Activity/ Situation	Asymptomatic Testing for Secondary and Special Schools From 8 th March v2 04.03.21					
Location		George Pi	ndar School			
Persons at Risk	Pupils 🛛	Employees⊠	Visitors		Contrac	tors 🗆
Persons at Risk Pupils IM Employees M Visitors I Contractors I Note: this list is not exhaustive and <u>must</u> be adapted for your own needs × 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 Setf-Swabbing Sample Collection Procedure * Inadequate Setf-Swabbing Sample Collection Procedure × Inadequate Sample Processing and Analysis Procedure * Inadequate Results × Invalid Results × * Invalid Results × Invalid Results × * Inadequate Infection Prevention and Control: Equipment * Inadequate Cleaning Regime * Spillages * * Inadequate Waste Management						
CONTROL ME	ASURES		IONAL MATION	YES	NO	N/A
	d and adapt this generic risk ng and amending others wh					
Devices in Schools and	e Clinical Standard Opera Colleges to ensure they a					
indemnity perspective	fing/Information/I	nstruction/Train	ing			
Procedure (SOP) f		Lateral				
Covid Coordinator/ Welsh	Team Leader is Lesley Weightside the state site, including test site, including workforce management					
The nominated Qu	ality Lead is Lesley	have acc	vidual will countability uality of the	\boxtimes		

	service within the			
	context of a non-			
	laboratory			
	environment testing			
Queue Coordinator in place each day	Ensures orderly entry of subjects	\boxtimes		
Queue Coordinator in place each day				
	onto the testing site			
	Responsible for			
Degistration Assistant in place each day	ensuring subjects	\boxtimes		
Registration Assistant in place each day	have registered and			
	distributing barcodes on arrival			
	Provides guidance to subjects on			
	-			
One or more Test Assistants in place each day	swabbing as requested and	\boxtimes		
One of more rest Assistants in place each day				
	ensures cleaning of booths or sample			
	collection station.			
	Prepares test			
One or more Processing Operatives in place	sample for analysis	\boxtimes		
each day	and interprets result			
	Collates results from	<u> </u>		
	Processing			
Results Recorder in place each day	Operatives and			
	uploads to digital			
	solution			
	Keeps the test site			
	clean to prevent			
Cleaner(s) in place at the time of testing	cross contamination			
	and Spread of Covid			
	19			
	All colleagues in			
	COVID testing			
Appropriate training package in place for	programme have			
operators to be trained to be able to conduct	completed all			
the test in a safe and effective manner	modules of DfE		_	_
	training			
	programmes.			
Staff have watched the approved video	All staff have			
package which demonstrates how physical	watched all training	\boxtimes		
tests are conducted	videos.			
Staff have read through of materials outlining	Staff have			
the infection prevention and control measures	completed all			
and the appropriate use of personal protective	training and read the	\boxtimes		
equipment, including the proper procedure for	guidance.			
donning and doffing	-			
	Dry run took place			
	with initial round of			
Staff have undertaken several tests under	tests supervised and			
supervision	competency			
	checklists			
Cabaal aanduata a namulan awalit af	completed.			
School conducts a regular audit of	Quality Lead on site			
performance and overall testing process PPE,	every day to observe	\boxtimes		
dealing with any contamination or other	the testing process			
untoward incidents				

