

COVID-19 RISK ASSESSMENT



Site:

51 Castle Street

Survey Ref No.

001/07/20

Activity/Process:

Delivery of First Aid Training - Working off site (client or hired premises)

Person conducting the survey:

Director Approval:

Name:

Gemma Lucking

Name:

Mark Harry

Date:

14/07/2020

Date:

14/07/2020

Sign:

G. Lucking

Sign:

M. C. Harry

Hazards <small>(Include Hazard Survey Number where applicable)</small>	RISK Associated with Hazard <small>(inc. who might be harmed and how)</small>	Control Measures <small>(Existing Control Measures)</small>	Risk Rating <small>(Likelihood X Consequence) (See Note 3)</small>	Additional Controls Required? <small>(Each Control Measure is to be specific and managed)</small>	Residual Risk Rating <small>(See Note 6)</small>	Management Plan		
						Owner	Target Date	Comp Date
If a delegate who is infectious with COVID-19 attends they may pass the virus to other delegates.	It is estimated that approx. 1 in 1000 people in society are infected at the time of writing. Data suggests around ¼ of those are people to be symptomatic. 94% of symptomatic COVID-19 patients are pyrexia (temp >37.8°C) Contracting COVID-19 carries a risk of death,	On arrival: 1. Screen all delegates and exclude anyone exhibiting COVID-19 symptoms which are a new continuous cough and/or a temperature >37.8°C and/or a loss of taste/smell. 2. Check the temperature of all delegates and exclude those who are pyrexia. 3. Screen delegates and exclude	2 x 3 = 6	The likelihood can be reduced to around 1 in 1,300 with screening to exclude those who are symptomatic. Due to the risk of death, further IPC measures to reduce the likelihood of infection are required throughout the entire course as detailed below.	1 x 3 = 3			

