



Lady Margaret School

Covid-19: Testing Centre Risk Assessment January 2021

Updated: 29th January 2021

To be reviewed: 8th March 2021

Lady Margaret School

COVID-19: Testing Centre Risk Assessment

Public Health England and the Health and Safety Executive require this documentation to ensure end to end health, safety and infection control risks for mass lateral flow testing are identified, pre-assessed, managed and monitored regularly by the site owners and testing operators. Lady Margaret School will be undertaking lateral flow testing of both staff and students in school.

Assessment conducted by:	Mr A Parker	Job title:	Bursar	Covered by this assessment	Staff, students, visitors, volunteers.
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Date of assessment:	27 th January 2021	Review interval:	Weekly	Date of next review:	8 th March 2021
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Related documents

Lady Margaret School Covid-19: Operational Risk Assessment for Full School Reopening September 2020

Department of Health and Social Care Covid-19 Response, Clinical Standard Operating Procedure for Mass Testing with Lateral Flow Antigen Testing Devices in Schools and Colleges. Version 2.3.

Risk matrix

			Likelihood				
			Rare	Unlikely	Possible	Likely	Almost Certain
			1	2	3	4	5
Severity	Negligible	1	1	2	3	4	5
	Minor	2	2	4	6	8	10
	Moderate	3	3	6	9	12	15
	Major	4	4	8	12	16	20
	Critical	5	5	10	15	20	25

Definition

Likelihood of Occurrence	Indicator
1. Rare	Will probably never happen
2. Unlikely	Do not expect it to happen but is possible
3. Possible	Might happen
4. Likely	Will probably happen
5. Almost Certain	Will undoubtedly happen

Risk Prioritisation

Risk Score	Prioritisation	Colour	Action
1 to 4	Low	Green	Acceptable but keep under regular review.
5 to 12	Medium	Amber	Consider further possible actions if reasonably practicable to reduce risk, then monitor and review.
13 to 25	High	Red	Further actions required to reduce risk with regular review.

Risk	Description of Risk	Risk Rating Prior to Action			Control Measures	Residual Risk Rating		
		Likelihood 1= low 5= high	Severity 1= low 5= high	Total Inherent Risk		Likelihood 1= low 5= high	Severity 1= low 5= high	Residual Risk
1. Contact between subjects increasing the risk of transmission of COVID19	Transmission of the virus leading to ill health or potential death	4	4	16	<p>Asymptomatic: All subjects are to be 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 if they have returned within 14 days from a part of the world affected by the virus or have been in close contact with someone outside school who is displaying symptoms.</p> <p>Face masks: Prominent signage reminding attending subjects of the above to be displayed at the entrance to (and inside) the Olivier Centre Test Centre. Face coverings to be worn by everyone inside the Olivier Centre Test Centre except for brief lowering at time of swabbing. Requirement to wear face covering to be reminded to all subjects in advance at time of test booking.</p> <p>Compliance with wearing of face covering of all subjects to be visually checked on arrival by reception staff. Compliance with wearing of face covering of all subjects to be visually checked through building by queue managers and all other staff.</p> <p>Hand hygiene: All subjects to use hand sanitiser provided on arrival & adherence to this enforced by Test Centre reception staff.</p> <p>Social distancing: 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.</p> <p>Ventilation: The Test Centre is to be kept well ventilated at all times, keeping doors and or windows open to ensure a through draft. Care to be taken to ensure the centre remains at an appropriate temperate for storage of the lateral flow devices (room temp 15-30 degrees).</p> <p>A one-way flow of subjects through the Test Centre is to be initiated and maintained at all times. Compliance with this is to be ensured by queue management staff.</p> <p>Cleaning: Regular cleaning of the site including wipe down of all potential touchpoints in accordance with PHE guidance.</p>	2	4	8

