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Coronavirus (COVID-19)
Implementing protective measures within FCAT

COVID-19 Risk Assessment

Academy	GARSTANG COMMUNITY ACADEMY
Activity / Procedure	Full opening of schools - managing the risk and rate of transmission of coronavirus (COVID-19) and variants Inc Lockdown, Closure, KWV and staff.
Assessment date	13th January 2021
Review date	To be reviewed and updated frequently in light of any updates to existing government guidance or any new guidance.

Identified groups at risk	
Employees	**YES**
Children	**YES**
Visitors	**YES**
Contractors	**YES**

This risk assessment does not supersede any legal obligations relating to health and safety, employment or equalities.

This risk assessment is completed based on the guidance and information available on the 13th January 2021 and contains further controls due to Lockdown announced on the 4th January 2021. This Risk assessment will be updated to reflect any changes in published guidance.

Guidance for full opening: schools - GOV.UK (Updated 7th January 2021)
Restricting attendance during the national lockdown: schools
Guidance on shielding and protecting people who are clinically extremely vulnerable from COVID-19
(Updated 7th January 2021)
Tier 4: Stay at Home - GOV.UK (Updated 6th January 2021)
Mass asymptomatic testing: schools and colleges - GOV.UK (Updated 7th January 2021)
Safe working in education, childcare and children's social care (14th December 2020)

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System of controls

This is the set of actions schools must take. They are grouped into 'prevention' and 'response to any infection' and are outlined in more detail within the guidance: Guidance for full opening: schools - GOV.UK

Prevention

1) Minimise contact with individuals who are unwell by ensuring that those who have coronavirus (COVID-19) symptoms, or who have someone in their household who does, do not attend school.

2) Where recommended, the use of face coverings in schools.

3) Clean hands thoroughly more often than usual.

4) Ensure good respiratory hygiene by promoting the 'catch it, bin it, kill it' approach.

5) Introduce enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents.

6) Minimise contact between individuals and maintain social distancing wherever possible.

7) Where necessary, wear appropriate personal protective equipment (PPE).

8) Always keeping occupied spaces well ventilated.

Numbers 1 to 5, and number 8, must be in place in all schools, all the time.

Number 6 must be properly considered and schools must put in place measures that suit their particular circumstances.

Number 7 applies in specific circumstances.

Response to any infection

9) Engage with the NHS Test and Trace process.

10) Manage confirmed cases of coronavirus (COVID-19) amongst the school community.

11) Contain any outbreak by following local health protection team advice.

Numbers 9 to 11 must be followed in every case where they are relevant.

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PROTECTIVE MEASURES AND CONTROLS

This outlines the key protective measures the academy will take to deliver the essential controls identified 30th December 2020

Further controls are set out in this risk assessment.

No.	Control	Actions
1	**Minimise contact with individuals who are unwell by ensuring that those who have coronavirus (COVID-19) symptoms, or who have someone in their household who does, do not attend school.**	Ensuring that pupils, staff and other adults do not come into the school if they have coronavirus (COVID-19) symptoms or have tested positive in at least the last 10 days and ensuring anyone developing those symptoms during the school day is sent home, are essential actions to reduce the risk in schools and further drive down transmission of coronavirus (COVID-19).
		All schools must follow this process and ensure all staff are aware of it. If anyone in the school becomes unwell with a new and persistent cough or a high temperature, or has a loss of or change in, their normal sense of taste or smell (anosmia), they must be sent home and advised to follow guidance for households with possible or confirmed coronavirus (COVID-19) infection, which sets out that they should self-isolate for at least 10 days and should arrange to have a test to see if they have coronavirus (COVID-19).
		Other members of their household (including any siblings) should self-isolate for 10 days from the day after the individual tested positive.
		If a child is awaiting collection, they should be moved, if possible, to a room where they can be isolated behind a closed door, depending on the age and needs of the child, with appropriate adult supervision if required. Ideally, a window should be opened for ventilation. If it is not possible to isolate them, move them to an area which is at least 2 metres away from other people.
		If they need to go to the bathroom while waiting to be collected, they should use a separate bathroom if possible. The bathroom must be cleaned and disinfected using standard cleaning products before being used by anyone else.
		PPE must be worn by staff caring for the child while they await collection if a distance of 2 metres cannot be maintained (such as for a very young child or a child with complex needs). More information on PPE use can be found in the safe working in education, childcare and children's social care settings, including the use of personal protective equipment (PPE) guidance.
		If a child in a boarding school shows symptoms, they should initially self-isolate in their boarding house (or the accommodation they stay in while at school). Most children will benefit from self-isolating in their boarding house so that their usual support can continue. Others will benefit more from self-isolating in their home.
		As is usual practice, in an emergency, call 999 if someone is seriously ill or injured or their life is at risk. Anyone with coronavirus (COVID-19) symptoms should not otherwise visit the GP, pharmacy, urgent care centre or a hospital.
		Any member of staff who has provided close contact care to someone with

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		symptoms, even while wearing PPE, and all other members of staff or pupils who have been in close contact with that person with symptoms, even if wearing a face covering, do not need to go home to self-isolate unless • the symptomatic person subsequently tests positive • they develop symptoms themselves (in which case, they should arrange to have a test) • they are requested to do so by NHS Test and Trace or the PHE advice service (or PHE local health protection team if escalated) Everyone must wash their hands thoroughly for 20 seconds with soap and running water or use hand sanitiser after any contact with someone who is unwell. The area around the person with symptoms must be cleaned after they have left to reduce the risk of passing the infection on to other people. See the COVID-19: cleaning of non-healthcare settings guidance. Public Health England has good evidence that routinely taking the temperature of pupils is not recommended as this is an unreliable method for identifying coronavirus (COVID19). 2. Where recommended, use of face coverings in schools Under national lockdown, in settings where pupils in year 7 and above are educat
2	**Where recommended, use of face coverings in schools**	Under national lockdown, in settings where pupils in year 7 and above are educated, face coverings should be worn by adults and pupils when moving around the premises, outside of classrooms, such as in corridors and communal areas where social distancing cannot easily be maintained. This does not apply to younger children in primary schools and in early years settings. Schools will need to communicate quickly and clearly to staff, parents and pupils that the new arrangements require the use of face coverings in certain circumstances. Some individuals are exempt from wearing face coverings. This applies to those who: • cannot put on, wear or remove a face covering because of a physical or mental illness or impairment or disability • speak to or provide assistance to someone who relies on lip reading, clear sound or facial expression to communicate The same exemptions will apply in education settings, and we would expect teachers and other staff to be sensitive to those needs. However, where anybody is struggling to access a face covering, or where they are unable to use their face covering due to having forgotten it, or it having become soiled or unsafe, education settings should take steps to have a small contingency supply available to meet such needs. No one should be excluded from education on the grounds that they are not wearing a face covering. Schools should have a process for managing face coverings in school. This process should be communicated clearly to pupils and staff. Safe wearing of face coverings requires cleaning of hands before and after touching – including to remove or put them on – and the safe storage of them in individual, sealable plastic bags between use. Where a face covering becomes damp, it should not be worn and the face covering should be replaced carefully. Pupils must be instructed not to touch the front of their face covering during use or when removing it and they must dispose of temporary face coverings in a 'black bag' waste bin (not recycling bin) or place reusable face coverings in a plastic bag they can take home with them, and then wash their hands again.

