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| **Appendix 1: Residential Specific Risk Assessment**  |
| **Department: Residential** | **Service:** *Education* | **School:** *Barndale House School* |
| **Name of Person Completing Form: Katrina Green Job Title: Head of Care Date: 11/9/20****Lead Governor: Dr Christopher Benjamin** | **Review Date:****Every Friday** |

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| **Hazard**  | **Risk** | **Initial Rating****L, M, H** | **Existing Control Measures** | **Final Rating****L, M, H** | **Additional Action Required** **(action by whom and completion date – use separate Action Plan if necessary)** |
| Preparing pupils/parents for accessing provision |  |  |  |  |  |
| Pupils accessing and leaving residential provision |  |  |  |  |  |
| Pupils bedrooms-unpacking-bedding |  |  |  |  |  |
| Preparing and serving meals/food |  |  |  |  |  |
| Onsite activities |  |  |  |  |  |
| Offsite activities |  |  |  |  |  |
| Staff showing symptoms |  |  |  |  |  |
| Pupils showing symptoms |  |  |  |  |  |
| Use of toys, equipment, communal area |  |  |  |  |  |
| Hygiene Activities |  |  |  |  |  |
| Intimate care procedures |  |  |  |  |  |
| Staff supervising through the night |  |  |  |  |  |
| Staff PPE and Covid Practice  |  |  |  |  |  |