	and audit any		
	issues.		
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	Any new requirements will be shared with testing team and training will be updated in June 2021.	\boxtimes	
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	Test Assistants / Processing Operatives check their bays before commencing testing. Cleaner checks his supplies before tests commence.		
All staff are reminded of the importance of IPC guidance. Regular handwashing and consistent social distancing are key to ensuring safety for all roles	Staff are reminded of this.	\boxtimes	
Inadequate Infection Prevention and Con	trol (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		
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/g overnment/publicatio ns/wuhan-novel- coronavirus- infection-prevention- and-control		
All workers on site are fully briefed and trained about PPE and IPC standards, including those approved by the NHSE/I IPC Cell		\boxtimes	
Guidance of IPC standards is clearly displayed	Site displays 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			
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	Staff are reminded of this in briefings	×		
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 proven according to EN1500			
Staff will focus on maintaining social distancing when communicating with subjects	Staff maintain 2m due to layout of testing centre; perspex screens are in place for added protection.	×		
Inadequate Setting Up Of Testing Environ	nment and Testing A	rrangen	nents	
On-site testing : schools establish an Asymptomatic Test Site (ATS) on the premises to test all pupils/students during their initial return. Pupils/student self-swab with the processing and reporting being undertaken by trained workforce. Confirmatory PCR requirement has been suspended where testing takes place at an ATS	Site was established in January 2021 and has been expanded to accommodate increased student numbers for the return to school in March 2021.			
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 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</i> <i>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	Self-tests and instructions will be distributed to students on Friday 12 March.			
Retention of ATS: All schools/colleges are advised to retain a pared-down on-site testing	One bay will be in place from Tuesday 16 March.	\boxtimes		

facility on an ongoing basis to assist students who are unable to swab at home			
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		
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	Sessions have been planned to test individuals 3-5 days apart.		
Testing at home does not infer the same constraints so a habit of testing routinely 3-4 days apart is recommended	A letter home to parents will include this detail.	\boxtimes	
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	Current testing kit will be maintained for the individual booth.	\boxtimes	
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)	LFD kits supplied for self-testing will be distributed to families.		
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	A home testing kit record will be kept.	\boxtimes	
On-site testing : schools establish an Asymptomatic Test Site (ATS) on the premises to test all pupils/students during their initial return. Pupils/student self-swab with the processing and reporting being undertaken by trained workforce. Confirmatory PCR requirement has been suspended where testing takes place at an ATS	This has been in place since January and expanded for the return to school.	×	
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		
For self-testing at home , those testing themselves and parent/carer should ensure they have duly read the instruction for use (<u>https://www.gov.uk/government/publications/in</u> <u>structions-for-covid-19-self-test</u>) and watched the approved video (<u>https://www.youtube.com/watch?v=S9XR8RZ</u> xKNo&list=PLvaBZskxS7tzQYIVg7lwH5uxAD9	This will be reinforced in the letter to parents.		

UrSzC 18 index=1) which domenstrates how			
UrSzGJ&index=1)which demonstrates how physical tests are conducted			
The test cartridge and extraction solution is stored at ambient temperature (2-30 degrees Centigrade)			
The reagents and devices are at room temperature (15-30 degrees centigrade) when used for testing			
The manufacturer's instructions for use are shared with all relevant members of staff	Innova SARS-Cov-2 Antigen Test IFU		
Test Site set up in accordance with the "Rapid Testing in Schools and Colleges – How To Guide"	Test Site complies and has been checked by Hope Learning Trust		
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	Test Site is in the school gym to facilitate queue management and limit disruption.		
Sufficient space for appropriate social distancing	Test queues are marked at 2m intervals.		
Test Site contains easy to clean floor and surfaces		\boxtimes	
Test Site has resistant, non-absorbent, non- porous flooring			
Airflow and ventilation is natural not recirculated air			
Ambient temperature of 15-30 C maintained in Test Room			
One-way flow from entry to exit in place as much as possible			
Test subject chairs in the swabbing bay are a minimum of 2m apart	No chairs in swabbing bays		
Each swabbing desk has a processing desk close by no more than 1m away			
Recording desk is located close to the swabbing desks			
There is clear division between swabbing and processing area			
Individuals being tested must not enter the processing area			
Clear access maintained to PPE donning and doffing area			
Ready access to hand hygiene (soap and water/appropriate alcohol-based hand rub) available			
Consideration of the need for privacy for participants to self-administer a test has been given			
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			
All surfaces are de-cluttered with no personal or non-essential equipment		\boxtimes		
Adequate space available for storage		\boxtimes		
Appropriate testing site waste management arrangements in place	Waste is disposed of in line with current DHSC guidance so can be placed in normal waste.			
Participation is voluntary for the programme and consent has been received from either by participants or parents /legal guardians, as appropriate	Consent forms have been completed for all who are participating.			
School will need to identify the contacts of a confirmed case	Seating plans exist for all students.	\boxtimes		
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	Close contact letters are ready to be sent to those who require this			
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	Consent for LACs will be requested from social workers			
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.	Administered swabbing will not take place.		×	
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.	This will be included in the letter home.			
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.	This will be included in the letter home.			
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.	This will be included in the letter home.			
If the student refuses to take the test despite consent by their parent/ guardian/ carer, their wishes are respected	Students are asked on entry if they give consent.			