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3	**Clean hands thoroughly more often than usual.**	● All students and staff will sanitise hands on entering and leaving the academy and before and after each lesson. Sanitiser dispensers will be located at the entrance of the academy and in each classroom. ● Build routines into school culture, supported by behaviour expectations, and helping ensure younger children, and those with complex needs, understand the need to follow them ● All students and staff will be reminded to wash hands before and after visiting the toilet, coughing/sneezing and having a meal. ● All students will receive regular reminders on effective hand washing routines. ● The Estates Team will schedule checks during each day on stocks of hand sanitiser, soap and paper towels to check there is adequate supply. (Cleaning schedules and rotas). ● Coronavirus (COVID-19) is an easy virus to remove when it is on skin. This remains true for the new variant. This can be done with soap and running water or hand sanitiser. Schools must ensure that pupils clean their hands regularly, including when they arrive at school, when they return from breaks, when they change rooms and before and after eating. Regular and thorough hand cleaning is going to be needed for the foreseeable future. Points to consider and implement: • whether the school has enough hand washing or hand sanitiser 'stations' available so that all pupils and staff can clean their hands regularly • supervision of hand sanitiser use given risks around ingestion. Small children and pupils with complex needs should continue to be helped to clean their hands properly. Skin friendly skin cleaning wipes can be used as an alternative • building these routines into school culture, supported by behaviour expectations, and helping ensure younger children, and those with complex needs, understand the need to follow them
4	**Ensure good respiratory hygiene by promoting the 'catch it, bin it, kill it' approach.**	● The academy will deploy posters that remind pupils and staff about the importance of catching a cough or sneeze in tissue, disposing of the tissue and washing hands and by washbasins/toilets and at entry/exit points. ● All classrooms, social spaces and corridors will have adequate bins. ● There will be an enhanced schedule for bins to be emptied and disinfected.
5	**Introduce enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as disinfectants / detergents**	● All classrooms will be provided with disinfectant wipes for teachers and staff to use on the keyboard, screen and mouse before and after each lesson. ● Such wipes will also be provided to each specialist room for use by students to wipe down their chair, workspace and specialist equipment (in addition to the disinfection carried out by cleaners). ● All specialist rooms will be disinfected by cleaners between lessons (where students from a different bubble are using the room). ● All clearers will be trained and regularly reminded of the protocols for disinfecting surfaces. ● There will be an enhanced cleaning schedule throughout the day. ● (Cleaning Schedules , Rotas and Cleaning Risk Assessment).
6	**Minimise contact between individuals and maintain social distancing wherever possible.**	Minimising contacts and mixing between people reduces transmission of coronavirus (COVID-19). This is important in all contexts and schools must consider how to implement this. Schools must do everything possible to minimise contacts and mixing while delivering a broad and balanced curriculum. The overarching principle to apply is reducing the number of contacts between children and staff. This can be achieved through keeping groups separate (in 'bubbles') and through maintaining the distance between individuals. Whilst schools are attended by vulnerable children and the children of critical workers only, where

possible schools should keep group sizes small. For children old enough, they should also be supported to maintain distance and not touch staff where possible. Any additional space available where there are lower numbers of pupils attending, should be used wherever possible to maximise the distance between pupils and between staff and other people.

The points to consider and implement are set out in the following sections.

a. How to group children

Consistent groups reduce the risk of transmission by limiting the number of pupils and staff in contact with each other to only those within the group. They have been used to date in recognition that children, especially the youngest children, cannot socially distance from staff or from each other and this provides an additional protective measure. Maintaining distinct groups or 'bubbles' that do not mix makes it quicker and easier in the event of a positive case to identify those who may need to self-isolate and keep that number as small as possible.

Each group should be kept apart from other groups where possible and older children should be encouraged to keep their distance within groups. Schools with the capability to do it should take steps to limit interaction and the sharing of rooms and social spaces between groups as much as possible. We recognise that younger children will not be able to maintain social distancing and it is acceptable for them not to distance within their group.

Both the approaches of separating groups and maintaining distance are not 'all-or-nothing' options and will still bring benefits even if implemented partially. Siblings may also be in different groups. Endeavouring to keep these groups at least partially separate 16 and minimising contacts between children will still offer public health benefits as it reduces the network of possible direct transmission.

All teachers and other staff can operate across different groups. Where staff need to move between groups, they should try and keep their distance from pupils and other staff as much as they can, ideally 2 metres from other adults. Again, we recognise this is not likely to be possible with younger children and teachers in primary schools can still work across groups if that is needed.

b. Measures within the classroom

Maintaining a distance between people while inside and reducing the amount of time they are in face to face contact lowers the risk of transmission. There is strong public health advice that staff in secondary schools maintain distance from their pupils, staying at the front of the class, and away from their colleagues where possible. Ideally, adults should maintain 2 metre distance from each other and from children. We know that this is not always possible, particularly when working with younger children, but if adults can do this when circumstances allow that will help. In particular, they should avoid close face to face contact and minimise time spent within 1 metre of anyone. Similarly, it will not be possible when working with many pupils who have complex needs or who need close contact care. These pupils' educational and care support should be provided as normal.

For children old enough, they should also be supported to maintain distance and not touch staff and their peers where possible. This will not be possible for the youngest children and some children with complex needs and it is not feasible in some schools where space does not allow. Schools doing this where they can, and even doing this some of the time, will help.

When staff or children cannot maintain distancing, particularly with younger children in primary schools, the risk can also be reduced by keeping pupils in smaller

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groups.

Schools should make small adaptations to the classroom to support distancing where possible. That should include seating pupils side by side and facing forwards, rather than face to face or side on, and might include moving unnecessary furniture out of classrooms to make more space.

c. Measures elsewhere

Groups should be kept apart, meaning that schools should avoid gatherings such as assemblies or collective worship with more than one group.

Groups should be kept apart and movement around the school site kept to a minimum. While passing briefly in the corridor or playground is low risk, schools should avoid 17 creating busy corridors, entrances and exits. Schools should also consider staggered break times and lunch times (and time for cleaning surfaces in the dining hall between groups).

Schools should also plan how shared staff spaces are set up and used to help staff to distance from each other. Use of staff rooms should be minimised, although staff must still have a break of a reasonable length during the day.

d. Other considerations Some pupils with Special Educational Needs and Disabilities (SEND) (whether with education, health and care plans or on SEN support) will continue to need specific help with the changes to routines they are experiencing, so teachers and special educational needs coordinators should plan to meet these needs, for example using social stories.

Schools, local authorities, health professionals, regional schools commissioners and other services should work together to ensure that children with medical conditions are fully supported, including through the use of individual healthcare plans, so that they may receive an education in line with their peers. In some cases, the pupil's medical needs will mean this is not possible, and educational support will require flexibility. Our guidance on supporting pupils at school with medical conditions remains in place.

Supply teachers, peripatetic teachers and other temporary staff can move between schools. They should ensure they minimise contact and maintain as much distance as possible from other staff. They should also participate in schools' rapid testing programmes where these have been established. Specialists, therapists, clinicians and other support staff for pupils with SEND should provide interventions as usual.

Schools should consider how to manage other visitors to the site, such as contractors, and ensure that the risks associated with managing contractors, visitors, catering staff and deliveries, as well as cleaning staff on site who may be working throughout the school and across different groups, are addressed. This will require close cooperation between both schools and the other relevant employers. Schools should have discussions with key contractors about the school's control measures and ways of working. Schools should ensure site guidance on physical distancing and hygiene is explained to visitors on or before arrival. Where visits can happen outside of school hours, they should. A record should be kept of all visitors with sufficient detail to support contact tracing if required by NHS Test and Trace.

Where a child routinely attends more than one setting on a part time basis, for example, because they are dual registered at a mainstream school and an alternative provision setting or special school, schools should work through the system of controls 18 collaboratively, enabling them to address any risks identified and allowing them to jointly deliver a broad and balanced curriculum for the child.

