

# Calthwaite C of E Primary School

## Risk Assessment



<b>Activity:</b>	<b>Managing serious infections</b>	<b>Assessment carried out by:</b>	Lissie Stevens
<b>Date assessment carried out:</b>	14/11/2024	<b>Date for next review:</b>	14/11/2026
		<b>Doc. ref. no. (if any):</b>	

**Individuals at Risk:** Anyone can contract a viral, bacterial, fungal, or parasitic infection (a micro-organism called a pathogen) so all employees, pupils, visitors, contractors, members of the public, the people they live with, and their other close contacts are at risk of becoming ill. However, some people are at more risk than others because they are more likely to be exposed to infection because they are, or work with people who are unable to practice good hygiene or because they have a risk factor (comorbidity) that makes it more likely they will die or become very ill if they become infected. This includes vulnerable children and adults, and anyone with a comorbidity which could include being older, from an ethnic minority background (who are often disproportionately low income, work while ill and live and work in more crowded places), young or inexperienced workers who may forget or not follow rules, new or expectant mothers who may become more ill or pass on a more serious infection to their breastfed child or unborn baby, anyone experiencing ill-health or who has underlying health conditions or a weak immune system mean they are at higher risk. People who work in close proximity to others, especially providing first aid, health, intimate, or other personal care that can involve contact with body fluids are also at higher risk of exposure.

**The risks:** Infections are caused by pathogens such as bacteria, viruses, fungi, and parasites, otherwise known as germs. Most infections lead to a mild or moderate illness, but some can cause death, critical illness, and other serious and potentially long-term health complications (see [Managing specific infectious diseases: A to Z \(GOV.UK\)](#) or [Health A to Z - NHS \(www.nhs.uk\)](#) for details). Infections are transmitted by direct contact (with the infected area of another person's body or a contaminated surface) or in the air (saliva droplets dispersed into the air through talking, coughing, sneezing, and the performance of some healthcare tasks). Droplets are breathed in, or people touch their face, especially mouth, nose, and eyes after touching contaminated surfaces. Sharing clothing, towels, sleeping bags etc. can also spread parasitic and fungal infections. Infection may lead to staff and pupil absences leading to lost educational opportunities, anxiety and other wellbeing issues amongst staff, pupils, and parents or carers. At times of public health emergency or such widespread infection that it causes partial or full site closure, risks may arise from a lack of building/equipment maintenance. The ability to effectively meet children's safeguarding, SEND and medical needs and to implement fire and other emergency procedures may also be compromised due to reduced staff numbers.

What are the hazards	What are we already doing to control the risks?	What else do we need to do or explain to control the risks?	Action by whom	Action by when	Date done
<p>An individual receives a health professional's diagnosis of or positive diagnostic test for, or develops symptoms of a viral, bacterial, fungal or parasitic infection that they can spread to others, and which might have significant risks to them or people they come into contact with who are vulnerable. They should not be at school or work and staff may miss</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Employees who are infectious must follow relevant HR policies and also stay at home if they are too unwell to work, or for at least as long as the exclusion period if one is given in <a href="#">Managing specific infectious diseases: A to Z - GOV.UK (www.gov.uk)</a>.</li> <li><input type="checkbox"/> Volunteers who are infectious must follow the same procedures as staff for letting us know and staying at home if too unwell to volunteer, or for the exclusion period if given as above.</li> <li><input type="checkbox"/> When children are infectious, parents/carers must follow the Attendance Policy and also keep children at home if they are too unwell to learn, or for at least as long as the exclusion period as above.</li> <li><input type="checkbox"/> Display <a href="#">posters</a> to inform parents/carers and to assist staff in correctly excluding pupils e.g., <a href="#">KAHSC Infection Control in Schools and Other Settings Poster</a>.</li> <li><input type="checkbox"/> Encourage frequent visitors like parents and carers or other close contacts of staff and children to increase hygiene routines and stay home if they can when they are infectious</li> <li><input type="checkbox"/> Train staff in recognising the symptoms of the most common infections that require exclusion from school or work, and what to do if they have concerns.</li> <li><input type="checkbox"/> Have procedures to ensure potentially infectious people are isolated away from others with access to a toilet and handwashing facilities and sent home as soon as possible.</li> <li><input type="checkbox"/> Have health, safety and wellbeing on the agenda of all relevant staff meetings to prompt discussion that might include current issues in infection control.</li> </ul>				

