# Berkswich CE COVID-19 Asthma Risk Assessment Record Form for XXXXXXXXXXXX (adapted from the Staffordshire County Council model)

**Section/Service/Team:** Berkswich CE Primary School **Assessor(s):** Class teacher neame here and Mrs P Johnston

**Description of Task/Activity/Area/Premises etc.** Delivering Education for an asthmatic child during the COVID-19 Pandemic from 1st June 2020

| What are the hazards? | Who might be harmed and how? | What are you already doing? List the control measures already in place *Example controls could include:* | What is the risk rating – H, M, L? See section 5 | What further action, if any, is necessary, if so what action is to be taken by whom and by when? *Examples could include:* | Action Completed State the date completed and sign. | What is the risk rating now - H, M, L? See section 5 |
|---|---|---|---|---|---|---|
| Returning to school with asthma and exposure to COVID-19<br><br>Expert doctors in England have identified specific medical conditions that, based on what we know about the virus so far, place someone at greatest risk of severe illness from COVID-19. The latest government guidance regarding those who are clinically extremely vulnerable may be found here: https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19#who-is-clinically-extremely-vulnerable | Child with severe asthma at greater risk of harm if coronavirus was contracted. | Clinically extremely vulnerable people may include the following people. Disease severity, history or treatment levels will also affect who is in this group.<br>People with severe respiratory conditions currently include severe asthma.<br><br>These children will have received a letter and need to be shielded at home. Pupils in the category will not attend school until government guidance changes. | H | This risk assessment will be reviewed in the light of government guidance updates. Parents and school will continue to communicate as government or medical guidance changes. | SJ/RJ/PJ<br><br>On-going | H |
| Returning to school with asthma and exposure to COVID-19<br><br>Government guidance advises that if a person has any of the following health conditions, they are clinically vulnerable, meaning they are at higher risk of severe illness from coronavirus. They are advised to stay at home as much as possible and, if they do go out, take particular care to minimise contact with others outside your household.<br>The guidance may be found: https://www.gov.uk/government/publications/staying-alert-and-safe-social-distancing/staying-alert-and-safe-social-distancing#clinically-vulnerable-people | Child with mild to moderate asthma at greater risk of harm if coronavirus was contracted. | Clinically vulnerable people are those who are: under 70 with an underlying health condition listed below (that is, anyone instructed to get a flu jab each year on medical grounds): chronic (long-term) mild to moderate respiratory diseases, such as asthma.<br><br>It is the parents'/carers' choice to return a child with mild to moderate respiratory diseases, such as asthma.<br><br>An individual risk assessment will be completed and followed for any child returning who is clinically vulnerable; the whole school and class risk assessments will also be adhered to (unless these put those with asthma at increased risk). Parents will view the risk assessments and will only send their child to school if they believe that the measures in place are sufficient. | H | Additional information regarding a child's severity of asthma will be sought by school to inform a child's individual asthma risk assessment.<br><br>This risk assessment will be reviewed in the light of government guidance updates. Parents and school will continue to communicate as government or medical guidance changes. | SJ/RJ/PJ<br><br>On-going<br><br>Parents/class teacher<br><br>On-going | M |

| What are the hazards? | Who might be harmed and how? | What are you already doing?<br>List the control measures already in place<br>***Example controls could include:*** | What is the risk rating – H, M, L?<br>See section 5 | What further action, if any, is necessary, if so what action is to be taken by whom and by when?<br>***Examples could include:*** | Action Completed<br>State the date completed | What is the risk rating now - H, M, L?<br>See section 5 |
|---|---|---|---|---|---|---|
| Risk of harm as a result of lack of staff knowledge | Child with asthma<br>Increased risk of asthma attack leading to harm. | Staff to be familiar with school asthma policy understand how this should be followed. PJ to support staff knowledge through training and advice tailored to individuals.<br>Teachers will draw on information and guidance from Asthma UK and the NHS, ensuring that this is understood generally and in respect to an individual.<br>♦ https://www.asthma.org.uk/about?gclid=EAIaIQobChMIyIv70b3Y6QIVW-ztCh23rAnYEAAYASAAEgKZyPD_BwE<br>♦ https://www.nhs.uk/conditions/asthma/<br>Risk assessments completed by class teacher—individualised to respond to risks identified by parents. The school maintains a confidential list of pupils who suffer from asthma, which is reviewed on an annual basis, Staff are informed of any pupil who suffers from asthma, and are updated whenever a pupil is newly identified as being asthmatic.<br><br>Staff know how to check whether a pupil is on the asthma register. The asthma register is easy for staff to access and is designed to allow a quick check of whether a pupil is recorded as having asthma.<br><br>Staff know where inhalers are kept and how to use them.<br><br>Staff have good knowledge of the agreed procedures in place, so all members of staff can summon the assistance of a designated member of staff for asthma management; however, staff will not delay in administering asthma treatment if it is needed immediately. | M | All staff updated on school asthma policy. The school provides whole-school education and training on asthma, including on:<br>• The risks associated with asthma.<br>• How to manage the risks and prevent the symptoms of asthma.<br>• The early warning symptoms of asthma and the signs of an asthma attack.<br>• How to manage asthma in pupils.<br>• What to do in the event of a severe asthma episode.<br>• Identified risks to individuals with particular reference to triggers which may be exacerbated in a return to school in June (e.g. stress).<br><br>Parents continue to update staff if any changes occur in their child's condition/health needs.<br>PJ is responsible for informing/training staff if another member of staff is called in to cover absence of the class teacher.<br><br>In an emergency, consent for an emergency inhaler to be administered will not be sought. If appropriate, the class teacher will contact the parent/carer to seek permission and a permission form will be completed in line with school policy.<br><br>PJ is responsible for ensuring that all break duty staff are aware of an individual's health needs.<br><br>In an emergency, rest of class sent outside with another 'bubble', to enable swift action by the class teacher to be taken with full focus on meeting the child's medical needs. Children will know how to do this safely as a result of an evacuation practice. | PJ<br>1/620<br>and on-going<br><br>1/6/20<br>Your initials<br><br>Parents/ class teacher<br>On-going<br><br>PJ/all staff<br>On-going | L |