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		Equipment and resources are integral to education in schools. For individual and very frequently used equipment, such as pencils and pens, it is recommended that staff and pupils have their own items that are not shared. Classroom based resources, such as books and games, can be used and shared within the group; these should be cleaned regularly, along with all frequently touched surfaces. Resources that are shared between groups, such as sports, art and science equipment should be cleaned frequently and meticulously and always between groups, or rotated to allow them to be left unused and out of reach for a period of 48 hours (72 hours for plastics) between use by different bubbles. Outdoor playground equipment should be more frequently cleaned. This would also apply to resources used inside and outside by wraparound care providers. It is still recommended that pupils limit the amount of equipment they bring into school each day, to essentials such as lunch boxes, hats, coats, books, stationery and mobile phones. Bags are allowed. Pupils and teachers can take books and other shared resources home, although unnecessary sharing should be avoided, especially where this does not contribute to pupil education and development. Similar rules on hand cleaning, cleaning of the resources and rotation should apply to these resources. ● https://www.gov.uk/government/publications/actions-for-schools-during-the-coronavirus-outbreak/guidance-for-full-opening-sc
7	**Where necessary, wear appropriate personal protective equipment (PPE)**	● The academy will maintain stocks of PPE and deploy them around the academy. Safe working in education, childcare and children's social care
8	**Keeping occupied spaces well ventilated**	Once the school is in operation, it is important to ensure it is well ventilated and a comfortable teaching environment is maintained. This can be achieved by a variety of measures including: • mechanical ventilation systems – these should be adjusted to increase the ventilation rate wherever possible, and checked to confirm that normal operation meets current guidance (if possible, systems should be adjusted to full fresh air or, if not, then systems should be operated as normal as long as they are within a single room and supplemented by an outdoor air supply) • natural ventilation – opening windows (in cooler weather windows should be opened just enough to provide constant background ventilation, and opened more fully during breaks to purge the air in the space). Opening internal doors can also assist with creating a throughput of air • natural ventilation – if necessary external opening doors may also be used (as long as they are not fire doors and where safe to do so) Further advice on this can be found in Health and Safety Executive (HSE) guidance on air conditioning and ventilation during the coronavirus outbreak and CIBSE coronavirus (COVID-19) advice. To balance the need for increased ventilation while maintaining a comfortable temperature, the following measures should also be used as appropriate: • opening high level windows in preference to low level to reduce draughts • increasing the ventilation while spaces are unoccupied (for examples, between classes, during break and lunch, when a room is unused) • providing flexibility to allow additional, suitable indoor clothing. • rearranging furniture where possible to avoid direct drafts Heating should be used as necessary to ensure comfort levels are maintained particularly in occupied spaces.

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9	**Engage with the NHS Test and Trace process**	All school staff and pupils can access The NHS Test and Trace testing system, used to test symptomatic people (using a 'polymerase chain reaction (PCR) test'). If a pupil who has attended school, or a staff member, receives a positive PCR test having developed symptoms, schools should follow the guidance below. Secondary schools participating in the rapid asymptomatic testing programme should follow the Mass asymptomatic testing: schools and colleges guidance for handling any positive tests as a result of that programme.
		Schools must ensure they understand the NHS Test and Trace process. Schools must also ensure that staff members and parents/carers understand that they will need to be ready and willing to:
		book a PCR test if they or their child are displaying symptoms. The main symptoms are a high temperature, a new continuous cough and/or a loss or change to your sense of smell or taste. Staff and pupils must not come into the school if they have symptoms and must be sent home to self-isolate if they develop them in school. All children can be tested if they have symptoms, including children under 5, but children aged 11 and under will need to be helped by their parents or carers if using a home testing kit
		• provide details of anyone they or their child have been in close contact with if they were to test positive for coronavirus (COVID-19) or if asked by NHS Test and Trace
		• self-isolate if they have been in close contact with someone who tests positive for coronavirus (COVID-19), or if anyone in their household develops symptoms of coronavirus (COVID-19), or if they are required to do so having recently travelled from certain other countries. Secondary schools participating in the rapid aymptomatic testing should follow the Mass asymptomatic testing: schools and colleges guidance for handling any positive tests as a result of that programme. Where consent is not given for a secondary-age pupil who has been a close contact of the positive case to participate in asymptomatic testing, the pupil must self-isolate.
		Anyone who displays symptoms of coronavirus (COVID-19) can and should get a PCR test. PCR tests can be booked online through the NHS testing and tracing for coronavirus website, or ordered by telephone via NHS 119 for those without access to the internet. Essential workers, which includes anyone involved in education or childcare, have priority access to PCR testing. The government will ensure that it is as easy as possible to get a PCR test through a wide range of routes that are locally accessible, fast and convenient. We will release more details on new PCR testing avenues as and when they become available and will work with schools so they understand the quickest and easiest way to get a PCR test.
		The PCR test kits sent to schools are provided to be used in the exceptional circumstance that an individual becomes symptomatic and schools believe they may have barriers to accessing testing elsewhere. It is for schools to determine how to prioritise the distribution of their test kits in order to minimise the impact of the virus on the education of their pupils.
		These kits can be given directly to staff or parents and carers collecting a child who has developed symptoms at school. In particular, these test kits will also help ensure that 21 symptomatic staff can also get a test and if they test negative, can return to work as soon as they no longer have symptoms of coronavirus (COVID-19).
		Schools should ask parents of children attending school and staff to inform them immediately of the results of any tests taken outside school and follow this guidance.
		NHS COVID-19 app The app is available to anyone aged 16 or over to download if

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<td>they choose. For some young people, particularly some with special educational needs and disabilities (SEND), parents will need to decide whether or not their use of the app is appropriate. This will mean that some students in year 11, and the majority of students in years 12 and above will be eligible to use the app and benefit from its features. Staff members will also be able to use the app. The guidance for schools and further education colleges in England is intended to provide information to senior leaders in education settings about the app and how it works, and to set out guidance for its use within schools in England.

Rapid testing in schools and colleges Secondary schools participating in the rapid asymptomatic testing programme should follow the

Mass asymptomatic testing: schools and colleges - GOV.UK</td>
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<td>Manage confirmed cases of coronavirus (COVID-19) amongst the school community</td>
<td>Schools must take swift action when they become aware that someone who has attended has tested positive for coronavirus (COVID-19) having developed symptoms and taken a PCR test outside of school. Secondary schools participating in the rapid asymptomatic testing programme should follow the Mass asymptomatic testing: schools and colleges guidance to ensure contacts of the positive case are tested.

Primary schools and any secondary schools not participating in the rapid asymptomatic testing programme must follow the advice below.

If schools would like support on the action they should take to respond to a positive case, they can contact the dedicated advice service introduced by Public Health England (PHE) and delivered by the NHS Business Services Authority. This can be reached by calling the DfE Helpline on 0800 046 8687 and selecting option 1 for advice on the action to take in response to a positive case.

Schools will be put through to a team of advisers who will inform them of what action is needed based on the latest public health advice The advice service (or PHE local health protection team if escalated) will work with schools to guide them through the actions they need to take. Based on their advice, schools must send home those people who have been in close contact with the person who has tested positive, advising them to self-isolate for 10 days from the day after contact with the individual tested positive.

