

COVID-19 MAYFLOWER SCHOOL RISK ASSESSMENT STEP 4 SEPTEMBER 2021

Education settings must be able to achieve the following controls as defined by the Department of Education. The Risk Assessment must be reviewed by Head Teachers point by point and where actions are implemented, they must be reworded if necessary, to show how the controls have been applied, add/amend for your school environment. The risk assessment should be reviewed at SLT and with the Governing Body and shared with all staff. The risk rating for each identified hazard and overall risk assessment must be considered and decided/changed to Low, Medium, or High by the school on how the school proceeds with the control measures and the wider opening of the school.

The current Government guidance for detailed review to assist in your risk assessment links: <https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/schools-coronavirus-covid-19-operational-guidance> Separate guidance is available for:

- [Covid-19-early-years-and-childcare-closures](#) [special-schools-and-other-specialist-settings](#)
- [Covid-19-maintaining-further-education-provision](#)

Description of Activity	COVID 19 Secure School Risk Assessment Version 7.0	Review Dates	
Location	Mayflower Primary School		
Completed by	Dee Bleach		
Date of Assessment	17 August 2021		

What are the hazards?	Who & how might someone be harmed?	What are you currently doing to control risks?	Risk Rating L / M / H	What else do you need to do (if applicable)?	Action by who / when?	Date Completed
<p><i>CV19 infection</i></p> <p>1. Poor hand and respiratory hygiene</p>	<p>Employees, agency, Pupils, visitors</p> <p>Poor hand and respiratory hygiene causing severe infection/disease, sickness, and death</p>	<p>1. Hand and Respiratory Hygiene</p> <ul style="list-style-type: none"> • The school continues with the strict regime of regular thorough hand washing • This is encourage at the start of the day and at set times during the day, especially before and after breaks/lunch/play • Raising the profile of the importance and how to wash hands thoroughly, for at least 	M	Demonstrations and reminders to children at the start of the year.	All staff	2 nd September ongoing

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		<p>20 seconds with running water and soap supported by alcohol hand sanitiser.</p> <p>Ensuring all parts of the hand are covered</p> <ul style="list-style-type: none"> • Promoting the importance of not only washing hands, but the need to thoroughly dry hands • Toilets having sufficient supply of paper towels or hand driers, and regular cleaning and emptying of waste • Appropriate hand wash stations, alcohol hand sanitiser, managed and monitored to ensure adequate replenishment <p>2. Respiratory hygiene</p> <ul style="list-style-type: none"> • We continue with the promotion of the ‘catch it, bin it, kill it’ approach • We continue to only use the normal PPE already used for certain activities re: Most staff in schools will not require PPE beyond what they would normally need for their work. The guidance on the use of PPE in education, childcare and children’s social care settings provides more information on the use of PPE for COVID-19. Link to PPE 		<p>Inform the office if there are any issues.</p> <p>2.Posters are available</p>	<p>Staff</p> <p>Dee</p>	
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<p><i>CV19 infection</i></p> <p><i>2.Poor cleaning standards</i></p>	<p>Employees, agency, Pupils, visitors</p> <p>Poor cleaning standards attributing to contact transmission causing severe infection/disease, sickness, and death</p>	<p>1. Maintain appropriate cleaning regimes</p> <ul style="list-style-type: none"> • We continue with a robust appropriate cleaning regime that applies the key infection control measures which involves; <ul style="list-style-type: none"> a) Cleaning – physical process of using detergent, this removes germs – bacteria and viruses and lowers numbers of germs on a surface although not necessarily killing them b) Disinfection – a process of killing germs on a surface they touch, this should be on a clean surface unless a combined product. We ensure that the contact time is followed. This is the time it takes for disinfectant to be effective. c) Sanitiser – Sanitisers have a combined cleaning and disinfecting properties, they need to be used twice, firstly to clean and then to disinfect d) Deep clean – A more thorough cleaning and disinfection regime. The school are prepared to complete these following outbreaks or particular area 	<p>M</p>	<p>1.Ade is our onsite additional cleaner</p> <p>c. When sanitisers need refilling put on table in staffroom Carl will refill.</p>	<p>Carl</p> <p>Staff</p>	
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		<p>concern to help break the cycle of infection</p> <p>2. Established cleaning schedule</p> <ul style="list-style-type: none"> • We continue with our infection control cleaning regime to include at least twice daily cleaning that is detailed within a cleaning schedule that covers; <ul style="list-style-type: none"> a) Enhanced touch point cleaning and disinfection, this includes all touch points that are fixed to the premises inside and out. b) Cleaning frequency is at least twice a day, supported by frequent hand touch area cleaning, and local area cleaning by staff of own areas c) Equipment and resources are disinfected based on use and risk/high use areas/items, this includes play equipment, staff equipment such as kettles, microwaves, work stations, lunch areas, changing rooms d) Higher risk areas/pupils, who may find it difficult to maintain personal hygiene 		All staff to support with this.	Staff	
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		<p>or where we cannot supervise personal hygiene, such as toilet areas are included in our cleaning regime</p> <p>e) Teaching staff are provided with cleaning products, cleaning wipes</p> <p>3. Monitoring cleaning</p> <ul style="list-style-type: none"> We continue to monitor and manage our cleaning regime to ensure it is being completed Fogging/spraying is only considered as an addition to the normal cleaning regime, and we would check with our competent health and safety advisor the type and frequency of product and application required House-keeping inspections of cleaning stations, cupboards are completed. Link to covid-19-decontamination-in-non-healthcare-settings 		Any concerns please talk to Carl/Amena	Carl/Amena	
<p><i>CV19 infection</i></p> <p>2. Poor ventilation</p>	Employees, agency, Pupils, visitors	<p>1. Keep occupied spaces well ventilated</p> <ul style="list-style-type: none"> A ventilation assessment has been completed that includes all areas of the school with any identified control 	M	Ensure windows are open and blast rooms at break and lunchtime	Staff	