<p>vital deadlines and pupils may miss vital education and their basic needs may not be met</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Report outbreaks or incidents when there are either several cases, or indications of more serious disease to the relevant <a href="#">UKHSA regions, local centres and emergency contacts</a> and email details to <a href="mailto:EducationIPC@cumbria.gov.uk">EducationIPC@cumbria.gov.uk</a>].</li> <li><input type="checkbox"/> Consider if and how to raise community awareness in a language &amp; disability accessible way during incidents or outbreaks of infection in line with UKHSA advice.</li> <li><input type="checkbox"/> Provide access to remote education as soon as reasonably practicable, in proportion to the length of absences and disruption to learning (in line with non-statutory <a href="#">Providing remote education: guidance for schools</a>, <a href="#">Safeguarding and remote education</a>, and <a href="#">Working together to improve school attendance</a> and where possible.</li> <li><input type="checkbox"/> Make suitable work from home arrangements for staff if possible and provide necessary equipment and guidance to ensure safe &amp; effective work e.g., <a href="#">ACAS Home Working Guide</a>, <a href="#">ACAS Example checklist for setting up homeworking</a> and <a href="#">Home working - HSE</a>.</li> <li><input type="checkbox"/> Emergency plans with clearly identified activation thresholds address maintaining: <ul style="list-style-type: none"> <li>- premises safety (monitoring and maintenance),</li> <li>- maintaining education (exams, assessment, admissions testing, attendance etc.),</li> <li>- safeguarding (in line with <a href="#">Keeping children safe in education</a> and <a href="#">Promoting the health and wellbeing of looked-after children</a> e.g., DSL role etc.),</li> <li>- SEND (e.g., key support staff, external support etc.),</li> <li>- essential welfare (free school meals in line with <a href="#">allergy guidance for schools</a>)</li> <li>- Wellbeing (<a href="#">MindEd Hub</a>, <a href="#">Education Support</a> for staff etc.)</li> <li>- and other support arrangements.</li> </ul> </li> </ul>				
<p>Increased transmission of infections due to low take-up of a vaccination programme</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Engage the school community in current vaccination programmes and ensure all eligible groups are enabled and supported to take up the offers.</li> <li><input type="checkbox"/> Signpost children and young people to age-appropriate information about vaccinations e.g., <a href="#">A guide to immunisation for young people - GOV.UK (www.gov.uk)</a>.</li> <li><input type="checkbox"/> Share only trusted sources of information about infection control and vaccinations, check authenticity if in doubt, and never engage directly with misinformation.</li> <li><input type="checkbox"/> Notify communications to us campaigning using vaccine misinformation to <a href="#">Regional DfE Director - GOV.UK (www.gov.uk)</a> and follow World health Organisation (WHO) guidance on <a href="#">How to report misinformation online (who.int)</a>.</li> <li><input type="checkbox"/> Report threatening or otherwise concerning communications with us about vaccines or any issue to the police and any other relevant authorities.</li> <li><input type="checkbox"/> Review security risk assessments and arrangements in light of threats or concerns, making adjustments if necessary.</li> </ul>				
<p>Staff &amp; pupils clinically vulnerable to an infection i.e., have comorbidities that make infections more serious e.g., a disability, acute or chronic condition like asthma, a weak immune system or</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Regularly remind staff, pupils and parents/carers to confidentially disclose when they or someone they have a responsibility for might be at higher risk of infection so they can be best protected.</li> <li><input type="checkbox"/> When individuals are identified as being at higher risk, take extra steps to encourage vaccination if appropriate and to encourage good respiratory and personal hygiene, providing adequate cleaning supplies and resources to support it.</li> <li><input type="checkbox"/> Conduct a personal risk assessment for new &amp; expectant mothers in line with the Management of Health &amp; Safety at Work Regulations 1999 (MHSWR) and <a href="#">Protecting pregnant workers and new mothers - HSE</a> including any risks identified then, later during pregnancy, in the first 6 months after birth, or while the employee is breastfeeding, so they can be managed under our general workplace risk assessments.</li> </ul>				