Close contact means:
direct close contacts - face to face contact with an infected individual for any length of time, within 1 metre, including being coughed on, a face to face conversation, or unprotected physical contact (skin-to-skin)

• proximity contacts - extended close contact (within 1 to 2 metres for more than 15 minutes) with an infected individual

• travelling in a small vehicle, like a car, with an infected person

The advice service (or PHE local health protection team if escalated) will provide advice on who must be sent home. To support them in doing so, we recommend schools keep a record of pupils and staff in each group, and any close contact that</td>
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takes places between children and staff in different groups (see section 6 of the system of control for more on grouping pupils). This should be a proportionate recording process. Schools do not need to ask pupils to record everyone they have spent time with each day or ask staff to keep definitive records in a way that is overly burdensome

Where individuals who are self-isolating and are within our definition of vulnerable, it is important that schools put systems in place to keep in contact with them, offer pastoral support, and check they are able to access education support.

A template letter will be provided to schools, on the advice of the health protection team, to send to parents and staff if needed. Schools must not share the names or details of people with coronavirus (COVID-19) unless essential to protect others. Household members of those contacts who are sent home do not need to self-isolate themselves unless the child, young person or staff member who is self-isolating subsequently develops symptoms. If someone in a class or group that has been asked to self-isolate develops symptoms themselves within the 10-days from the day after contact with the individual tested positive should follow guidance for households with possible or confirmed coronavirus (COVID-19) infection. They should get a test, and:
• if someone who is self-isolating because they have been in close contact with someone who has tested positive for coronavirus (COVID-19) starts to feel unwell and gets a test for coronavirus themselves, and the test delivers a negative result, they must remain in isolation for the remainder of the 10-day isolation period. This is because they could still develop coronavirus (COVID-19) within the remaining days.
• if the test result is positive, they should inform their setting immediately, and should isolate for at least 10 days from the onset of their symptoms (which could mean the self-isolation ends before or after the original 10-day isolation period). Their household should self-isolate for at least 10 days from when the symptomatic person first had symptoms, following guidance for households with possible or confirmed coronavirus (COVID-19) infection

Schools should not request evidence of negative test results or other medical evidence before admitting children or welcoming them back after a period of self-isolation.

In the majority of cases, schools and parents will be in agreement that a child with symptoms should not attend school, given the potential risk to others. In the event that a parent or guardian insists on a child attending school, schools can take the decision to refuse the child if in their reasonable judgement it is necessary to protect their pupils and staff from possible infection with coronavirus (COVID-19). Any such decision would need to be carefully considered in light of all the circumstances and the current public health advice.

Further guidance is available on testing and tracing for coronavirus (COVID-19). This process will look different for secondary schools once they have commenced lateral flow testing of close contacts of confirmed cases. The advice will be update shortly to reflect this

| 11 | **Contain any outbreak by following local health protection team advice** | Secondary schools participating in the rapid asymptomatic testing programme should refer to the guidance for asymptomatic testing in schools and colleges to ensure contacts of the positive case are tested. Primary schools and any secondary schools not participating in the rapid asymptomatic testing programme must follow the advice below.

Next, if schools have two or more confirmed cases within 10 days, or an overall rise in sickness absence where coronavirus (COVID-19) is suspected, they may have an outbreak and must continue to work with their local health protection team who will be able to advise if additional action is required. In some cases, health protection |

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teams may recommend that a larger number of other pupils self-isolate at home as a precautionary measure – perhaps the whole site or year group.

If schools are implementing controls from this list, addressing the risks they have identified and therefore reducing transmission risks, whole school closure based on cases within the school will not generally be necessary, and should not be considered except on the advice of health protection teams.

In consultation with the local Director of Public Health, where an outbreak in a school is confirmed, a mobile testing unit may be dispatched to test others who may have been in contact with the person who has tested positive. Testing will first focus on the person's class, followed by their year group, then the whole school if necessary, in line with routine public health outbreak control practice.

Further Controls ref Government announcement on 4th January 2020 Lockdown

Issue:	Infection transmission rates are high due to the new Covid variant. Further operational controls / actions / required for key worker / vulnerable students and staff during lockdown		
Existing level of risk			
HIGH	MEDIUM	LOW	NEGLIGIBLE
How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls		

- Follow Government guidance on further control measures.(When available).
- Key worker and vulnerable student classes to be kept at a minimum due to higher transmission rates. Specific max numbers of KWV and staff will depend on the size and type of classrooms & workplaces.
- Social distancing to be maintained at 2 meters where possible.
- When staff or children cannot maintain distance, particularly with younger children in primary schools, the pupils will be kept in smaller, class-sized groups where possible.
- Wearing of masks. Please see FCAT Mask Policy (below). This position on the wearing of masks will be under constant review both at Trust level and nationally.
- Some individuals are exempt from wearing face coverings who: cannot put on, wear or remove a face covering because of a physical or mental illness or impairment or disability.
- Rooms must be well ventilated (with outside air) with extra heaters provided if necessary.
- Cleaning & hygiene protocols must be reviewed.(Updated cleaning protocols from site management).
- All operational guidance and controls are contained within this RA.
- All symptoms of Control are being followed.**Guidance for full opening: schools - GOV.UK**

Remaining level of risk	Consider level of risk following use of control measures		
HIGH	MEDIUM	LOW	NEGLIGIBLE

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FCAT Protocols for the use of face coverings

General Principles and Protocol   13.1.2021

Protocol for use during Tier 5 restrictions

- This protocol is based on the most recent Government guidance and risk assessments and has been updated in line with the new national lockdown and in particular the new, more transmissible COVID-19 variant.
- This guidance applies to secondary aged students and to all FCAT staff.
- All face coverings worn in school must be of a plain colour.
- The Fylde Coast Academy Trust will require the use of face coverings to be worn by all secondary students whilst **indoors** with the following limited exceptions: -
  - o Canteens (whilst eating only)
  - o When engaging in speech and language interventions at which point a screen **must** be in place between the student and the colleague providing the intervention.
  - o Face coverings may be removed briefly if a student is responding verbally to a question from a teacher during a lesson. They must be replaced as soon as the question is asked/answered.
- The Fylde Coast Academy Trust will not require the use of face coverings to be worn by primary students, although some may wish to wear them.

- The Fylde Coast Academy Trust will require the use of face coverings to be worn by all staff in areas **indoors**. The following additional guidelines apply: -
  - o Face coverings do not need to be worn in staff rooms or other spaces whilst eating
  - o In a classroom when delivering a lesson all adults must wear a face covering **or** a visor **or** teach from behind a perspex screen. If staff are concerned with students seeing their mouths (particularly important for speech and language/phonics) a visor should be used. In primary only settings a decision will be made on this on Thursday 14   January, by primary heads recognising that national guidance is different for primaries and secondaries.
  - o Whilst working in an office environment alone, face coverings do not need to be worn but should be replaced when another colleague comes into the room.
  - o Staff working in shared offices should wear face coverings unless they are working behind a perspex screen which protects them and others.
  - o Staff working in the main reception should wear face coverings unless they are working alone
  - o When in meetings with parents, other staff or visitors staff should wear face coverings unless protective screens are in place.

    With all of the above, we need to show some common sense, for example two staff working in a very large office or classroom would not need to wear face coverings if they are socially distanced much greater than 2 metres.

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- Schools must remind all students and staff about the importance of hygiene matters relating to the use of face coverings and the guidance regarding safe removal of face coverings and hand washing. Students and staff should be encouraged to have personal supplies of hand sanitizer.
- Schools will have a stock of disposable face coverings.
- Some staff and children will be exempt, they are not required by law to have any evidence or proof of this and the word of a child, parent or a member of staff will be accepted, however, parents will be required to discuss this with their Head of Year. Staff should discuss this with their Headteacher and it will be reflected in Individual risk assessments.

FCAT has moved further on this than most employers and is seeking to support staff and students in the best way possible, whilst recognising guidance is different in primary and secondary settings.