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	<p>Poor ventilation transmission causing severe infection/disease, sickness, and death</p>	<p>measures specific for identified areas of concern re rooms/areas lacking in ventilation</p> <ul style="list-style-type: none"> • We open windows and/or increase/operate air flow building management systems when the school buildings are first opened • CO2 monitors will be used in our ventilation review to assist in our risk control measures • We have completed assessments with our ventilation contractor on our mechanical ventilation systems to ensure that only fresh outside air is being circulated – and that only single rooms only have recirculated air supported by outdoor air supply • All ventilation systems have been serviced and maintained as per statutory/manufacture requirements • We open doors from outdoor to internal corridor and room doors to create a good air flow, fire doors are not propped open, only opened with dorgards or mag-holders 				
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		<p>so that they would release in the event of fire (fire alarm)</p> <ul style="list-style-type: none"> As the winter months approach we continue to balance the need for ventilation and temperature control following HSE guidance, this includes opening windows just enough to provide constant background ventilation and then opened fully during breaks and when the room is not being used to purge the air in the space. Opening higher level windows in preference to lower level to reduce draughts We continue to use air conditioning, turning off recirculated air and switching to fresh air supply 		Carl to oversee		
<p><i>CV19 infection</i></p> <p><i>4.Poor management of cv19 confirmed cases</i></p>	<p>Employees, agency, Pupils, visitors</p> <p>Poor management of CV19 symptoms, confirmed cases, attributing to transmission causing</p>	<ol style="list-style-type: none"> Following public health advice on testing, self-isolation and managing cases of COVID-19 <ul style="list-style-type: none"> Pupils/staff/others will follow the PH advice on when to self-isolate, link covid-19/self-isolation-and-treatment/when-to-self-isolate-and-what-to-do/ 	M	If any further guidance is needed please ask SLT	Adam	