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		Likelihood 1= low 5= high	Severity 1= low 5= high	Total Inherent Risk		Likelihood 1= low 5= high	Severity 1= low 5= high	Residual Risk
					Limited handling of documents etc: No physical handing of documents to subjects except registration cards, barcodes and swabs.			
2. Welcome & registration Contact between subjects and staff increasing the risk of transmission of COVID19	Transmission of the virus leading to ill health or potential death	4	4	16	<p>Arrival: Arrival at the Testing Centre for students will be staggered and managed by the SLT. Appointment times to be set up for staff. Only students and staff being tested to be admitted to the testing centre.</p> <p>Social Distancing in Queue outside: Test Centre Assistants to ensure that social distancing is enforced as classes or groups of students queue to be registered.</p> <p>Asymptomatic: Registration Assistants to ask those arriving (before they enter the Olivier Centre Testing Centre) to confirm that they are feeling well and have no Covid-19 Symptoms. Should the student have symptoms this will be reported to the school office and the student accompanied to the medical room to isolate before returning home.</p> <p>Register one at a time: Test Centre Assistants will ensure that subjects only approach the registration desk one at a time.</p> <p>Registration process. Registration Assistant at the registration desk to hand the subject a registration card with a barcode on it. Registration Assistant to regularly sanitise hands. Both Registration Assistant and student to wear face mask.</p> <p>PPE: Face masks, gloves, aprons and visors will be provided to all the team members working in the Testing Centre.</p> <p>Hand washing /sanitiser (70% alcohol) for the welcome and registration assistants the start of every session, regularly thereafter and on removal of face mask.</p>	2	4	8
3. Sample Taking	Transmission of the virus leading to ill	4	4	16	Testing Area: A table for testing each subject will be divided by a Perspex screen. So that the subject and the Testing Assistant are separated by a barrier. The table will be also be placed into a	2	4	8

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Contact between subject and sampler assistant increasing the transmission of COVID19	health or potential death				<p>'booth' like construction which will further separate the subject from the Testing Assistant. The subject and the Testing Assistant will not come into contact with one another due to physical barriers.</p> <p>PPE: Face masks, gloves, aprons and visors will be provided to all team members working in the Testing Centre. Gloves to be changed after every subject.</p> <p>Testing Assistant Has No Physical Contact: Table for the subject will include all of the equipment they require to swab safely. This will be on their side of a Perspex screen i.e. sanitiser, tissues, hand held mirrors and a bin to dispose of swab packet and tissues.</p> <p>Social Distance: Test Assistants to maintain social distance from the subject and communicate verbally through the Perspex screen. They may also refer to the poster and tonsils image. It is only the swab, test tube and test tube rack that pass between the subject and the Test Assistant. This is passed through the small gap in the screen.</p> <p>Completion of Swabbing: The subject will place the used swab into a test tube, in a rack that has been passed under the Perspex screen. The subject will pass the swab, test tube and rack and bar code back under the Perspex screen to the Test Assistant who will place this directly into the grey tray on the adjacent Sample Processors desk.</p> <p>No Physical Assistance: If the subject is wholly unable to complete the throat swap, the Test Assistant does not do it for them but can rely instead on the nose swab of both nostrils.</p> <p>Cleaning: Test Assistant instructs the student to use the sanitiser to wipe down the mirror and all surfaces i.e. table and chair and then to sanitise their hands.</p> <p>Training: All Test Assistants to have completed and passed the online training modules provided by the NHS and follow correct testing and PPE procedures.</p> <p>Competency Checks and Assurance Testing: A regular routine of competency checks of Test Assistants to take place.</p>			