Current advice is that for most a previous 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 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. Test subjects who have had COVID in the last 90 days have indicated that they prefer not to be tested.		
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: • 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		
Face coverings/masks to be worn by subjects at all times whilst on the premises except for brief lowering at time of swabbing		\boxtimes	
Requirement to wear face covering/mask to be reminded to all subjects in advance at time of test booking	Included in letters home and student / staff briefings		
Compliance with wearing of face covering/mask of all subjects to be visually checked on arrival by reception / security staff		\boxtimes	
Compliance with wearing of face covering/mask of all subjects to be visually checked through building by queue managers and all other staff			
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			
All subjects to use hand sanitiser provided on arrival & adherence to this enforced by reception staff		\boxtimes	

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		×		
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		×		
Limited clutter such as chairs available only on request; no physical handing of documents to subjects except barcodes and PCR test kits for first 200 subjects	Test subjects only receive barcodes; no PCR kits are distributed	×		
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			
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	<mark>If school has any</mark> queries they should seek their own legal advice on the particular circumstances			
Schools keep a record of how the decision on consent was made		\boxtimes		
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	The school does not allow staff to swab test subjects.			
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: • Parent/guardian, guided by a Test Assistant • An adequately trained school staff member (where permission and consent of the parent/	The school does not allow staff to swab test subjects. If a child were unable to swab and the parent/carer attended, guidance would be given to		×	

guardian has been taken as part of initial consent process) • trained swabbers who are part of testing	allow the parent/carer to swab the child.		
workforce 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	The school does not allow staff to swab test subjects.		
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	Parents/carers in this situation would be consulted.		
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			
Appropriate hand sanitisation is used before and after the swabbing process for both, the test subject and the accompanying person			
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			
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			
If a pair of gloves is requested, they are issued with gloves to perform the swabbing		\boxtimes	
If assisted swabbing is performed by a carer who is paid to provide care, they need to follow their organisational policy	The school does not have any students or staff with paid-for carers.		
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		
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			
As a minimum, the first three tests done at home (if not initially done via ATS) should be		\boxtimes	

administered by the pupil/student's parent/carer (i.e. the parent/carer should do the swab as well as the other steps) Image: Control of the couple 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 Image: Control of the couple 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 Image: Control of the couple in the couple is they can what had emonstration video at two quot uncouple in the steps Image: Control of the couple is		1			
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they wear gloves on sessional basis School ensures that the Supplies Coordinator wears Fluid-resistant (Type IIR) surgical masks (FRSM)			
School ensures that the Queue Coordinator wears Fluid-resistant (Type IIR) surgical masks (FRSM)		\boxtimes	
Disposable gloves are single use and are changed after each test		\boxtimes	
Disposable aprons are replaced after each testing session		\boxtimes	
Fluid-resistant (Type IIR) surgical masks (FRSM) are replaced after each testing session		\boxtimes	
Eye protection is replaced after each testing session		\boxtimes	
PPE is changed if protective properties are compromised, if contaminated, or if suspected to be contaminated		\boxtimes	
Inadequate Self-Swabbing Sample Collect	tion 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		
Subject is given a sealed sterile swab directed to a sample collection booth from the check-in zone	At the check-in desk subjects are only given a barcode; swabs are given at the testing bay		
Once at the sample collection station, the barcode is handed to the Processing Operative			
The subject should remove mask to administer swab		\boxtimes	
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			
The subject completes hand hygiene using the alcohol-based hand rub provided in the booth			