<p>being a new &amp; expectant mother exposed to viral (rubella, chicken pox etc.), bacterial (Strep A, meningitis etc.), parasitic (toxoplasmosis from cat faeces or lambing), or fungal infections (aspergillosis from mould etc.), at school/on trips.</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Pregnant women of any gestation will not be required to continue working if this is not supported by the risk assessment.</li> <li><input type="checkbox"/> Conduct a personal risk assessment for other staff at high risk of serious illness due to a weak immune system or other specific medical conditions.</li> <li><input type="checkbox"/> Consider the risks of infection outbreaks on pupils at particular risk in Education, Health and Care Plans (EHCPs) and any individual health care plans (IHCP) including any thresholds at which different control measures might routinely be used.</li> <li><input type="checkbox"/> Adjust learning or work schedules, places, groupings, and make other <a href="http://www.gov.uk">Reasonable adjustments for workers with disabilities or health conditions - GOV.UK (www.gov.uk)</a> where the law applies to reduce risks further.</li> <li><input type="checkbox"/> Provide remote learning or WFH where possible when the risks are unacceptably high.</li> <li><input type="checkbox"/> Seek all relevant health, employment, education, and other advice if remote learning or WFH is impossible.</li> </ul>				
<p>Inadequate hand and respiratory hygiene and cleaning leading to spread of infection and increased risks, especially to vulnerable people.</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Make hand cleansing and drying facilities available in the priority order: <ol style="list-style-type: none"> <li>1. Liquid soap (never shared bars), running warm water, &amp; paper towels (most effective)</li> <li>2. Liquid soap, running cold water, &amp; hand dryers/paper towels (never shared towels);</li> <li>3. Running water alone;</li> <li>4. Moist wipes;</li> <li>5. Hand rubs or gels i.e., alcohol-based sanitiser (least effective).</li> </ol> </li> <li><input type="checkbox"/> Educate staff, pupils and others that hand hygiene is one of the most important ways of controlling the spread of infections, especially those that cause diarrhoea and/or vomiting and respiratory infections. Refer staff to <a href="#">Health protection in children and young people settings, including education</a>.</li> <li><input type="checkbox"/> Have frequent and thorough handwashing routines built into school culture at regular intervals using the <a href="#">recommended technique</a> (especially after breaks and toileting, and before and after eating or administering first aid, medicines or intimate/personal care).</li> <li><input type="checkbox"/> Promote 'catch it, bin it, kill it' regularly and display posters when and where relevant (see <a href="#">Teachers (e-bug.eu)</a> for resources to use).</li> <li><input type="checkbox"/> Clean regularly, using standard cleaning products and equipment suitable to each task.</li> <li><input type="checkbox"/> Increase the cleaning regime for all frequently touched objects during outbreaks if advised to by our UKHSA HPT team or LA Public Health team.</li> <li><input type="checkbox"/> Use equipment that can be disinfected or disposed of after use in high-risk areas or doing a high-risk task e.g., cleaning up vomit in a suspected case of Norovirus</li> <li><input type="checkbox"/> Takes steps to ensure staff at high-risk can avoid the highest risk hygiene tasks or have the necessary personal protective equipment (PPE) to make risks tolerable e.g., gloves and if splashes is a significant risk, an apron, goggles, &amp; water-resistant facemask.</li> <li><input type="checkbox"/> Restrict access to areas thought to be contaminated with a pathogen that can cause serious illness if they cannot be cleaned immediately, clean such areas thoroughly, and dispose of any waste appropriately e.g., sometimes double bagged.</li> </ul>				
<p>Alcohol-based sanitisers are ineffectual on dirty hands &amp; some infections, over-</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Routinely provide alcohol-based hand sanitiser in some locations if conditions suggest it might help reduce current infection risks and review as necessary.</li> <li><input type="checkbox"/> Keep hand sanitiser stations and stocks clear of potential sources of heat and ignition (such as electrical or heating equipment).</li> <li><input type="checkbox"/> Clean spillages immediately and disposed of any highly flammable waste carefully.</li> </ul>				

