contracting an infectious disease i.e., - Inform their line manager /school immediately - Seek advice from their GP - Not to return to school until free from diarrhoea for at least 48 hours (for those who handle food)			

Date of Assessment Review	Signature

First Aid Guidance in the Event of Accidental Contamination

Bites, Scratches & Sharps Injuries

Encourage bleeding immediately by squeezing the site of injury and wash with soap and running water. Do not suck the wound

Cover with a waterproof adhesive dressing as necessary.

Blood or Body Fluid Splashes

Broken skin: Wash thoroughly with soap under running water.

 Cover with a waterproof adhesive dressing as necessary

Eyes: Wash the eye out thoroughly with tap water or eyewash bottle

Mouth: Do not swallow. Wash the mouth out thoroughly with tap/bottled water and do not swallow the water.

All Incidents

Report the incident to your supervisor. All incidents must be recorded on the Accident / Incident / Ill Health online report form and copy forwarded to the Health & Safety team.

Make sure further advice is obtained immediately from: Occupational Health Service or your nearest A&E / Minor Injuries Unit if the Occupational Health Service is closed or unavailable.

If you have attended A&E and the OHS is not aware of this, please inform them at the earliest opportunity.

All employees who sustain a needle-stick injury (from a needle contaminated with human blood/body fluids or other potentially infective biological material) must be followed up to ensure appropriate prophylaxis, counseling, and a proper prevention strategy.

Covid 19 Exclusion of staff / pupils –UK Health Security Agency Guidance.

Appendix 2

<https://www.gov.uk/guidance/people-with-symptoms-of-a-respiratory-infection-including-covid-19>

If **staff** have symptoms of a respiratory infection, such as COVID-19, and have a high temperature or do not feel well enough to go to work or carry out normal activities, they are advised to try to stay at home and avoid contact with other people until they no longer have a high temperature (if they had one) or until you no longer feel unwell.

Children and **young people** with mild symptoms such as a runny nose, sore throat, or slight cough, who are otherwise well, can continue to attend their education setting. Children and young people who are unwell and have a high temperature should stay at home and avoid contact with other people, where they can. They can go back to school and resume normal activities when they no longer have a high temperature, and they are well enough to attend.

Testing Positive for COVID 19:

If **staff** have a positive COVID-19 test result, they should stay at home and avoid contact with other people for 5 days after the day they took their test. Try to arrange work from home where possible if staff feel well enough. At the end of this period, if staff have a high temperature or feel unwell, they should follow this advice until they feel well enough to resume work / normal activities and no longer have a high temperature if they had one.

If a **child** or **young person** has a positive COVID-19 test result they should try to stay at home and avoid contact with other people for 3 days after the day they took the test, if they can. After 3 days, if they feel well and do not have a high temperature, the risk of passing the infection on to others is much lower. This is because children and young people tend to be infectious to other people for less time than adults.

Close contacts:

If **staff** are in a household or had overnight contact of someone who has had a positive COVID -19 test result it can take up to 10 days for your infection to develop. It is possible to pass on COVID-19 to others, even if there are no symptoms. Advice is to reduce this risk to other people by taking the following steps:

- avoid contact with anyone you know who is at higher risk of becoming severely unwell if they are infected with COVID-19, especially those whose immune system means they are at higher risk of serious illness from COVID-19, despite vaccination
- limit close contact with other people outside your household, especially in crowded, enclosed or poorly ventilated spaces
- wear a well-fitting face covering made with multiple layers or a surgical face mask if you do need to have close contact with other people, or you are in a crowded place
- wash your hands frequently with soap and water or use hand sanitiser.

If you are a contact of someone with COVID-19 but do not live with them or did not stay in their household overnight, you are at lower risk of becoming infected.

Children and young people who usually go to school, college or childcare and who live with someone who has a positive COVID-19 test result should continue to attend as normal.

Higher risk people (for people whose immune system means they are at higher risk of serious illness if they become infected with COVID-19) such as immunosuppression:

- Where staff / pupils are identified at higher risk measures should be put in place to help them avoid contact with someone who has tested positive for COVID-19 (and anyone in their household) until 10 days after they received a positive test.

Link to COVID 19 Cue Card Information: [Extranet](#)

Manual	Form	Version	Date of issue	Date of next review	Page
School	RA – Infection Control	1	April 2022	Aug. 2025	7 of 7