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	<p>severe infection/disease, sickness, and death</p>	<ul style="list-style-type: none"> • Anyone with cv19 symptoms must not come into school, we promote this instruction and information on CV19 symptoms with staff, contractors, visitors, pupils and parents • Anyone with a positive test or have been told to quarantine must not come into school • The school must be notified of any cv19 symptoms, and confirmed test results as soon as possible • Anyone in school that develops these symptoms however mild, will be sent home and must follow public health advice, avoiding public transport wherever possible and be collected by a member of their family or household (re: pupil with symptoms) • A designated room to locate suspected cv19 individual with protocol in place, good ventilation, good space separation, whilst still being looked after, if close contact 				
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		<p>required we use face mask FP2, full visor, and disposable gloves</p> <ul style="list-style-type: none"> • Staff must book a test on the day on which the symptoms are reported • Designated staff have been trained in the control and management of those with identified cv19 symptoms and have a supply of PPE • The school refuse pupil entry to school if we believe they present an infection control risk such as having symptoms but their parents still insisting to send into school • We will support remote work and education for those isolating and able to complete work/studies, link remote-education • We follow the education recovery where necessary link education-recovery-support <p>2. When to self-isolate</p> <ul style="list-style-type: none"> • Self-isolate straight away and get a PCR test (a test that is sent to the lab) on GOV.UK as soon as possible if you have any 				
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		<p>of these 3 symptoms of COVID-19, even if they are mild:</p> <ul style="list-style-type: none"> • a high temperature • a new, continuous cough • a loss or change to your sense of smell or taste <p>You should also self-isolate straight away if:</p> <ul style="list-style-type: none"> • you've tested positive for COVID-19 – this means you have the virus • someone you live with has symptoms or tested positive (unless you are not required to self-isolate – check below if this applies to you) • you've been told to self-isolate following contact with someone who tested positive – find out what to do if you're told to self-isolate by NHS Test and Trace or the NHS COVID-19 app <p>Information: You may need to quarantine when you arrive in England from abroad. Check the quarantine rules when entering England on GOV.UK</p>				
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		<p>3. When you do not need to self- isolate</p> <ul style="list-style-type: none"> • If someone you live with has symptoms of COVID-19, or has tested positive for COVID-19, you will not need to self-isolate if any of the following apply: • you're fully vaccinated – this means 14 days have passed since your final dose of a COVID-19 vaccine given by the NHS • you're under 18 years, 6 months old • you're taking part or have taken part in a COVID-19 vaccine trial • you're not able to get vaccinated for medical reasons <p>Even if you do not have symptoms, you should still:</p> <ul style="list-style-type: none"> • get a PCR test on GOV.UK to check if you have COVID-19 • follow advice on how to avoid catching and spreading COVID-19 • consider limiting contact with people who are at higher risk from COVID-19 <p>4. Asymptomatic testing</p>		<p>4.LFT available from the office</p>		
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		<ul style="list-style-type: none"> • Staff should continue to complete twice weekly testing until informed otherwise <p>5. Confirmatory PCR tests</p> <ul style="list-style-type: none"> • Staff and pupils with a positive LFD test should self-isolate in line with the stay at home guidance, link stay-at-home-guidance and should get a free PCR test. Link to test https://www.gov.uk/get-coronavirus-test • Whilst awaiting PCR test, you must continue to self-isolate • If the PCR test is taken within 2 days of the positive lateral flow test, and is negative, it overrides the self-test LFD test and the pupil can return to school as long as the individual doesn't have any cv19 symptoms • Additional info on PCR test kits, link covid-19-home-test-kits-for-schools 				
<p><i>CV19 infection</i></p> <p><i>5. CEV children</i></p>	<p>Employees, agency, Pupils, visitors</p> <p>Individual medical conditions may be at</p>	<ul style="list-style-type: none"> • All pupils including CEV should attend school, with the only exceptions of those who are specifically instructed not to by their clinician or specialist 	M/H	We do not currently have any clinically vulnerable children	Heba	

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	<p>higher risk of infection causing severe infection/disease, sickness, and death</p>	<ul style="list-style-type: none"> We continue to follow the guidance on supporting pupils with medical needs, and have specific risk assessments and pupil profiles in place. Link supporting-pupils-at-school-with-medical-conditions--3 We continue to complete our infection control cleaning regime and hand/respiratory control measures, this also includes identified specific areas and equipment that may require an increased level of cleaning, such as hoists 				
<p><i>CV19 infection</i></p> <p>6.Contractors</p>	<p>Employees, agency, Pupils, visitors</p> <p>Poor contractor infection control standards causing severe infection/disease, sickness, and death</p>	<ul style="list-style-type: none"> Contractors are approved and managed by the school We request their risk assessments as part of our normal contractor health and safety management, and review their cv19 control measures We try and isolate and separate their work away from staff and pupils We manage and monitor all contractors on site 	L/M	All visitors are reminded of Covid protocol	Carl/Office team	

