# 

**Overarching Covid-19 Risk Assessment**

**& Outbreak Management Plan**

**2022-2023**

Although national restrictions have now been stepped down in education settings, the virus is still circulating and so it is prudent that we maintain the ability to respond should national or local health authorities decide to reactivate controls to limit the spread of Covid-19 or a similar outbreak.

Therefore this risk assessment and outbreak management is dormant until reactivated.

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| **Provider/Team** |  | |
| **Venue(s)** |  | |
| **Hazard** | Coronavirus (COVID-19) | |
| **Persons who can be harmed** | Learners/customers  Employees  Visitors | *Clinically extremely vulnerable* people – those who have previously received a letter from the NHS advising them to ‘shield’  *Clinically vulnerable* people – those who are either pregnant or who have underlying health conditions |
| **How people can be harmed** | Inhalation of water droplets from people who have COVID-19. The droplets can be dispersed by coughing or sneezing. They are also released during breathing, so the droplets can be inhaled by others standing in close proximity. The water droplets can also land on surfaces and be subsequently transferred by touching these infected surfaces then touching the mouth, nose or eyes | |
| **Level of risk** | The risk of contracting the virus is variable according to the following factors:   * The prevalence of the virus in the community * The level of vaccination in the area * The interaction of people with others ie the *number* of people an individual encounters and the *proximity* of such contact * The likelihood of touching contaminated surfaces and transferring the virus to the mouth/nose/eyes   The severity of harm from the virus will depend on the following factors:   * If the individual is fully vaccinated (but even if a person is fully vaccinated, they can still contract Covid-19) * If the individual is clinically extremely vulnerable or clinically vulnerable * If the individual is pregnant * The age of the individual | |
| **Control Measures** | Control measures are those systems and physical controls which will reduce the risk of contracting the virus. The most effective control measure is to work from home. Where this is not possible, maintain a ‘social distance’ of at least 2m from any other person which will reduce the risk of inhaling water droplets. Individuals should avoid confined spaces (e.g. lifts, small interview rooms etc) where possible.  Limiting the *number or people* an individual encounters will reduce the risk of transmission of the virus (called ‘fixed teams’ or ‘partnering’).  Reducing the amount of *time* that individuals are in contact with others will also reduce the risk.  The layout of workplaces to prevent staff facing each other will reduce the risk of inhalation of droplets. The use of Perspex screens will reduce the risk of droplets being transferred from one person to another where staff are in close proximity  Limiting contact with common areas (i.e. meeting rooms, kitchens, hot-desks) will reduce the risk of touching contaminated surfaces  Regular hand-washing with soap and water is an effective way of removing the virus from the hands. Regular cleaning of surfaces, handles, handrails etc will reduce the risk of the virus surviving on surfaces.  DIY cleaning (i.e. staff cleaning their own work-stations) will reduce the risk of touching contaminated surfaces | |

**General Considerations to reduce the likelihood of Covid-19 infection:**

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| **Face to Face Learning/Support** | **Comments** |
| Maintain good ventilation and air circulation as a key priority to control virus spread. |  |
| Whilst the prescribed social distancing requirements are not required, layout desks/seating/activities to maximise distance between people and minimise physical contact as much as possible. |  |
| Staff/customers who are *clinically vulnerable* will need specific risk assessments and additional control measures in place. |  |
| Encourage the wearing of face coverings aligned to national and local guidance including within classroom settings as required. |  |
| Staff and learners/customers to have access to handwashing facilities and sanitiser. |  |
| Promote course of action within settings on what to do if feeling unwell with symptoms of Covid. |  |
| Guidance on asymptomatic testing for staff aligned with current guidelines. |  |
| Staff have access to detailed information including Covid 19 arrangements from your organisational Health and Safety Policy |  |
| DIY cleaning materials (wipes etc) available |  |
| Geographical locations for any activity visits are checked for infection rates |  |
| Absence policy – following up on learners/customers who are absent |  |
| Learner/Customer Agreements on how they are going to protect themselves and each other |  |
| Signs:   * Not attending if feeling unwell * What to do if feeling unwell whilst on site * Location of handwashing/sanitising facilities * Catch it, bin it, kill it |  |
| Other control measures taken: |  |