The protocol is constantly under review, but will particularly be reviewed if Tier 5 restrictions are lifted.

Issue:	Mass asymptomatic testing		
Existing level of risk			
HIGH	MEDIUM	LOW	NEGLIGIBLE
How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls		
Follow Government guidance on further control measures. Mass asymptomatic testing: schools and colleges - GOV.UK See Risk Assessment below			
Remaining level of risk	Consider level of risk following use of control measures		
HIGH	MEDIUM	LOW	NEGLIGIBLE

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MASS LATERAL FLOW TESTING
Garstang Community Academy Risk Assessment

Why is this document needed: Public Health England and the Health and Safety Executive require this documentation to ensure end to end health, safety and infection control risks for mass lateral flow testing are identified, pre-assessed, managed and monitored regularly by the site owners and testing operators

Assessment Date		05/01/21	Lead Assessor		Contract		Assessment Number	
Activity / Task								
Description of task / process / environment being assessed		General and clinical activities on the asymptomatic testing site at **Garstang Community Academy**						
Activities Involved		Traversing the site on foot Testing Academy staff and students				**Location – Main Hall**		
Who Might be affected		Employee ✓	Client ✓	Contractor ✓		Visitor ✓	Service User ✓	

Hazard Identification and evaluation							
No	Hazards	Associated risks	Current Control/ Mitigation Measures	Risk Evaluation (post measures)			Additional control needed? Action No
				Probability	Severity	Risk	
1	Contact between subjects increasing the risk of transmission of COVID19	Transmission of the virus leading to ill health or potential death	• **Asymptomatic:** All subjects are to be advised in advance not to attend if they have any symptoms of COVID 19, or live with someone who is showing symptoms of COVID 19 (including a fever and/or new persistent cough) or if they have returned within 14 days from a part of the world affected by the virus or have been in close contact with someone who is displaying symptoms. • **Face masks:** Prominent signage reminding attending subjects of the above to be displayed at	1	4	4	

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			the entrance to the building. • Face coverings/masks to be worn by subjects at all times whilst on the premises except for brief lowering at time of swabbing. • Requirement to wear face covering/mask to be reminded to all subjects in advance at time of test booking. • Compliance with wearing of face covering/mask of all subjects to be visually checked on arrival by reception / security staff. • Compliance with wearing of face covering/mask of all subjects to be visually checked through building by queue managers and all other staff. • **Hand hygiene:** All subjects to use hand sanitiser provided on arrival & adherence to this enforced by reception staff. • **Social distancing:** Two metre social distancing to be maintained between subjects with measured floor markings in place to ensure compliance in addition to verbal reminders if necessary from reception, queue management & sampling staff. • A one-way flow of subjects through the building is to be initiated and maintained at all times. Compliance with this is to be ensured by queue management staff. • **Cleaning:** Regular cleaning of the site including wipe down of all potential touchpoints in accordance with PHE guidance. • Limited clutter-chairs only on request; no physical handing of documents to subjects except barcodes and PCR test kits for first 200 subjects				
2	Contact between subjects and staff increasing the risk of transmission of COVID19 : Welcome & registration	Transmission of the virus leading to ill health or potential death	• *As above plus* • maintain social distancing of 2m at all times • ensure correct wearing of PPE and change over of contaminated PPE whenever necessary	1	4	4	
3	Contact between subject and sampler increasing the transmission of COVID19: Sample taking	Transmission of the virus leading to ill health or potential death	• *As above*	1	4	4	

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4	Contact between sample and test centre runner increasing the transmission of COVID19: Sample transport	Transmission of the virus leading to ill health or potential death	• _As above_	1	4	4	
5	Contact between samples and sample testers increasing the transmission of COVID19: Sample processing & analysis.	Transmission of the virus leading to ill health or potential death	• _As above_	1	4	4	
6	Contact between samples and sample testers increasing the transmission of COVID19: Sample disposal and waste disposal	Transmission of the virus leading to ill health or potential death	• _As above_	1	4	4	
7	Incorrect result communication	Wrong samples or miscoding of results	• 2 identical barcodes are provided to subject at check in • The subject registers their details to a unique ID barcode before conducting the test • Barcodes are attached by trained staff at the sample collection bay Barcodes are checked for congruence at the analysis station 1 and applied to Lateral Flow Device at this station	1	4	4	
8	Damaged barcode, lost LFD, failed scan of barcode	Orphaned record on registration portal & No result communicated to individual	• Rule based recall of subjects who have not received a result within x hrs of registration • Subjects are called for a retest	1	4	4	
9	Extraction solution which comes with the lab test kit contains the following components: NA$_2$HPO$_4$ (disodium hydrogen phosphate), NaH$_2$PO$_4$ (sodium phosphate monobasic), NaCl (Sodium Chloride)	These components do not have any hazard labels associated with them, and the manufacturer states that there are no hazards anticipated under conditions of use as described in other product literature. This is the case for exposure to: eye, skin, inhalation, ingestion, chronic toxicity, reproductive and developmental toxicity, carcinogenicity, and medical conditions	• **PPE**: nitrile gloves which meet the Regulation (EU) 2016/425 to be used at all times when handling the extraction solution. Safety glasses with side shields which are tested and approved under appropriate government standards to be worn at all times when handling the extraction solution. Impervious clothing to be worn to protect the body from splashes or spillages. • **Environmental**: do not let product enter drains • **Spillages**: wipe surfaces which the solution has been spilt on and dispose of cleaning material in line with the lab's waste disposal procedures • Do not use if the solution has expired • Training to be provided in handling potentially biohazardous samples, chemicals and good lab	1	4	4	

		aggravated by exposure.	practice. Adhere to guidelines in these training procedures to prevent improper handling. • Follow procedures on the MSDS form provided by Innova to mitigate against inhalation, skin contact or ingestion of these chemicals.				
10	Occupational illness or injury		• Ensure adequate, frequent rests • Ensure PPE worn to reduce likelihood of illness or injury	1	4	4	
11	Manual handling	Injury	• Ensure correct movement of boxes as required – use mechanical aids to assist • Reduce requirement to move large boxes – split boxes as required • Boxes arrive with low total weights	3	2	6	
12	Unauthorised access by members of the public	Private site – signed in visitors only	• Sign in at reception. • Staff challenge anyone onsite without lanyards	1	4	4	
13	Uneven surfaces (floor protection in the Testing and Welfare areas)	Trips, slips and falls.	• Flat, level floor to main area.	1	3	3	
14	Stairs to track and trace holding area (stage)	Trips, slips and falls	• Steps to stage to be used by track and trace holding area only. Steps have hand rail.	1	4	4	
15	Inclement weather	Slip, trips and falls Temperature too low. People cannot access site	• Testing indoors – heating on as required • Only people on site get tested • Multiple trained personnel on site to cover testing sessions if required.	1	2	2	
16	Electrical safety / plant & equipment maintenance Defective electrical equipment	Electrical shock Equipment failure	• Portable electrical equipment checked annually • Fixed wire checks every 5 years. • User visual check before use	1	4	4	
17	Use of shared equipment	Transmission of COVID-19	• Ensure hands / items are sanitised before changing user	1	4	4	

Control Improvements				
Action No	Recommended additional control measures	Responsibility	Target Date	Date completed
1	Content of the risk assessment to be communicated with all workers as part of induction	Covid Coordinator		
2	Toolbox talks to be delivered to all workers on a regular basis including slips trips falls and complacency	Covid Coordinator		