The swab is removed from sterile packaging by the subject			
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			
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	The swab will be invalid if it touches these parts during or after sampling and all test materials are placed in to the waste bag, sealed and a fresh swab selected.	X	
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			
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	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		
The subject will be required to place their swab directly into the prepared extraction	Note: The subject should not grasp the	\boxtimes	

tube on the bench at the window with the cotton bud end facing down	cotton bud end, which has been in contact with the tonsils and nostril		
The subject will complete hand hygiene using alcohol-based hand rub in the booth			
If the operational model includes the subject handling any equipment (e.g. hand mirror) they should disinfect the surfaces with anti-viral wipes			
The subject will put back on their face covering and leave the site		\boxtimes	
Inadequate Sample Processing and Anal	ysis Procedure		
The Processing Operative prepares the area in advance of receiving the sample and barcode from the subject		\boxtimes	
The Processing Operative only processes one sample at a time and watch not more than 5-6 samples at a time		\boxtimes	
The Processing Operative will receive the barcode directly from the subject			
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.		
 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 alternates 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 anti-viral using wipes between samples to prevent cross- contamination		
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)			

The Processing Operative then takes the swab and commences the following steps:				
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				
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				
 c) On withdrawal, immediately dispose of the swab into the general waste bin. 				
d) Install a nozzle cap onto the extraction tube		\boxtimes		
e) Load: drip 2 drops of the sample inside the extraction tube into the sample well of the LFD cartridge				
f) Record the time of test in marker on the LFD and make sure you have set a timer to read the results at 30 minutes.				
g) Re-check that the liquid can be seen seeping through the cartridge (to ensure the drop was not an air bubble)				
 h) If the cartridge appears dry, the subject will need to be recalled for a further sample to be taken. 	The LFD movement should be kept to a minimum and where it is required to be			
i) If needed, move the cartridge to a defined processing space for reading and leave for between 20-30 minutes as below.	moved, keep horizontal using a tray			
The sample preparation area and equipment are cleaned thoroughly with disinfectant (e.g. anti-viral wipe)				
Recording of Results	,		I	
All LFD results must be logged on the government Log Results Website	This is completed by the Results Recorder	\boxtimes		
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				
Marked LFDs are placed into trays in batches and taken to the recording area		\boxtimes		
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				

The contriduction dispersed of in the merced			
The cartridge is disposed of in the <mark>general</mark> waste bin		\boxtimes	
The keyboard is wiped and the wipe is disposed of in the general waste bin		\boxtimes	
The tray is wiped and the wipe is disposed of in the <mark>general waste bin</mark>		\boxtimes	
When done, gloves are removed and disposed of in the general waste			
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 			
Invalid Results			
Subjects who return an invalid/could not read (where there is no control line) LFD result repeats the test	C C T T		
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	<u>https://coronavirus-</u> <u>yellowcard.mhra.gov</u> <u>.uk/</u>		
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			
The subject must self-isolate immediately for 10 days and everyone in their household must self-isolate in line with national policy			
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.		
In the event that a subject tests positive after undertaking a home LFD test, it means they are currently infected with	When the subject reports their result, they will be provided		

I ravel Advice for Positive Results			
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 Travel Advice for Positive Results	When the subject reports their result, they will be provided with further information on the next steps to take (taking a confirmatory PCR test)		
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		\boxtimes	
If the confirmatory PCR test is negative, report it on the Coronavirus Yellow Card Reporting Site	<u>https://coronavirus-</u> <u>yellowcard.mhra.gov</u> <u>.uk/</u>		
 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 or someone who tested positive 			
a) they are symptomatic (they'll need to book a PCR test),		\boxtimes	
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			
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.		
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		
They must use the PCR kit provided or go to <u>https://www.gov.uk/get-coronavirus-test</u> to book/ order PCR test immediately after receiving a positive LFD result		×	
Staff/students in these situations must not return to school			
coronavirus and risk infecting others. Positive test results are reported to the NHS and school immediately	with further information on the next steps to take (taking a confirmatory PCR test)		