<p>reliance can lead to poor hygiene. Flammable until alcohol evaporates so risk of fire &amp; spread from high/ poorly stored stocks, poorly sited stations, poor monitoring, misuse.</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Keep stocks away from sources of heat and ignition, in a metal cabinet when possible and apply signage warning of the presence of flammable liquids.</li> <li><input type="checkbox"/> Mark the location of stocks and the quantity held on a buildings plan to make fire fighters aware of the hazard (and also included in our existing Emergency Plan).</li> <li><input type="checkbox"/> Never use alcohol-based hand gels in science labs, D&amp;T &amp; food workshops/ lessons and other time when exposure to heat, sparks or a naked flame is likely.</li> <li><input type="checkbox"/> Staff must not make their own sanitisers and should use skin-friendly non-alcohol-based wipes that claim to kill 99.99% of bacteria and viruses if soap and water is not available.</li> <li><input type="checkbox"/> Enforce the Behaviour policy regarding misuse of hand-sanitiser or being found with lighters or similar prohibited items.</li> </ul>				
<p>Inadequate ventilation leading to high levels of CO<sup>2</sup> affecting alertness, work and learning and spread of infection</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Ensure buildings are well ventilated to maintain a comfortable learning and work environment in line with HSE <a href="#">guidance on how to assess and improve ventilation</a> and <a href="#">Chartered Institution of Building Services Engineers (CIBSE)</a>, where possible, identify poorly ventilated spaces, and take steps to improve fresh air flow.</li> <li><input type="checkbox"/> Listen to concerns raised about indoor air quality, arrange testing if appropriate, and address issues identified if possible.</li> <li><input type="checkbox"/> Have an overview of infection control through understanding pupil and staff absences to identify trends in accommodation risks or poorer practice or both.</li> </ul> <p>During outbreaks when we exceed our thresholds for concern it may become necessary to:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Open external doors and windows and internal doors (firmly so they cannot shut suddenly on anyone) to assist airflow, if necessary and safe and secure to do so.</li> <li><input type="checkbox"/> Keep fire doors closed at all times when not in use to prevent the spread of a fire <b>unless</b> the risk associated with not increasing ventilation to reduce infection spread are higher.</li> <li><input type="checkbox"/> Keep fire doors open <b>if CO<sub>2</sub> readings are high but ONLY when rooms are occupied.</b></li> <li><input type="checkbox"/> <b>Keep fire doors of all unoccupied rooms (or that lead to protected stairwells or escape routes) CLOSED at all times.</b></li> <li><input type="checkbox"/> Ensure extra time needed to close doors and windows when the fire alarm activates is considered in the General Emergency Evacuation Plan (GEEP) and that staff understand they must shut them unless the risk to themselves or others is too high.</li> <li><input type="checkbox"/> Use <b>mechanical ventilation</b> set to fresh air intake not recirculating air modes; turn it on at nominal speed at least 2 hours before, and at lower speed 2 hours after people use work areas; keep it on at lower speeds at nights &amp; weekends normal speeds 24/7 in toilets (and shut doors); and ensure systems/ducts/heat recovery equipment are inspected, maintained, filters replaced, defects addressed, and regularly cleaned in line with manufacturers' instructions.</li> <li><input type="checkbox"/> Use <b>recirculating air systems</b> supplying individual rooms and switch them to 100% fresh air if possible but turn off centralised systems that circulate air through multiple rooms and use a fresh supply instead (open a window or door).</li> <li><input type="checkbox"/> Keep <b>recirculation units</b> for heating and cooling that do not draw in a supply of fresh air in operation if there is a supply of outdoor air e.g., external windows &amp; doors open.</li> <li><input type="checkbox"/> Stop the use of desk, ceiling etc. <b>fans</b> in small, enclosed shared spaces with minimal outside air exchange and control their use in single occupancy or well-ventilated areas.</li> <li><input type="checkbox"/> Brief staff to balance ventilation with maintaining a comfortable temperature by: <ul style="list-style-type: none"> <li>- opening high level windows in preference to low level to reduce draughts;</li> </ul> </li> </ul>				

	<ul style="list-style-type: none"> <li>- increasing ventilation while spaces are unoccupied (before and between classes, during breaks, &amp; when unused considering risks of theft and damage);</li> <li>- opening windows for 10-15 mins every hour or leaving windows open (approx. 3cm);</li> <li>- allowing additional, suitable indoor clothing;</li> <li>- rearranging furniture to avoid direct drafts;</li> <li>- increasing heating settings only in approved ways to counter the cold;</li> <li>- Avoiding use of portable heaters if possible but ensuring they follow the controls measures for them in our Fire Risk Assessment if they do.</li> </ul>				
Inadequate personal protection & PPE and spread of infection, through contact with respiratory aerosols, and body fluid splashes entering through broken skin or through the eyes, nose, or mouth	<ul style="list-style-type: none"> <li><input type="checkbox"/> Identify situations where suitable PPE is required e.g., cleaning body fluids, carrying out first aid, personal or medical care incl. Aerosol Generating Procedures (AGP), and close or intimate care of someone who is infectious</li> <li><input type="checkbox"/> Provide enough suitable PPE for identified situations and risks e.g., gloves, splash and respiratory protection if necessary (aprons, goggles, water-resistant medical facemask)</li> <li><input type="checkbox"/> Train staff when to use PPE, how to don and doff it correctly and to follow the <a href="#">NHS National infection prevention and control manual</a></li> <li><input type="checkbox"/> When AGPs are routine, register on the DHSC managed <a href="#">PPE portal</a> and ensure staff carrying them out understand the risks of the release of airborne particles (aerosols) from the respiratory tract during the procedure and wear suitable additional airborne <a href="#">personal protective equipment (PPE)</a> (incl. an FFP3 respirator or equivalent)</li> <li><input type="checkbox"/> At times of outbreak and/or if recommended to by our regional UKHSA or local public health protection team (HPT), use face coverings routinely (except children aged 3 and under).</li> </ul>				