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4. Sample processing & analysis Contact between samples and sample testers increasing the transmission of COVID19	Transmission of the virus leading to ill health or potential death	4	4	16	Training: All Sample Processors to have completed and passed the online training modules provided by the NHS and follow correct sample testing and PPE procedures. PPE: Sample processors to wear full PPE, apron, gloves, eye protection (visor) and mask. All PPE to be replaced between testing sessions (say at lunchtime) but within a session gloves are to be replaced after each individual test is processed. Competency Checks and Assurance Testing: A regular routine of competency checks of Sample Processors and testing assurance to take place.	2	4	8
5. Sample transport Contact between sample and Test Centre runner increasing the transmission of COVID19	Transmission of the virus leading to ill health or potential death	4	4	16	Completion of Swabbing: The subject will place the used swab into a test tube in a rack that has been passed under the Perspex screen. The subject will pass the swab, test tube and rack back under the Perspex screen to the Test Assistant who will place this directly into the grey tray and then pass the grey tray to the adjacent Sample Processors desk. Test Processing: Swab, test tubes, fluid, lateral flow tests to be placed in a tray with upturned sides to contain any spillage or dropping. Tray enables the samples to be passed around safely. Testing Area: Swabbing Table, Processing Table and Recording Table all positioned as set out in the NHS 'How to Guide'. PPE: Sample processors to wear full PPE, apron, gloves, eye protection (visor) and mask. All PPE to be replaced between testing sessions (say at lunchtime) but within a session gloves are to be replaced after each individual test is processed. Training: All Sample Processors to have completed and passed the online training modules provided by the NHS and follow correct sample testing and PPE procedures. Competency Checks and Assurance Testing: A regular routine of competency checks of Testing Centre staff and testing assurance to take place.	2	4	8
6. Sample disposal and waste disposal	Transmission of the virus leading to ill	4	4	16	Waste Bins and Bags: Waste bins provided at every table and clearly marked for different waste. Black Bags = LFD Packaging	2	4	8

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Contact between samples and sample testers increasing the transmission of COVID19	health or potential death				and general waste, Yellow/Clear Bags = Swabs and Tissues and Cartridges, Tiger Bags = PPE, Cloths and Mop heads. Changing of Bins and Removal of Bins: To be undertaken by Test or Processing Assistants who will remove, seal and remove used bin bags in addition to placing new bin bags in the bin. Full PPE to be worn at all times. Waste Collection: Arrangements in place with the school' sanitary provider to collect medical waste bags. Secure storage area established in the basement to store medical waste bags prior to collection.			
7. Incorrect result communication	Wrong samples or miscoding of results	3	2	6	Testing team members to be trained using online videos and discussion on site. MEASURES TO ENSURE ACCURACY IN LINKING RECORDS Registration Assistant to select a bar code pack (3 identical bar codes) for each subject as they arrive. Registration Assistant checks that the bar codes are identical. One bar code to be affixed adjacent to the subject's name on the hard copy register held at the registration desk. The second bar code to be affixed to a registration card handed to the test subject to keep. Registration Assistant scans the QR code on the registration card on to the school's testing database. The subject walks to the testing table and sits. The Test Assistant greets the subject on the other side of the Perspex screen. The subject hands the Test Assistant the third bar code, the bar code is placed into the testing tray. Once the swab has been completed the Test Assistant hands the tray which contains the swab and the bar code etc to the Test Processor. The Test Processor affixes the third bar code to the back of the LF device and writes the result +ve or -ve on the cartridge. The results recorder receives the LF device with its bar code and scans this twice to enter the result on to the NHS/PHE results site. The results recorder then checks the bar code against the schools testing database to identify the student name. Result then also marked on the school's testing database.	2	2	4

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					<p>In the case of any positive tests, the Testing Coordinator to be notified and SLT to action.</p> <p>MEASURES TO ENSURE ACCURACY OF THE TEST</p> <p>The Test Processor checks that the lateral flow device is within its expiry date. Test Processor to avoid contamination by holding the LF device at the sides to avoid any contact with the well.</p> <p>Test Assistant to ensure that the subject fully understands how and where to swab and the importance of avoiding contamination from cheeks and tongue.</p> <p>Test Processor to ensure that the testing liquid dispenser does not touch the sides of the test tube when filling the tube. A test tube rack to be used to keep the tube steady.</p> <p>Test Processor to take care to try to avoid air bubbles when dispensing test liquid into the well.</p> <p>Processor to ensure a clear desk and suitable timing equipment available. Processor to write the time when liquid put into the well on each device to act as reminder to avoid running over 30 mins which could cause a false positive. Processor to use fresh gloves for testing each subject.</p> <p>Once the result is known, the processors to mark the device clearly as -, + or V for void. Devices then passed to results recorder.</p> <p>The results recorder receives the LF device with its bar code and scans this twice to enter the PHE results site and manually enters the result.</p> <p>The results recorder then checks the bar code against the schools testing database to identify the student name. Result then also marked on the database.</p> <p>Reminder posters adjacent to each processing desk to remind processors of how to mark the time on each device, the importance</p>			