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**Section/Service/Team:** Berkswich CE Primary School **Assessor(s):** Class teacher neame here and Mrs P Johnston

**Description of Task/Activity/Area/Premises etc.** Delivering Education for an asthmatic child during the COVID-19 Pandemic from 1st June 2020

| What are the hazards? | Who might be harmed and how? | What are you already doing? List the control measures already in place *Example controls could include:* | What is the risk rating – H, M, L? See section 5 | What further action, if any, is necessary, if so what action is to be taken by whom and by when? *Examples could include:* | Action Completed State the date completed and sign. | What is the risk rating now - H, M, L? See section 5 |
|---|---|---|---|---|---|---|
| Exposure to COVID-19<br><br>The virus is spread in minute water droplets that are expelled from the body through sneezing, coughing, talking and breathing.<br><br>The virus can be transferred to the hands and from there to surfaces. It can survive on surfaces for a period after transfer (depending on such things as the surface type, its moisture content and temperature). | Staff and child.<br><br>Transmission may occur when overseeing asthma medication<br><br>Insufficient medicine may lead to harm<br><br>Increased risk to harm through contracting Coronavirus. | Wash/sanitise hands before and after child takes medication (inhaler)<br><br>Wear disposable gloves, disposable apron, fluid resistant surgical mask and eye protection where there is a risk of respiratory droplets splashing into the eyes due to repeated coughing.<br><br>When performing CPR phone an ambulance and use compression only CPR until the ambulance arrives. If a decision is made to perform mouth-to-mouth ventilation, use a resuscitation face shield where available<br><br>Medicine such as asthma inhalers to be kept in the teacher's cupboard in the classroom / social bubble space, not in medical room<br><br>The school stores an emergency Ventolin inhaler. If an emergency school Ventolin inhaler has to be used, then the class teacher will thoroughly disinfect, following instructions on the cleaning product to ensure that it is safe for reuse.<br><br>Social distancing will continue to be encouraged in school (see school and class risk assessments). If a child is sent to school by a parent/carer it must be understood that social distancing is not always possible with children, particularly those in EYFS or Year One. | H | Class teacher instructed on the safe "donning and doffing" of PPE.<br><br>Maintain stocks of PPE. Where this is not available contact Local Resilience Forum/LA.<br><br>PPE Exchange can be used to help with finding a supplier.<br><br>https://www.ppeexchange.co.uk/<br><br>Class teacher to alert parents if asthma medication is running low or out of date. Parent to be called to replace immediately. Where possible, a new emergency school inhaler will be purchased to replace the one used. | PJ by 31/05/20<br><br>PJ/KH ongoing<br><br>Initials<br><br>Class teacher, parent and PJ<br><br>Parent | M |
| | **Resuscitation Council UK Statement:**<br><br>It is likely that a child having an out-of-hospital cardiac arrest will be known to you. We accept that doing rescue breaths will increase the risk of transmitting the COVID-19 virus, either to the rescuer or the child. However, this risk is small compared to the risk of taking no action as this will result in certain cardiac arrest and the death of the child. | | | | | |

