Reviewed and updated – March 2021

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| **INFECTIOUS DISEASES COVID-19** **Cleaners Risk Assessment March 2021**[Back to index](#bookmark=id.30j0zll) |
| **HAZARD** | **RISK GROUP** | **RISK** | **CONTROL MEASURES****(Describe the existing workplace precautions and****risk control systems in place)** | **Residual Risk Rating** **HIGH****MED****LOW** | **Are Existing Controls Adequate?** |
| **Yes** | **No\*** |
| Awareness of policies and procedures | Cleaners  | Inadequate information  | * All cleaners to be made aware of all relevant policies and procedures.
* Cleaning staff receive any necessary training that helps minimise the spread of infection, e.g. infection control training.
* The school keeps up-to-date with advice issued by, but not limited to, the following:
* DfE (Department for Education)
* NHS (National Health Service)
* Department for Health and Social Care
* PHE (Public Health England)
* Cleaning Staff are made aware of the school’s infection control procedures in relation to coronavirus via email or meetings and must contact the school as soon as possible if they believe they may have been exposed to coronavirus.
 | MED | **✔** |  |
| Poor hygiene practice | Cleaners | Ill Health  | * Posters are displayed throughout the school reminding Cleaners to wash their hands, e.g. before entering and leaving the school.
* Cleaners are encouraged to wash their hands with soap or alcohol-based sanitiser (that contains no less than 60% alcohol) and follow infection control procedures in accordance with the DfE and PHE’s guidance.
* Sufficient amounts of soap (or hand sanitiser where applicable), clean water and paper towels/hand dryers are supplied in all toilets and kitchen areas.
* Cleaners to carry out daily, thorough cleaning that follows national guidance and is compliant with current guidelines.
 | MED | **✔** |  |
| Spread of infection | Cleaners | Lack of infection control  | * Spillages of bodily fluids, e.g. respiratory and nasal discharges, are cleaned up immediately in line with guidance, using PPE at all times.
* Cleaning Staff do not return to school before the minimum recommended exclusion period (or the ‘self-isolation’ period) has passed, in line with national guidance.
 | MED | **✔** |  |
| Poor management of infectious diseases | Cleaners | Lack of infection control | * Everyone is instructed to monitor themselves and others and look out for similar symptoms if a staff member has been sent home with suspected coronavirus.
* Staff are vigilant and report concerns about their own, a colleague’s or other’s symptoms to the Headteacher or SLT as soon as possible.
* The school is consistent in its approach to the management of suspected and confirmed cases of coronavirus.
* Cleaning Staff inform the headteacher when they plan to return to work after having coronavirus.
* A nominated person monitors the cleaning standards of school cleaning contractors and discusses any additional measures required with regards to managing the spread of coronavirus.
 | MED | **✔** |  |
| Social Distancing  | Cleaners | Infection Control  | * Cleaning Staff under no circumstances must work in close proximity to each other.
* They must ensure they keep to social distancing at all times (1 meter plus)
* Cleaners should ideally be in separate areas of the school or in separate classrooms.
 | MED | **✔** |  |
| Lone Working  | Cleaners  | Incidents  | * The Cleaning Supervisor or Site Manager to ensure staff are safe and well and check on them on a regular basis to confirm. This ideally to be carried out via walking to their area of work and not by mobile phone a this could spread any contact of the virus to the mouth and face area.
* Cleaning Supervisor or Site Manager to abide by the 1 meter plus rule at all times.
* If there is only 1 cleaner in the school then it is advised they contact a member of school staff or a family member on a regular basis while on the school site.
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| Cleaning and Disinfection of areas where there has been **no suspected** cases of COVID -19 | Cleaners | Infection Control  | * Cleaning Staff are instructed to come into school in the morning prior to school starting or after school or a mixture of both.
* Cleaning Staff must ensure they have received the appropriate training in using the cleaning chemicals prior to starting cleaning regime.
* All staff must have sufficient PPE available and know how to use it correctly.
* Disposable gloves to be worn at all times (avoid touching the face and mouth when wearing gloves.
* Continue to use standard cleaning products (these usually are anti-bacterial).
* All hard surfaces to be cleaned on a regular basis, this will include
* All door handles
* All tables and chairs used by staff and pupils
* Toilet flushes and regular cleaning of toilets.
* Staff room areas
* Regular cleaning of surfaces will reduce the risk of spreading the virus.
* All used cloths thrown away to be double bagged and then placed in normal waste.
* Ensure Cleaning Staff wash hands with hot soapy water for at least 20 seconds or a hand sanitiser if not available (must be at least 60% alcohol based)
 | MED | **✔** |  |
| Cleaning and Disinfection of areas where there **has been a suspected** cases of COVID -19  | Cleaners  | Infection Control  | * The minimum PPE to be worn if there is a known case or someone with symptoms is disposable gloves and an apron. If there is visible containment with bodily fluids then additional PPE may be required to protect the cleaners nose, eyes and mouth. (Public Health England can advise on this)
* Public areas where a symptomatic individual has passed through and spent minimal time, such as corridors, but which are not visibly contaminated with body fluids can be cleaned thoroughly as normal.
* All surfaces that the symptomatic person has come into contact with must be cleaned and disinfected, including:
* Objects which are visibly contaminated with body fluids
* All potentially contaminated high-contact areas such as bathrooms, door handles, telephones, grab-rails in corridors and stairwells
* Use disposable cloths or paper roll and disposable mop heads, to clean all hard surfaces, floors, chairs, door handles and sanitary fittings, following one of the options below:
* Use either a combined detergent disinfectant solution at a dilution of 1,000 parts per million available chlorine

or* A household detergent followed by disinfection (1000 ppm av.cl.). Follow manufacturer’s instructions for dilution, application and contact times for all detergents and disinfectants

or* If an alternative disinfectant is used within the organisation, this should be checked and ensure that it is effective against enveloped viruses
* Avoid creating splashes and spray when cleaning.
* Any cloths and mop heads used must be disposed of and should be put into waste bags as outlined below.
* When items cannot be cleaned using detergents or laundered, for example, upholstered furniture and mattresses, steam cleaning should be used.
* Any items that are heavily contaminated with body fluids and cannot be cleaned by washing should be disposed of.
 | MED | **✔** |  |
| Laundry  | Cleaners | Infection Control  | * Wash items in accordance with the manufacturer’s instructions. Use the warmest water setting and dry items completely. Dirty laundry that has been in contact with an unwell person can be washed with other people’s items.
* Do not shake dirty laundry, this minimises the possibility of dispersing virus through the air.
* Clean and disinfect anything used for transporting laundry with your usual products, in line with the cleaning guidance above.
 | MED | **✔** |  |
| Waste  | Cleaners | Infection Control  | * Waste from possible cases and cleaning of areas where possible cases have been (including disposable cloths and tissues):
* Should be put in a plastic rubbish bag and tied when full.
* The plastic bag should then be placed in a second bin bag and tied.
* It should be put in a suitable and secure place and marked for storage until the individual’s test results are known.
* Waste should be stored safely and kept away from children. You should not put your waste in communal waste areas until negative test results are known or the waste has been stored for at least 72 hours.
* if the individual tests negative, this can be put in with the normal waste
* if the individual tests positive, then store it for at least 72 hours and put in with the normal waste
* If storage for at least 72 hours is not appropriate, arrange for collection as a Category B infectious waste either by your local waste collection authority if they currently collect your waste or otherwise by a specialist clinical waste contractor. They will supply you with orange clinical waste bags for you to place your bags into so the waste can be sent for appropriate treatment.
 | MED | **✔** |  |