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Additional Notes

Risk Evaluation

Severity

Negligible
Minor
Moderate
Major
Critical

Likelihood

Rare, will probably never happen/recur

Unlikely, do not expect it to happen, but is possible

Possible, Might happen

Likely, will probably happen

Almost Certain, will undoubtedly happen

Risk control strategies

		Consequence of event ocurring (Severity)				
		Negligible	Minor	Moderate	Major	Critical
Likelihood of event ocurring (Probability)	Almost Certain	Tolerable 5	Substantial 10	Intolerable 15	Intolerable 20	Intolerable 25
	Likely	Tolerable 4	Substantial 8	Intolerable 12	Intolerable 16	Intolerable 20
	Possible	Trivial 3	Tolerable 6	Substantial 9	Intolerable 12	Intolerable 15
	Unlikely	Trivial 2	Tolerable 4	Tolerable 6	Substantial 8	Substantial 10
	Rare	Trivial 1	Trivial 2	Trivial 3	Tolerable 4	Tolerable 5

Intolerable – stop activity, take immediate action to reduce the risk

Substantial - Take action within an agreed period

Tolerable – monitor the situation

Trivial – No action required

Declaration - If the above control measures are implemented the risks posed by the task / process / environment assessed will be controlled to as low as is reasonably practicable.		
Persons involved in assessment S Baker, L Smith, A Ashcroft		
Signature of Lead Assessor S Baker		Date 05.01.2021

Reviews – this assessment should be reviewed at intervals no greater than 12 months or when there are changes in operational procedure, personnel, the work environment or following an incident							
Review date	Comments	Reviewed by	Signature	Review date	Comments	Reviewed by	Signature

Health and Safety Risk Assessment Sign off Sheet	Assessment Number	

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Issue that could cause harm:	Lack of Social Distancing in the learning environment (classroom/ workshop/ hall/ outdoors) which could increase the risk and rate of transmission of coronavirus (COVID-19)

Existing level of risk:			
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Year group bubbles to be utilised which will use the same rooms throughout the day with their own toilet(s) and own identified open air space.
2. Staff to maintain 2 metre social distancing between adults and between children wherever possible and to ensure the time spent near pupils is minimised if this is not possible or has a specific RA if 1:1 support is required.
3. Any rooms that are shared (e.g. Dining rooms) to be cleaned between bubble changes.
4. Any specialist rooms used by a bubble would be used for a week before being changed to a different bubble and cleaned in-between.
5. Maximise the usage of the same staff within the same bubble to reduce cross contamination between bubbles as far as possible, recognising for secondary settings there will be some subject specialist rotation of staff. GCA are aiming for a majority of staff to only be in a maximum of 2 bubbles and for no staff to be in more than 3 bubbles.
6. Changing the assignment of staff to each group of children/young people should be a last resort but may be necessary for example due to staff absence.
7. Maximise the number of learning environments used including outdoor space as much as possible to more easily allow for distance between children and staff. GCA intending to use six rooms in each bubble, with specific allocated toilets, outdoor spaces and access, as well as the bookable specialist facilities.
8. GCA has identified specific access routes for the start of the day, and throughout the day.
9. Ensure that wherever possible children use the same classroom or area of a setting throughout the day to minimise movement around school.
10. When movement around school is required, this should in all cases, other than emergencies, be during lesson time so that corridors and outside spaces are clear.
11. Remove excess furniture to increase space if able to do so.
12. Personal property of children should be kept to a minimum e.g. bags, coats, lunchboxes. If these are brought into school, they should be kept with children and stored under the students' allocated desk when in classrooms.
13. Lockers are not to be used as the locations of the lockers are diverse and requirements reduced.
14. Children should arrive in PE kit when undertaking PE that day to not require the use of shared bubble use of changing rooms
15. Staff members to keep a minimum 2 metre distance from each other and children in the learning environment. Teacher only zones will be clearly marked on the floor.
16. Mark out a 2 metre area e.g. with tape/paint for the member(s) of staff to be able to maintain social distancing from children and other staff in classrooms and outside duties in bubbles.
17. Display signage in the learning environment regarding social distancing, hand washing/sanitising and being symptom free to reinforce, encourage and promote this for staff and children.
18. If students need to wait outside classrooms, they must queue against a wall and leave a 2m passage for adults. In most cases, students will enter classroom immediately and go straight to desk/work area. Students and staff must remain at 2m social distancing at all times if possible. Students must wait for permission to move from their allocated area when exiting the classroom. Student's may only use the toilet that is allocated to their bubble. Students will only use the toilets at break time and lunch unless a medical note is provided. For children, procedures revisited and managed in line with academy behaviour policy.

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19. Any technical support staff required to enter a learning environment due to urgent operational requirements (e.g. IT Technician) will maintain a minimum 2 metre social distance, may wear PPE and the Class Teacher will ensure that children follow social distancing to enable the technical staff to work at a social distance.

Remaining level of risk	Consider the level of risk following use of the above control measures		
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

Issue that could cause harm:	**Lack of Social Distancing when using toilets and poor hygiene which could increase the risk and rate of transmission of coronavirus (COVID-19)**		
Existing level of risk:			
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**
How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls		

1. Specific toilets will be allocated to staff. Only one member of staff to enter toilets at once. Staff to queue outside at 2m interval if necessary.
2. Ensuring that toilets do not become crowded by limiting the number of children who use the toilet facilities at one time. Outside doors to be removed, and regular monitoring and communication of expectations.
3. Specific toilets to be used by students from a specific bubble.
4. Staff and children asked to clean hands before and after using the toilet - wash hands thoroughly for 20 seconds with running water and soap and dry them thoroughly or use alcohol hand rub or sanitiser ensuring that all parts of the hands are covered.
5. Ensure that help is available for children who have trouble cleaning their hands independently.
6. Display signage in the toilets regarding handwashing to reinforce, encourage and promote this for staff and children.
7. Prop doors open, where safe to do so (bearing in mind fire safety and safeguarding), to limit use of door handles and aid ventilation.
8. Full stock of soap and sanitiser to be maintained in the toilets at all times.
9. All toilet will be cleaned at the end of the day and checked by cleaning staff every morning. Toilets will be cleaned by cleaning staff after break and lunch times.

Remaining level of risk	Consider level of risk following use of control measures		
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

Issue that could cause harm:	**Lack of social distancing and poor hygiene upon arrival and exit from school which could increase the risk and rate of transmission of coronavirus (COVID-19)**