Other Details, Reviews, or Additional Action Required	Date Action Completed	Date RA Reviewed	Significant Changes Y/N	Shared with Staff Date or N/A
<p>The purpose of this risk assessment is to identify significant hazards associated with Covid-19, flu or other serious respiratory infections, who they might harm and how, and the measures that can be taken to reduce the risks. All relevant parts must be followed along with any other suitable risk assessments e.g.,</p> <p>It should also be read and followed in conjunction with:</p> <ul style="list-style-type: none"> <li>• <a href="#">UKHSA COVID-19 response: Living with COVID-19</a></li> <li>• <a href="#">UKHSA: Guidance for living safely with respiratory infections, including COVID-19</a></li> <li>• <a href="#">Reducing the spread of respiratory infections, including COVID-19, in the workplace</a></li> <li>• <a href="#">DfE: Emergency planning and response for education, childcare, and children’s social care settings</a></li> <li>• <a href="#">UKHSA Health protection in children &amp; young people settings, including education</a></li> <li>• <a href="#">UKHSA COVID-19: guidance for people whose immune system means they are at higher risk</a></li> <li>• <a href="#">The Royal College of Obstetricians and Gynaecologists (RCOG): information on COVID-19 in pregnancy and vaccination</a></li> <li>• <a href="#">HSE: Ventilation in the workplace</a></li> <li>• <a href="#">NHS National infection prevention and control manual</a></li> <li>• <a href="#">Keeping children safe in education</a></li> <li>• <a href="#">Early Years Foundation Stage (EYFS) Statutory Framework</a></li> <li>• <a href="#">DfE: Working together to improve school attendance</a></li> <li>• <a href="#">Promoting and supporting mental health and wellbeing in schools and colleges</a></li> <li>• <a href="#">Promoting the health and wellbeing of looked-after children</a></li> <li>• <a href="#">DfE: Providing remote education - guidance for schools</a></li> </ul>				

- [Safeguarding and remote education](#),
- [Cabinet Office: preparation and planning for emergencies](#)
- [Cabinet Office: pandemic flu](#)
- [Keeping children safe during community activities, after-school clubs and tuition: non-statutory guidance for providers running out-of-school settings](#)
- [DfE: health and safety advice for schools](#)

Activity Risk Ratings																																											
Method	Rating the harm and the likelihood				Risk Evaluations																																						
	Consequences	#	Likelihood	#	RISK RATINGS	EVALUATION																																					
Consider how hazardous this activity is and if enough has been done to control risks. <i>If required</i> , record a residual risk evaluation (see right & <a href="#">KAHSC Evaluating Risk (ratings guide)</a> for more information). Find the residual or leftover risk after putting controls in place by rating the <i>probable consequences</i> from interacting with identified hazards (no injury 0 to fatality 5), the <i>likelihood</i> of harm arising (never 0 to certain 5) and multiplying them to find the risk rating.	<b>Insignificant</b> - slight injury/illness	1	<b>Very unlikely</b>	1	<table border="1"> <tr> <td>5</td><td>10</td><td>15</td><td>20</td><td>25</td> </tr> <tr> <td>4</td><td>8</td><td>12</td><td>16</td><td>20</td> </tr> <tr> <td>3</td><td>6</td><td>9</td><td>12</td><td>15</td> </tr> <tr> <td>2</td><td>4</td><td>6</td><td>8</td><td>10</td> </tr> <tr> <td>1</td><td>2</td><td>3</td><td>4</td><td>5</td> </tr> <tr> <td></td> <td>1</td><td>2</td><td>3</td><td>4</td><td>5</td> </tr> <tr> <td></td> <td></td> <td></td> <td>Likelihood</td> <td></td> <td></td> </tr> </table>	5	10	15	20	25	4	8	12	16	20	3	6	9	12	15	2	4	6	8	10	1	2	3	4	5		1	2	3	4	5				Likelihood			
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<b>Major</b> - major injury/illness or multiple serious	4	<b>Likely</b>	4																																								
<b>Catastrophic</b> - imminent danger of death/epidemic	5	<b>Very likely</b>	5																																								