

RISK ASSESSMENT – SPECIFIC ACTIVITY/SITUATION

RISK ASSESSMENT REFERENCE NO:

28/5/2020

WORKPLACE ACTIVITY:	Safe use of Alcohol-based hand gel in primary schools	DATE:	28/5/2020
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PERSONS AT RISK- AFFECTED BY ACTIVITY:	Pupils & Staff	NUMBER	Up to 60
ANY VULNERABLE PERSONS AFFECTED BY ACTIVITY:		NUMBER	TBC

SETTING THE SCENE:

Children aged from 4 years to 11 years in school. Hand sanitizer stations located in offices, staffrooms and in classrooms. Pupils and staff to use Alcohol-based hand gel as part of hand hygiene routine to minimise the risk of Coronavirus spreading in the school. Young children may not recognise that hand washing (soap and water) is more protective in hygiene than using sanitizer. Location of sanitizer is selected where hand wash facilities may not be available (i.e. in the classroom), in areas where pupils/staff may be eating (staffroom, classrooms and hall) and at times when pupils may put their hands to their face without proper thought

Alcohol based hand gel is only to be used in schools during the current Coronavirus pandemic. All hand stations will either be removed once the pandemic is over, or lotion will be replaced with non-alcohol-based gel.

POTENTIAL HAZARDS		Assessment of Risk		
REF.		Low	Med	High
1	Risk of young children swallowing/inhaling alcohol-based hand gel due to nature of cognitive understanding.			X
2	Risk of slips within floors if pumps or overuse and residue is not immediately cleaned – such as on hard floor internal surfaces.	X		
3.	Risk of skin irritation causing dry, cracking, peeling or weeping skin to some users. Note: people with chronic, inflammatory skin conditions (eczema) could react immediately irritation			X
4	Risk of allergic reaction for those with severe allergy leading to anaphylactic shock	X		

EXISTING CONTROL MEASURES

- Sanitiser hand stations will be placed in classrooms, offices and staffroom. Pupils and staff will be reminded to wash their hands with hot soap and water at regular intervals – using hand sanitiser when that is not appropriate.
 - Pupils will be instructed to use one small blob only and massage around hand, fingers, thumb for approximately 20 seconds or until completely dry.
 - Notices will be displayed alongside all hand gel stations.
 - Pupils will be informed not to put their fingers in their mouths until hand gel is dry on their hands. They are also informed not to rub the gel on parts of the face.
 - First aiders will be informed of remedial action to take if a pupil eats the solution (provide cold water to drink) and if lotion gets in to eyes (blink or in severe cases, swill eye with water).
 - School will have a supply of individual eye wash solutions, for use if children splash the lotion in eyes.
 - Staff members will monitor usage and ensure that a replacement bottle is installed once the existing bottle is empty. Replacement bottles are stored in a secure area
 - Staff must report via the incident reporting system any adverse incidents/near misses or concerns involving pupils who may have eaten gel or splashed it in their eyes.
- Staff members will monitor hand gel stations to ensure that pupils do not over-use gel lotion.
 - Paper towels will be stored in close proximity to hand gel stations, so that spillages can be cleared up quickly.

- Inform pupils to let teachers know if they feel a stinging when sanitizer is applied. Do not let children with existing cuts/abrasions use sanitizer as it will sting.
- Anyone suffering from eczma should wash their hands regularly with warm water and soap and then moisturize immediately afterwards (good hand washing will be fine). Check suitability of moisturizers with parents – permit pupils/staff to use medicated moisturisers if required.
- People who do not have a current eczema condition, but may have mild forms of dermatitis, can normally apply sanitizer immediately after washing hands, and then apply a moisturiser to reduce dry, flaky, itchy skin.
- If increased usage of product is causing reaction to a majority of people, change the sanitizer for one containing emollients (moisturizing agents).

4. In extreme cases where people have low immune system, or low intolerance resulting to numerous allergies, the use of alcohol-based sanitizer may result in anaphylactic shock. For any pupils or staff falling into this category – check that the use of alcohol based sanitizer will not put them at risk.

INITIAL ASSESSMENT OF OVERALL RISK	LOW		MEDIUM	X	HIGH	
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RISK RATING = SEVERITY x LIKELIHOOD		
Rating	SEVERITY of injury/disease	LIKELIHOOD of occurrence
HIGH	Fatality; major injury or illness causing long term disability	Certain or near certain to occur
MEDIUM	Injury or illness causing short term disability	Reasonably likely to occur
LOW	Other injury or illness	Unlikely to occur

ADDITIONAL CONTROL MEASURES - (IF APPLICABLE)	PERSON RESPONSIBLE FOR IMPLEMENTATION	COMPLETION DATE
Risk assessment communicated to all staff via email	EH	28 th May 2020

RESIDUAL ASSESSMENT OF OVERALL RISK	LOW		MEDIUM	X	HIGH	
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Note: Re-assessment required if overall residual risk is High

ADDITIONAL INFORMATION:

(Notes, comments, further details, outline procedures, safe systems of work, standards, drawings, etc.)

Note:

Alcohol is known to be a skin irritant and very drying for skin, especially sensitive, damaged or fragile skin such as eczema. Eczema is an inflammatory skin condition causing itch, dryness and sensitivity

Risk Assessment Circulation List (tick box)			
Employees		Management	Contractors
Other – Specify:			
Signature of responsible person:		Date:	
Assessor:	Emma Hickling	Signature:	ERHickling
Date Assessed:	22 nd May 2020	Review Date:	30 th June 2020 or before if adverse symptoms arise

RISK ASSESSMENT REVIEW - COMMENTS	
Date:	
Reason for Review	
Reviewed By:	Signature:

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