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Existing level of risk:			
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Tell staff, children, young people, parents, carers or any visitors, such as suppliers, not to enter the education or childcare setting if they are displaying any signs or symptoms of coronavirus.
2. Staff will go straight to reception through the main entrance and sign in with fob instead of touching screen. Two-meter intervals will be marked clearly on the floor to ensure social distancing in the event of staff needing to queue to sign in. Hand sanitiser is available at reception for staff to use. Staff proceed to allocated work area or outdoor duty position and not to congregate with other staff.
3. Installation of hand sanitiser stations at staff entrances/exits to building.
4. Staff to sanitise hands on each and every entry and exit from the buildings and classrooms.
5. Pupils to enter site and head straight to their outdoor area. Use of dining area before school to be limited and socially distanced for all.
6. Prop doors open, where safe to do so (bearing in mind fire safety and safeguarding), to limit use of door handles and aid ventilation.
7. Staff occupying Main Reception is kept to a maximum number of three people. Work areas within reception are clearly marked out and allocated to staff. Markings/signage and an acrylic screen at the reception desk to ensure reception staff are able to maintain social distancing from staff, parents, carers, visitors and children. Use of hand sanitiser for all visitors upon entry/exit. Visitors cannot enter the site unless they have a pre-arranged appointment.
8. Make clear to parents and carers that they cannot gather at entrance gates or doors, or enter the site (unless they have a pre-arranged appointment, which should be conducted safely). Communication can be done via email or phone.
9. Advise visitors that they cannot enter the site unless they have a pre-arranged appointment, which should be conducted safely.
10. School start times temporarily altered – no children on site before 8.15 as there will be no supervision before this, and school starts at 8.50 to allow a steady arrival with reduced bulges.
11. Clear signage to encourage parents/carers not to congregate outside the school.
12. No parents allowed on site without a prearranged appointment.
13. All external doors used by students are propped open to limit use of door handles.
14. Use of hand sanitiser upon entering and exiting classrooms. Each classroom in use will have sanitiser near door for use.
15. Implement staggered pick up times for different groups of children. As far as possible within the restrictions of bus transport. Year group bubbles will be released over a 15 minute period to allow a steady departure/bus embarkation.
16. Tell parents that if their child needs to be accompanied to the education or childcare setting, only one parent should attend.
17. Staff supervision throughout drop off/pick up to encourage and insist on social distancing.
18. Display signage outside and inside the building regarding social distancing and good hygiene to reinforce, encourage and promote this for staff, parents, carers and children.
19. Everyone should use a tissue or elbow to cough or sneeze and use bins for tissue waste ('catch it, bin it, kill it').
20. Face masks (not scarves, buffs, bandanas etc) must be worn by all pupils and staff in indoor areas where social distancing is more difficult. These include but are not limited to: -

    o   Corridors before lessons, at lesson change over and when inside at break/lunchtime.
    o   Canteens (when students/staff are not eating) – including queuing, and if remaining inside after eating.
    o   Staff rooms and kitchens – where social distancing is difficult to achieve.

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Remaining level of risk	Consider level of risk following use of control measures		
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

Issue that could cause harm:	**Lack of social distancing and poor hygiene during break/ playtimes and lunchtimes which could increase the risk and rate of transmission of coronavirus (COVID-19)**

Existing level of risk:			
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Stagger break and lunch times, so that all children are not moving around the school at the same time and that that any corridors or circulation routes used have a limited number of children or young people using them at any time.
2. Each bubble to have their own designated outside space and dining area.
3. Dining areas to be cleaned between each bubble use.
4. Having distinct bubble spaces around the school site reduces the requirement for one way systems.
5. Access rooms directly from outside where possible to reduce mixing of groups.
6. Ensure that children and young people are in the same groups at all times each day, and different bubbles are not mixed during the day, or on subsequent days.
7. Ensure that the same staff are assigned to each bubble of children and, as far as possible, these stay the same during the day and on subsequent days (see above)
8. Children and young people should clean their hands before and after eating and enter in the bubbles they are already in. If such measures are not possible, children should be brought their lunch in their classrooms
9. Prop doors open, where safe to do so (bearing in mind fire safety and safeguarding), to limit use of door handles and aid ventilation.
10. Where possible, all spaces should be well ventilated using natural ventilation (opening windows) or ventilation units.
11. Display signage outside and inside the building regarding social distancing and good hygiene to reinforce, encourage and promote this for staff and children.
12. Use markers e.g. paint/tape outside school and inside school at 2 metre intervals to encourage and maintain social distancing for children and adults.
13. Children and young people should clean their hands after sneezing or coughing, should be encouraged not to touch their mouth, eyes and nose, should use a tissue or elbow to cough or sneeze and use bins for tissue waste ('catch it, bin it, kill it').
14. Ensure that sufficient handwashing facilities are available. Where a sink is not nearby, provide hand sanitiser in play/break time and lunchtime areas
15. Staff supervision throughout break/play and lunchtimes to actively encourage and insist on social distancing.
16. Face masks (not scarves, buffs, bandanas etc) must be worn by all pupils and staff in indoor areas where social distancing is more difficult. These include but are not limited to: -

    o   Corridors before lessons, at lesson change over and when inside at break/lunchtime.
    o   Canteens (when students/staff are not eating) – including queuing, and if remaining inside after eating.
    o   Staff rooms and kitchens – where social distancing is difficult to achieve.

Remaining level of risk	Consider level of risk following use of control measures		
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

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Issue that could cause harm:	**Lack of social distancing and poor hygiene during staff break or lunch times which could increase the risk and rate of transmission of coronavirus (COVID-19)**

Existing level of risk			
HIGH	<mark>**MEDIUM**</mark>	**LOW**	**NEGLIGIBLE**

How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Staff room to be properly cleaned at the start and end of each day and surfaces cleaned more regularly than normal throughout the day.
2. Staff to stagger break and lunch times.
3. Limit the number of people in staffroom at any one time. Staff should maintain social distancing.
4. Ensure that sufficient handwashing facilities are available. Where a sink is not nearby, provide hand sanitiser in staff rooms.
5. Staff asked to clean hands upon arrival and exit from the staff room - wash hands thoroughly for 20 seconds with running water and soap and dry them thoroughly or use alcohol hand rub or sanitiser ensuring that all parts of the hands are covered
6. Prop doors open, where safe to do so (bearing in mind fire safety and safeguarding), to limit use of door handles and aid ventilation.
7. Where possible, all spaces should be well ventilated using natural ventilation (opening windows) or ventilation units
8. Ensure chairs in staffrooms use back-to-back or side-to-side (rather than face-to-face) whenever possible.
9. Display signage outside and inside the building regarding social distancing and good hygiene to reinforce, encourage and promote this for staff.
10. Staff work spaces are available in specific locations –stringent social distancing and sanitising are required in these spaces.
11. Staff are welcome to eat their food in classrooms within one of their bubbles (usually the room taught in immediately prior to lunchtime) – no more than three staff should have lunch in the same room at the same time, and all occupied surfaces should be wiped down on arrival and departure using the sanitiser and tissues available in the room.
12. Face masks (not scarves, buffs, bandanas etc) must be worn by all pupils and staff in indoor areas where social distancing is more difficult. These include but are not limited to: -
    o   Corridors before lessons, at lesson change over and when inside at break/lunchtime.
    o   Canteens (when students/staff are not eating) – including queuing, and if remaining inside after eating.
    o   Staff rooms and kitchens – where social distancing is difficult to achieve.

Remaining level of risk	Consider level of risk following use of control measures

HIGH	<mark>**MEDIUM**</mark>	**LOW**	**NEGLIGIBLE**

Issue that could cause harm:	**Lack of social distancing in the corridors which could increase the risk and rate of transmission of coronavirus (COVID-19)**

Existing level of risk:

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HIGH	MEDIUM	LOW	NEGLIGIBLE

How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Stagger break and lunch times, so that all children are not moving around the school at the same time and that that any corridors or circulation routes used have a limited number of children or young people using them at any time.
2. Keep year bubbles geographically and/or temporally separate.
3. Access rooms directly from outside where possible to reduce mixing of groups.
4. Children and young people to be actively encouraged to maintain 2m social distancing from staff.
5. Prop doors open, where safe to do so (bearing in mind fire safety and safeguarding), to limit use of door handles and aid ventilation.
6. Where possible, all spaces should be well ventilated using natural ventilation (opening windows) or ventilation units.
7. Display signage on corridors regarding social distancing to reinforce, encourage and promote this for children and staff.