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			
Those who have tested positive should not travel home using public transport	Exceptionally the local authority may be able to help source a suitable vehicle which would provide appropriate protection for the driver	×	
Asymptomatic contacts of positives cases should go home as they would normally do	If the contact becomes symptomatic, they should follow same travel advice as positive cases		
Inadequate Infection Prevention and Cor	itrol: Equipment		
All digital equipment is regularly wiped between batches of tests and at the beginning and end of each session		×	
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		
The cleaning wipe used should meet the requirement set out in the Inadequate Cleaning Regime section and be effective against enveloped viruses			
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		×	
An equipment cleaning regime is in place and clearly communicated		\boxtimes	
A replacement schedule is in place to replace damaged covers and the equipment should not be used if the cover is torn/worn		X	
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			

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		
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		×	
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		
In case of a spillage when they need to enter an active test area, cleaners should ensure that they have appropriate PPE		\boxtimes	
When entering an active test area cleaners ensure that the listed PPE is worn	See below	\boxtimes	
When entering an active test area to clean up spillages staff ensure they replace their PPE after cleaning		\boxtimes	
Avoid mixing cleaning products together as this can create toxic fumes		\boxtimes	
Avoid creating splashes and spray when cleaning		\boxtimes	
Any cloths and mop heads used must be disposed of and should be put into <mark>the general</mark> waste		\boxtimes	
The minimum specifications stipulated by the government for surface disinfectant wipes, is that the disinfectant is effective against envelop viruses			
It is recommended where possible that combined detergent and disinfectant wipes is used, as they will both clean and sanitise the surface at the same time			
If a 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			
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			

State overall risk level assigned to the task AFT control and action plan measures taken as a res	ER imple		High	Med	Low
Further control measures to reduce risks so far a reasonably practicable	Name	Date			
ACTION PLAN (insert additional rows if require	ed)	Тс	be actio	ned by	
Have you identified any further control measure the risk and recorded them in the action plan	s needec	to control	Yes 🗆 No		No 🖂
Is the risk adequately controlled with existing co	ntrol mea	asures	Yes		No 🗆
What is the level of risk for this activity/situation measures	with exis	ting control	High	Med ⊠	Low
Have you consulted with the people/representat activity as part of the preparation of this risk ass		•	Yes		No 🗆
The bags should be placed into a larger bin ready for collection by their waste contractor					
 Provide extra bin bags, as required Collect waste regularly (frequency to be agreed with individual school) 					
Provide extra wheelie bins for waste storage			\boxtimes		
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:					
Inadequate Waste Management				1	
D10 is used to disinfect the area			\boxtimes		
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			\boxtimes		
Any cloth and mop heads used for cleaning must be disposed of and should be placed into the general waste bin			\boxtimes		
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					
individual that is tested					

Is such a risk le	ch a risk level deemed to be as low as reasonably practical? Yes ⊠ No □						
Is activity still a	ccepta	able with this level of	el of risk? Yes 🛛 No				
If no, has this been escalated to senior leadership team?					Yes 🗆	No 🗆	
Assessor(s): Position(s):		ley Welsh cipal	Signature(s):	L	AWeloh		
Date:		04.03.21	Review Date:		Ongoing		
Distribution:							
Risk rating		Action					
HIGH			Irgently review/add controls & monitor, notify H&S Team (if Likely or Highly Likely – top work, seek competent advice)				
MEDIUM		Review/add controls (a	as far as reasonably praction	cable) a	& monitor		
LOW		Monitor control measu	r control measures				

OTENTIAL OUTCOME		DTENTIAL OUTCOME LIKELIHOOD		HOOD	Catastrophic					
Catastrophic	Fatal injury/permanent disability	Highly likely	More likely to occur	Major						
Major	RIDDOR reportable Specified Injury/ Disease/Dangerous Occurrence	Likely								
Moderate	RIDDOR reportable over 7 day injury	Possible		Moderate						
Minor	Minor injury (requiring first aid)	Unlikely		Minor						
Insignificant	Minor injury	Remote	Less likely to occur	Insignificant						
					Remote	Unlikely	Possible	Likely	Highly Likel	

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