| What are the hazards? | Who might be harmed and how? | What are you already doing?<br>List the control measures already in place<br>***Example controls could include:*** | What is the risk rating – H, M, L?<br>See section 5 | What further action, if any, is necessary, if so what action is to be taken by whom and by when?<br>***Examples could include:*** | Action Completed<br>State the date completed and sign. | What is the risk rating now - H, M, L?<br>See section 5 |
|---|---|---|---|---|---|---|
| Increased risk of asthma attacks in school time. | Child with asthma<br>Increased risk of asthma attacks being triggered<br>Increased risk of asthma attacks may occur during breaks, lunch times, learning activities and behaviour management. | Risk assessments completed by class teacher—individualised to respond to risks identified by parents. Add here any possible triggers and the way in which these are already addressed.<br>Staff to have mobile phones in classroom cupboards in the event of an emergency. PC Notification Alert system to be used for communication purposes. Updated<br>Safeguarding policy and Covid-19 Staff Conduct Appendix reflect use of mobiles in an emergency.<br>See also whole school and class risk assessment which will also state control actions.<br>Behaviour policy updated to include COVID-19 behaviour appendix | M | Add here the way in which further actions can be taken to control the risk.<br>ELSA-trained member of staff to support pupils where stress is experienced as a result of returning to school with the new Covid-19 –response arrangements, and where this may trigger an asthma attack. Well-being/pastoral support may be offered through advice to teachers or planned 1:1 sessions with the child.<br>School plan created with all staff knowing their designated outdoor area to support social distancing.<br>PJ is responsible for informing/training staff if another member of staff is called in to cover absence of the class teacher.<br>All staff to leave computers on at all times in the event of notification system being used. | 1/6/20<br>Your initials<br>TN<br>On-going<br>AW/JA<br>22/05/20<br>PJ<br>As required<br>All staff<br>On-going<br>22/05/20<br>RJ/SJ | L |

| What are the hazards? | Who might be harmed and how? | What are you already doing?<br>List the control measures already in place<br>***Example controls could include:*** | What is the risk rating – H, M, L?<br>See section 5 | What further action, if any, is necessary, if so what action is to be taken by whom and by when?<br>***Examples could include:*** | Action Completed<br>State the date completed | What is the risk rating now - H, M, L?<br>See section 5 |
|---|---|---|---|---|---|---|
| Risk of harm as a result of an asthma attack in school time.<br><br>Risk of harm as a result of reduced members of staff available in school | Child with asthma<br><br>Increased risk of asthma attack leading to harm. | Staff to be familiar with school asthma policy understand how this should be followed. Staff draw on additional sources of information to support an individual's needs (see page 2).<br>Risk assessments completed by class teacher—individualised to respond to risks identified by parents.<br>Staff to have mobile phones in classroom cupboards in the event of an emergency. PC Notification Alert system to be used for communication purposes. Updated<br>PJ to ensure that, on a daily basis, the inhaler and spacers are present and in working order, and the inhaler has a sufficient number of doses. Inhalers are regularly primed by PJ (e.g. spray two puffs) to avoid them becoming blocked over time.<br>Emergency school inhaler to be stored in the office so that it may be accessed immediately in an emergency.<br>Office staff will be familiar with all risk assessments and the asthma policy to enable them to provide extra support to class teacher as necessary.<br>In the event of an emergency, staff will take swift action and the use of medication/calling of emergency services will not be delayed whilst waiting for a member of staff such as a first aider. Teachers have every child's emergency contacts in the classroom. Parents/carers will be immediately contacted in the event of further guidance needed. This will not delay emergency actions above.<br>Safeguarding policy and Covid-19 Staff Conduct Appendix reflect use of mobiles in an emergency.<br>See also whole school and class risk assessment which will also state control actions.<br><br>Behaviour policy updated to include COVID-19 behaviour appendix | M | All staff updated on school asthma policy and receive training updates (see page 2).<br><br>Parents continue to update staff if any changes occur in their child's condition/health needs.<br><br>In an emergency, rest of class sent outside with another 'bubble', to enable swift action by the class teacher to be taken. Children will know how to do this safely as a result of an evacuation practice.<br><br>PJ is responsible for informing/training staff if another member of staff is called in to cover absence of the class teacher.<br><br>All staff to leave computers on at all times in the event of notification system being used. | 1/620<br>PJ<br><br>Parents/class teacher<br>On-going<br><br>PJ<br>As required<br><br>All staff<br>On-going<br><br>22/05/20<br>RJ/SJ | L |

4. Tick (**√**) if any of the identified hazards relate to any of the following specific themes:

| Hazardous Substance | Manual Handling | Display Screen Equip | Fire | Work Equip / Machinery | Stress | Individual Person such as Young Person New/ Expectant Mother or Service User |
|---|---|---|---|---|---|---|
| | | | | | ✓ | ✓ |

If any are ticked, a specific risk assessment form must be completed separately. For example a COSHH form must be completed if a hazardous substance is used.

5. **Risk Rating**

The risk rating is used to prioritise the action required. Deal with those hazards that are high risk first.

| Risk Rating | Description | Action Priority |
|---|---|---|
| High | Where harm is certain or near certain to occur and/or major injury or ill-health could result | Urgent action |
| Medium | Where harm is possible to occur and/or serious injury could result e.g. off work for over 3 days | Medium priority |
| Low | Where harm is unlikely or seldom to occur and/or minor injury could result e.g. cuts, bruises, strain | No action or low priority action |

6. **Assessment**

**Signature of Assessor(s):**

**Print Name:**

**Date Assessed:**

**Signature of Line Manager:**

**Print Name: Ms Jackson**

**Review Date:** September 2020

7. **Communication and Review**

This risk assessment should be communicated to all employees and relevant persons who may come into contact with the hazards being assessed. The assessment must be reviewed annually or following revised government or medical guidance, a significant change, accident or incident.