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					of timing; how to read the results and how to mark the test devices - , + or V.			
8. Damaged barcode, lost LFD, failed scan of barcode	Orphaned record on registration portal & No result communicated to individual	3	2	6	If a problem arises with the bar code or the LF device or a failed scan of the result, then the subject is to be recalled to repeat the test again on the same or next school day. Similarly if the subject does not receive the result from PHE within 24 hours of the test, they will need to notify the school and return for another test at a specific time.	2	2	4
9. Extraction solution which comes with the lab test kit contains the following components: NA2HPO4 (disodium hydrogen phosphate), NaH2PO4 (sodium phosphate monobasic), NaCl (Sodium Chloride)	Potentially biohazardous after contact with used swab. The solution components on their own do not have any hazard labels associated with them, and the manufacturer states that there are no hazards anticipated under conditions of use as described in other product literature. This is the case for exposure to: eye, skin, inhalation, ingestion, chronic toxicity, reproductive and developmental	3	2	6	While the solution itself has no hazard labels associated with it, after contact with a used swab the solution is to be treated as a potential biohazard. PPE: nitrile gloves which meet the Regulation (EU) 2016/425 to be used at all times when handling the extraction solution. Safety glasses with side shields which are tested and approved under appropriate government standards to be worn at all times when handling the extraction solution. Impervious clothing (apron, gloves and visor) to be worn to protect the body from splashes or spillages. Environmental: do not let product enter drains. Spillages: wipe surfaces which the solution has been spilt on and dispose of cleaning material in line with the school's medical waste disposal procedures Do not use if the solution has expired Training to be provided in handling potentially biohazardous samples, chemicals and good lab practice. Adhere to guidelines in these training procedures to prevent improper handling. Follow procedures on the MSDS form provided by Innova to mitigate against inhalation, skin contact or ingestion of these chemicals	2	2	4

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	toxicity, carcinogenicity, and medical conditions aggravated by exposure.							
10 Occupational illness or injury	Illness or Injury	3	3	9	If any member of the testing team or subjects fall ill while at the Test Centre, or are injured, the standard school protocols would apply and any incident would be reported to DFE in line with requirements set out in the training. If a subject vomited (even if not unwell) then the area would be secured and in the first instance paper towels would be placed over any spillage. Disinfectant and detergent would be used to clean the area and towels placed in the medical waste.	3	3	9
11 Manual handling	Risk of injury handling heavy equipment/ furniture	3	3	9	The moving of any heavy furniture in the set-up of the testing centre, to be conducted by site staff following school standard safety protocols for manual handling.	2	2	4
12 Unauthorised access by members of the public or the school	Risk of infection, risk of disruption	3	4	12	The Testing Centre will be locked when not in use. When in use the entrances and exits will be managed. Only staff working in the Testing Centre i.e. Test Assistants, cleaners and site staff will have access. Only test subjects actually being tested at that time will have access. In the remote possibility that unauthorised access is achieved the Reception Assistants will be required to see a school ID badge and lanyard before admitting subjects to the Test Centre. This is further mitigated by a staff appointment booking system.	2	4	8
13 Uneven surfaces (floor protection in the Testing and Welfare areas)	Uneven surfaces could lead to trips or spillages	1	3	3	Floor protection not needed in Olivier Centre as floor is made of sealed natural stone tiles and is a modern building so the floor surface is level.	1	3	3
14 Use of shared equipment	Risk of transmission of virus	3	4	12	Any equipment within the Test Centre which is used by more than one person is to be sanitised between each use.	2	4	8