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		<ul style="list-style-type: none"> • Unsafe work including CV19 infection control will be stopped immediately and reviewed with SLT 				
<p><i>CV19 infection</i></p> <p><i>7.School workforce</i></p>	<p>Employees, agency, Pupils, visitors</p> <p>Poor cleaning standards attributing to contact transmission causing severe infection/disease, sickness, and death</p>	<p>1. CEV staff</p> <ul style="list-style-type: none"> • CEV staff are advised to follow as a minimum the same advice and guidance as everyone else. • We continue to ensure good adequate ventilation, good hygiene and cleaning, are applied strictly. • We continue to support individuals/groups by ensuring: <ul style="list-style-type: none"> a) Stressing the importance of individual and wider workforce engagement, buy-in and cooperation to ensure controls are applied stringently b) Individual discussions with their managers around their particular concerns c) Discuss the risk management measures we have put in place to 	M	<p>All visitors are reminded of Covid protocol</p> <p>New staffroom has air conditioning. Staggered breaks and lunchtimes mean fewer staff are on break at the same time.</p> <p>Fridge and tea and coffee facilities are also available in the Beakhead (new PPA room)</p> <p>Classrooms and the Upper deck can be used at break and lunchtimes</p> <p>Staff can continue to wash own cutlery and crockery -lockers are available -see Amena for a key</p>	Office team	

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		<p>minimise transmission to keep them, and others, safe</p> <p>d) We explain the controls you will put/already have in place to protect them and other workers</p> <p>2. Pregnant Staff</p> <ul style="list-style-type: none"> • We complete risk assessments for new or expectant mothers • We recognise that some pregnant workers will be at greater risk of severe illness from coronavirus and this forms part of our individual risk assessment • If we cannot put the necessary control measures in place, such as adjustments to the job or working from home, we would review if we need to suspend the pregnant worker on paid leave. This is in line with normal requirements under regulation 16(3) of the Management of Health and Safety at Work Regulations 1999. <p>3. Vaccination</p> <ul style="list-style-type: none"> • We encourage vaccine up take as a recognised major control measure, and 				
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		any staff that are unsure or need further information should speak to the senior leadership staff				
<p><i>CV19 infection</i></p> <p>8. Pupil wellbeing concerns</p>	<p>Employees, agency, Pupils, visitors</p> <p>Lack of pupil support leading to anxiety and stress, ill health</p>	<ul style="list-style-type: none"> We monitor our pupils through the network of teaching and support staff We raise up concerns in a timely manner We have close links to the parents/carers We follow the wellbeing support link /mental-health-and-wellbeing-support-in-schools 	M	Any concerns to be passed on to SLT		
<p>CV19 infection</p> <p>9. School meals, catering</p>	<p>Employees, agency, Pupils, visitors</p> <p>Use of contractors serving food and interacting in an unsafe manner causing severe infection/disease and death</p>	<ul style="list-style-type: none"> We continue to provide free school meals We continue to liaise with the kitchen contract company We continue to request the enhanced cleaning of the dining hall and kitchen We request and review the contract catering cv19 risk assessment We recognise that face coverings and face visors are no longer required under law 	L/M	Any concerns to be passed on to Amena		
<p><i>CV19 infection</i></p> <p>10. Educational visits</p>	<p>Employees, agency, Pupils, visitors</p>	<ul style="list-style-type: none"> The school continue to use the local parks and local visits with the knowledge that 	L/M	Local visits only until restrictions change.		

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	Poor off site infection control standards causing severe infection/disease, sickness, and death	<p>outside visits and activities are safer than indoor occupied busy areas</p> <ul style="list-style-type: none"> • Hand and respiratory control are in place • Ventilation is reviewed at all times to ensure there is appropriate air movement and taking action where necessary to move or increase ventilation by opening windows and doors 				
<p><i>CV19 infection</i></p> <p><i>11. Wrap around care after school clubs, breakfast club</i></p>	<p>Employees, agency, Pupils, visitors</p> <p>Poor infection control standards causing severe infection/disease, sickness, and death</p>	<ul style="list-style-type: none"> • Our standard CV19 control covers this area • Cleaning and ventilation of areas continues to be well managed • Outbreak management risk assessment will be followed 	L/M			
<p>CV19 infection</p> <p><i>12. Water fountains causing easy transmission of cv19</i></p>	<p>Employees, agency, Pupils, visitors</p> <p>Causing severe infection/disease</p>	<ul style="list-style-type: none"> • Switch the water fountains off and provide water via bottles, or having the pupils use their own personal bottle • Having a designated area for pupils to store or/have access to water • If have water coolers provide disposable cups 	L/M	All children have new water bottles. These must be washed regularly.	Class TAs	