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	predominantly in those who are deemed as ‘clinically at risk’ .	anyone who should be self-isolating according to government advice (e.g. household member is symptomatic/advised to self-isolate by test and trace system) or anyone who falls into a ‘clinically extremely vulnerable’ category as detailed by UK government.		When arrival screening is combined with other IPC measures the likelihood can be reduced to improbable. Excluding those who are clinically at risk can also reduce the likelihood of fatality.				
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<p>Delegates or trainers can emit water droplets that travel approx. 1m when talking and particularly if they cough or sneeze.</p>	<p>Those who are less than 2m from the delegate/trainer could become infected if they breathe in the droplets containing the virus.</p>	<p>Physical distancing:</p> <ol style="list-style-type: none"> 1. Sit all learners 2m apart during the entire course. The venue must be assessed in advance to ensure physical distancing and to ensure that the number of delegates attending the course allows for physical distancing. chair/table positions will provide guide to delegates for distancing purposes. Floor markings may also be considered. 2. Lessons must be designed to ensure that a distance of 2m is maintained between delegates and between the delegates and trainer unless close contact is absolutely necessary for teaching or assessment purposes. Sensible adaptations to training and assessment activities must be introduced to achieve this and any contact <2m distance must be kept to an absolute minimum. 3. A system must be in place to ensure physical distancing is maintained during access and egress of the classroom, for example, asking those nearest the door to leave the classroom first. 4. Face masks – Learners should be trained in the correct use of 3-ply civilian face masks and BOTH people 	<p>1 x 3 = 3</p>	<p>Strict adherence to control measures required.</p>	<p>1 x 3 = 3</p>			
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		<p>must wear them during any close contact <2m during practise/assessment. If civilian 3-ply masks become unavailable due to supply chain demands, assessments must be adjusted to maintain 2 meters physical distancing.</p> <p>Respiratory hygiene:</p> <ol style="list-style-type: none">Delegates must receive instructions on respiratory hygiene on arrival. Instruct them that if they need to cough/sneeze this should be done into a tissue that is disposed of immediately. Failing that they should cough into a bent elbow (better than a bare hand) and NEVER cough/sneeze without covering their mouth/nose. If someone coughs on their hand or uses a tissue they should use alcohol sanitizer immediately. The trainer must supervise this throughout the course.Show Delegates the following video on how COVID-19 spreads: https://youtu.be/1APwq1df6MwbTissues must be provided and readily available for delegates.						
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<p>Delegates may contract the virus by touching contaminated surfaces then touching their mouth, nose or eyes, touching</p>	<p>A delegate could become infected with the virus.</p>	<ol style="list-style-type: none"> 1. Hand sanitiser must be provided and readily available to delegates throughout the course. 2. Make delegates aware of where they can wash their hands and show them the following video on how to wash their hands: https://www.youtube.com/watch?v=aGJNspLRdrc 3. Explain clearly that no one should touch their mouth, nose or eyes unless they have just washed their hands or sanitised. The trainer should supervise this throughout the course. 4. Delegates should sanitise hands frequently throughout the course. To ensure this happens, delegates should be instructed to sanitise their hands: <ol style="list-style-type: none"> a. On arrival b. After every theoretical teaching session c. Before and after every practical session d. Before and after touching any shared equipment 5. Common touch objects and surfaces e.g. door handles/kettle/desks etc. should be cleaned frequently. Sanitise at the start and end of every day and at every break time. 6. Reduce commonly touched surfaces by propping doors open where safe to 	<p>1 x 3 = 3</p>	<p>Strict adherence to control measures required.</p>	<p>1 x 3 = 3</p>			
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		<p>do so.</p> <p>7. All training equipment must be thoroughly cleaned before use by an individual delegate (see below for CPR manikin hygiene).</p> <p>8. Cups/mugs should either be disposable or a system must be in place to prevent contamination from shared crockery; such as delegates keeping their own mug for the entire course. Crockery must be washed in a dishwasher or washed in hot water with washing up liquid before being used by another delegate.</p>						
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<p>CPR Manikin Hygiene: If manikin hygiene is not strictly adhered to, there is a risk of passing the virus from shared use.</p>	<p>A delegate could become infected with the virus.</p>	<ol style="list-style-type: none"> 1. Shared use of manikins must be minimised as far as practically possible. 2. Where manikins are shared, they must be kept to the same small group of delegates to prevent the possibility of course-wide infection spread. 3. This document provides details of the manikin hygiene techniques available. 4. A 'double fail-safe' level of protection must be in place to prevent the possibility of cross contamination from rescue breaths. Combinations include: <ol style="list-style-type: none"> a. On a manikin with a one-way valve using sanitising wipes between delegates PLUS using a CPR face shield. b. Issuing a learner with their own manikin face on a manikin with a one-way valve PLUS using a CPR face shield. c. Issuing each learner with their own manikin face PLUS their own airway/lung. (This must be done where a manikin does not have a one way valve). d. Issuing each learner with their own manikin. 5. At the end of each course, manikin faces should be sanitised following manufacturers instructions. 6. After each course, manikin lungs and airways must be replaced following 	<p>1 x 3 = 3</p>	<p>Strict adherence to control measures required.</p>	<p>1 x 3 = 3</p>			
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		manufacturers instructions.					
There is a risk of infection when cleaning/servicing CPR manikins	The trainer could become infected with the virus.	<p>The trainer must wear PPE when disassembling manikin for cleaning or servicing:</p> <ul style="list-style-type: none"> • 3 ply face mask • Disposable gloves (or domestic kitchen gloves that are then sanitised after use). • Disposable apron • Eye protection 	1 x 3 = 3	Strict adherence to control measures required.	1 x 3 = 3		
There is a risk of chemical or thermal burns when sanitising manikin parts.	The trainer could suffer thermal burns if using hot water or chemical burns if using sodium hypochlorite (bleach).	<p>If practicable, the trainer should sanitise manikin faces in the dishwasher to eliminate the risk. Where this is not possible, the trainer must wear PPE when carrying out manikin part cleaning:</p> <ul style="list-style-type: none"> • 3 ply face mask • Domestic kitchen gloves • Disposable apron • Eye protection <p>Chemicals should be stored and used following COSHH regulations.</p>	1 x 2 = 2		1 x 2 = 2		
There is a risk of infection from shared wearing/use of choking vest and bandages	A delegate could become infected with the virus.	<ol style="list-style-type: none"> 1. Use of the choking trainer vest will be suspended and replaced with delegates demonstrating back blows and the correct hand positioning for abdominal thrusts on the CPR manikin, which must be wiped down before and after use. 2. Each learner will be given their own 	1 x 3 = 3	Strict adherence to control measures required.	1 x 3 = 3		

		triangular bandage and medium wound dressing.					
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5. Risk Rating = Likelihood x Consequence:

		Likelihood			
High	Common, regular or frequent occurrence.	3	3 Med	6 High	9 High
Medium	Occasional occurrence.	2	2 Low	4 Med	6 High
Low	Rare or improbable occurrence.	1	1 Low	2 Low	3 Med
			1	2	3
Consequence			Minor injury or illness.	Serious injury or illness.	Fatalities, major injury or illness.
			Low	Medium	High

6. Residual Risk Rating.

High	Improve control measures; consider stopping work. Conducting work at this level of risk is to be reported up the Line Management / Command chain.
Medium	Review control measures and improve if reasonably practicable to do so, consider alternative ways of working.
Low	Maintain control measures and review if there are any changes.

Further information on considerations for building layout, access and egress can be found here:

<https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19/offices-and-contact-centres#offices-3-1>