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		<ul style="list-style-type: none"> • Ensure the water fountains are maintain in shut down mode following service/maintenance requirements • Ensure the schools legionella contractor manage monitor and advise the school on any actions required to manage any legionella risks 			Carl	
<p><i>CV19 infection</i></p> <p>13. Poor communication</p>	<p>Employees, agency, Pupils, visitors</p> <p>Poor communication causing severe infection/disease, sickness, and death</p>	<ul style="list-style-type: none"> • We continue to communicate with staff, contractors, pupils, visitors, public health, and parents • Designated staff are responsible for updating cv19 information • Staff emails, website, newsletters continue to be used to update and share relevant information 	M	<p>Any information will be shared at staff briefing. Any concerns staff may have please talk to Phase leaders and SLT.</p> <p>Updates will be shared with families via ping and via our weekly newsletter</p>	staff	
<p><i>CV19 infection</i></p> <p>14. Not being prepared for changes, not having a contingency plan</p>	<p>Employees, agency, Pupils, visitors</p> <p>Lack of planning causing severe infection/disease, sickness, and death</p>	<ul style="list-style-type: none"> • We are prepared to step up and down when infection rates and outbreak change the risk levels and actions required Link contingency framework also called outbreak management plans • We have completed an outbreak plan with risk assessment that covers the need to be ready to reinstate face covers, or reducing 	M	<p>We will keep our current timetables as this has been beneficial for all children.</p>	SLT	

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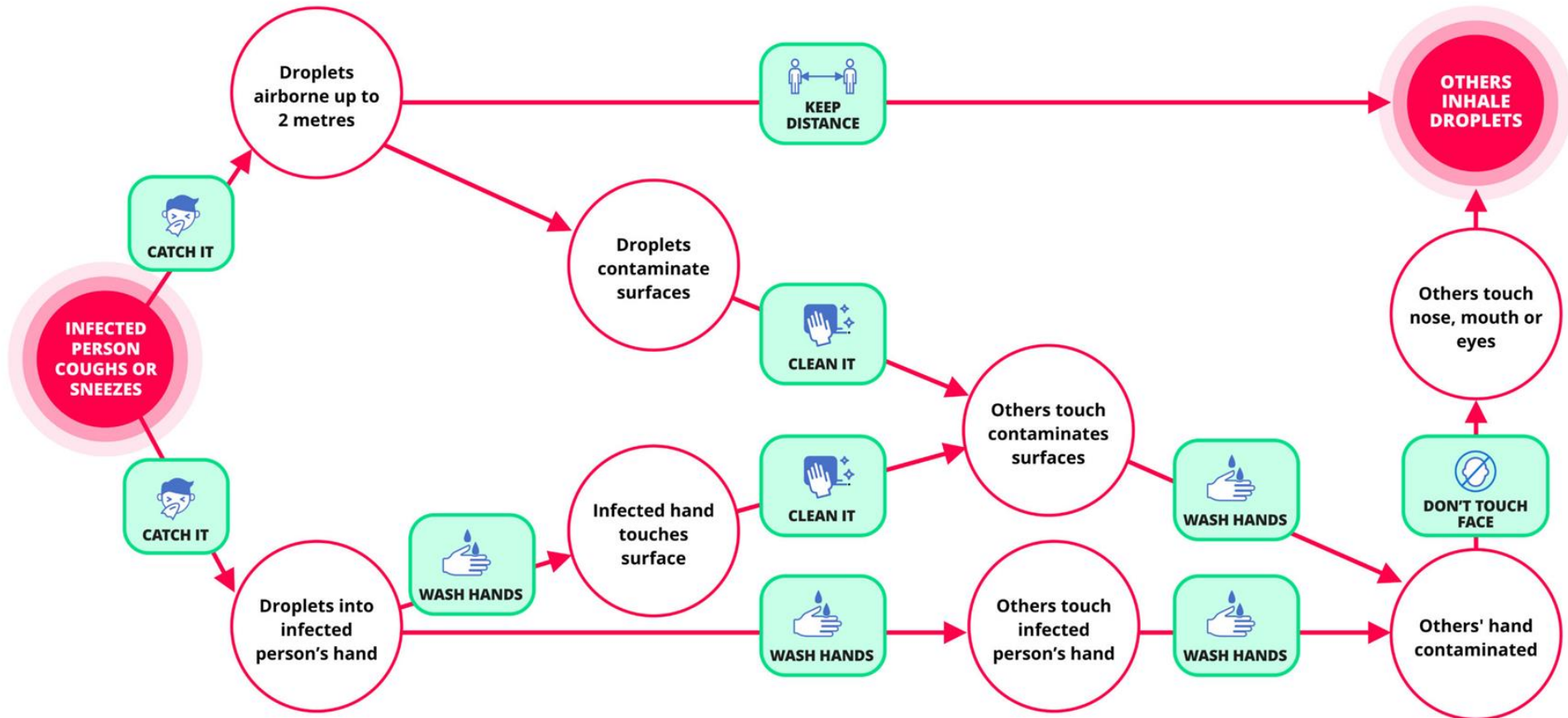
<i>or outbreak risk assessment/plan</i>		mixing, following the guidance and instruction from public health				
<i>CV19 infection</i> <i>15. No assessment of potential occupational disease/transmission caused by work</i>	Employees, agency, Pupils, visitors Causing severe infection/disease, sickness, and death	<ul style="list-style-type: none"> An assessment of exposure to be completed for each confirmed case, the local PH team to be advised Enter details within the accident recording reporting forms such as Evolve or Accident medical tracker or paper based accident form, or LA online accident system, following your employer accident reporting procedures Inform LA with full details of confirmed covid-19 case without delay 	M			
<i>CV19 infection</i> <i>16. Increased chemical risk to pupils and others</i>	Employees, agency, Pupils, visitors Use of sanitisers and cleaning products being located around the school, classrooms – pupils accidentally ingesting the	<ul style="list-style-type: none"> The location of cleaning products to be in a secure area away from pupils Safety data sheets and coshh risk assessments in place Staff trained in the safe use and storage of substances All containers must have their labels installed 	M	Any questions/concerns please report to Carl/Amena	Carl/Amena	

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	chemical or having a reaction to the substance	<ul style="list-style-type: none"> The coshh risk assessment must take consideration of volume of storage and location, to ensure there is no increased fire risk. This means no storage next to heat or ignition sources 				
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Overall Residual Risk for Activity (L / M / H):		
Level of Risk	Suggested Action	
LOW	Control measures are adequate but continue to monitor and review; ensure that they remain satisfactory and appropriate	
MEDIUM	Control measures need to be introduced within a specified time period; continue to monitor and review	
HIGH	Unless control measures can be immediately introduced to reduce the risk so far as is reasonably practicable, the task or activity should be suspended	

How COVID is transmitted



Summary of key infection control measures

1. Regular testing – and isolation

Asymptomatic testing will help to identify anyone who does not have symptoms but does have the virus so they can take appropriate action and isolate to prevent passing the virus onto others. Staff and pupils with a positive lateral flow test (LFD) will need to get a PCR test and self-isolate.

Anyone who has symptoms of cv19 should obtain a PCR test and follow the stay at home guidance.

2. Maximising fresh air

Adequate ventilation reduces how much virus is in the air by helping to reduce the risk from aerosol transmission – when someone breathes in small particles/aerosols that can be in the air after a person with the virus has been in the same area. Therefore, everyone should:

- Work in well ventilated rooms/areas – making sure the indoor spaces have a good supply of fresh air
- Work outside if possible

3. Universal hygiene measures

These measures both increase personal protection and also protects others;

- Thoroughly wash hands with soap and water often following the [NHS guidance](#). Use alcohol based hand sanitiser if soap and water not available. In particular wash hands when entering building, after using toilet, before eating or drinking, after sneezing/coughing, after using shared items or equipment, after moving around the premises if having touched surfaces such as hand rails, door panels, and before you leave for the day
- Keeping your hands below shoulder level as much as possible trying to keep them away from touching your face at all times
- Catch it, bin it, kill it – covering the mouth and nose with a tissue or sleeve when sneezing and put the tissue in the bin straight away, always washing your hands afterwards
- Minimise touching hand contact surfaces with your hands as far as is reasonable and safe to do so

4. Cleaning the space and things around you

Enhanced cleaning and disinfection arrangements should continue. Where possible staff should support these measures by disinfecting touch points such as their own classrooms and shared equipment, even if cleaning isn't part of their normal role.

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5. Respectful space

Whilst school bubbles and social distancing has been removed, any measures that minimise the number, the proximity, and duration of person to person contact reduces the risk of transmission. In addition, it is important to consider that increased mixing will lead to increased cases and therefore staff absence. You should follow the current guidance of not using bubbles, but it is advisable to consider within your risk assessments the following:

- Staff areas, staff rooms, keeping staff apart where possible
- Meeting outdoors, or in larger well ventilated rooms
- Continue to virtual meetings as this just eliminates the potential of cv19 transmission
- How to create better space in offices, rooms, by moving furniture or rearranging work stations, and creating a large space separation of staff

6. PPE

Having the correct PPE for the correct situation, with staff training in place, this may include close contact/confirmed cv10 symptoms