Remaining level of risk	Consider level of risk following use of control measures

HIGH	MEDIUM	LOW	NEGLIGIBLE

Issue that could cause harm:	Contact with surfaces/shared resources and poor hygiene which could increase the risk and rate of transmission of coronavirus (COVID-19)

Existing level of risk:			

HIGH	MEDIUM	LOW	NEGLIGIBLE

FCAT

How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Learning environments to be properly cleaned before the start of each day and properly cleaned between uses by different year bubbles of children. This should be at the start and end of each day as well as more regularly than normal throughout the day across school. **Cleaning protocol from FCAT Premises issued to assist with this.** At GCA cleaners will thoroughly clean classrooms at the end of the day. Classrooms will then be locked until the morning. Classrooms will be checked, and re-cleaned if necessary, each morning by the site team and cleaning staff. All doors will be propped open by site staff. When two members of staff are alternating between the same work area during different times of the day, staff will use disinfectant spray to clean the area on arrival and before they leave. As well as rigorously sanitising on entry to and exit from the room. Spray sanitiser to be provided in each classroom.

2. Clean surfaces that children and young people are touching, such as text books, desks, chairs, tables, doors, sinks, toilets, light switches, bannisters, more regularly than normal.

3. Shared materials and surfaces should be cleaned and disinfected more frequently than normal.

4. Ensure that sufficient handwashing facilities are available across the school. Where a sink is not nearby, provide hand sanitiser.

5. Children and staff to wash hands/use sanitiser frequently throughout the day - wash hands thoroughly for 20 seconds with running water and soap and dry them thoroughly or use alcohol hand rub or sanitiser ensuring that all parts of the hands are covered.

6. Children and young people should clean their hands on arrival at the setting, before and after eating, after sneezing or coughing, should be encouraged not to touch their mouth, eyes and nose, should use a tissue or elbow to cough or sneeze and use bins for tissue waste ('catch it, bin it, kill it').

7. Display signage across school regarding handwashing to reinforce, encourage and promote this for staff and children.

8. Full stock of soap and sanitiser to be maintained in school at all times.

9. Prop doors open, where safe to do so (bearing in mind fire safety and safeguarding), to limit use of door handles and aid ventilation.

10. Learning planned so resources are individual and not shared – or on white board.

11. Where sharing of resources is required, where possible year bubble equipment packs will be created. Where not possible, rigorous and regular cleaning/sanitising will be undertaken.

12. Where appropriate, resources on tables ready for learning and not distributed during the learning.

13. Use plastic packets (zippy) bags used for individual class/bubble resources.

14. Where assessment work is undertaken, this should be done on paper, collected by a student and placed in a plastic wallet by the teacher and dated – the work should not be removed to be marked for at least 48 hours, and should not be returned for a further 48 hours.

15. Limit the amount of shared resources that are taken home and limit exchange of take-home resources between children, young people and staff.

16. Seek to prevent the sharing of stationery and other equipment where possible.

17. Practical lessons can go ahead if equipment can be cleaned thoroughly and properly cleaned between different groups of children.

18. Children keep to their desks when in the learning environment.

19. Where possible seat children at the same desk each day.

Remaining level of risk	Consider level of risk following use of control measures

HIGH	MEDIUM	LOW	NEGLIGIBLE

Issue that could cause harm:	**Lack of cleaning which could increase the risk and rate of transmission of coronavirus (COVID-19)**

FCAT

Existing level of risk			
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Follow the COVID-19: cleaning of non-healthcare settings guidance
2. School to be properly cleaned before the start of each day and properly cleaned between uses by different groups of children. This should be at the start and end of each day as well as more regularly than normal throughout the day across school. Cleaning protocol from FCAT Premises to be issued to assist with this**.** At GCA cleaners will thoroughly clean classrooms at the end of the day. Classrooms will then be locked until the morning. Classrooms will be checked, and recleaned if necessary, each morning by the site team and cleaning staff. All doors will be propped open by site staff. When two members of staff are alternating between the same work area during different times of the day, staff will use disinfectant spray to clean the area on arrival and before they leave.
3. Clean surfaces that children and young people are touching, such as, books, desks, chairs, tables, doors, sinks, toilets, light switches, bannisters, more regularly than normal.
4. Shared materials and surfaces should be cleaned and disinfected more frequently than normal.
5. External cleaning company will follow the cleaning protocol issued, and our advice is that PPE will be worn by all cleaning staff in accordance with COVID-19: cleaning of non-healthcare settings guidance.
6. Remove soft furnishings, soft toys and toys that are hard to clean (such as those with intricate parts)
7. Deep clean of the academy before wider re-opening.
8. To ensure effective stock control and sufficient stock of cleaning materials, hygiene materials and PPE in line with cleaning schedule.
9. Ensure there are bins across school for tissues and these are emptied throughout the day.

Remaining level of risk	Consider level of risk following use of control measures

HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

Issue that could cause harm:	**Risk of spreading virus due to close contact with parents / carers / visitors / contractors / children – 1:1 and restraint which could increase the risk and rate of transmission of coronavirus (COVID-19)**

Existing level of risk			
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

- Seek expert guidance re support for children with behaviour difficulties – that might need restraint and display spitting, biting etc. leading to the implementation of individual risk assessments.
- Reduced timetable/exclusion/inclusion considered if necessary to manage the behaviour of children and young people and minimise risk to staff.
- Use of PPE where 2 metre distance cannot be maintained.
- Utilise acrylic screens at the reception desk.

Remaining level of risk	Consider level of risk following use of control measures

HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

FCAT

Issue that could cause harm:	First Aid/Accident/Administering medicines/EHP/Personal Care which could increase the risk and rate of transmission of coronavirus (COVID-19)

Existing level of risk:

HIGH	**MEDIUM**	LOW	NEGLIGIBLE

How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Ensure there is a member of First Aid trained staff on site and only trained staff carry out First Aid (for primary requires Paediatric First Aid).
2. Ensure full and complete first aid stock on site at all times.
3. Ensure FCAT First Aid, Accident Administering medicines and EHP Policies are followed.
4. Emergency PPE equipment to be available in each bubble area and centrally.
5. Staff should wear PPE if a child or young person becomes unwell with symptoms of coronavirus while in their setting and needs direct personal care until they can return home. A fluid-resistant surgical face mask should be worn by the supervising adult if a distance of 2 metres cannot be maintained. If contact with the child or young person is necessary, then disposable gloves, a disposable apron and a fluid-resistant surgical face mask should be worn by the supervising adult. If a risk assessment determines that there is a risk of splashing to the eyes, for example from coughing, spitting, or vomiting, then eye protection should also be worn.
6. Staff should wear PPE for children, young people and students whose care routinely already involves the use of PPE due to their intimate care needs. They should continue to receive their care in the same way.
7. Full and complete stock of PPE on site at all times.
8. Staff and pupils awaiting collection should go to the sports hall changing rooms whilst waiting to be collected.
9. LCC Schools & Education Settings Strategic Outbreak Control Plan Flow Chart to be followed.

Remaining level of risk	Consider level of risk following use of control measures

HIGH	**MEDIUM**	LOW	NEGLIGIBLE

Issue that could cause harm:	Safeguarding checking how the academy is safeguarding children and young people during the remaining partial closure of schools and in the wider opening.

Existing level of risk

HIGH	**MEDIUM**	LOW	NEGLIGIBLE

How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. All academy safeguarding procedures and reporting mechanisms operate in full and in the usual way. Any safeguarding concerns will be reported, recorded, managed and referred as appropriate, using existing procedures as set out in the FCAT Safeguarding and Child Protection Policy.
2. List of vulnerable students under constant review. Protocol for monitoring vulnerable student's wellbeing in place. Staff on site to ensure pastoral care is in place to support individual and collective needs.

Remaining level of risk	Consider level of risk following use of control measures

FCAT

HIGH	MEDIUM	LOW	NEGLIGIBLE

Issue that could cause harm:	Emotional distress of the children - including mental health conditions.

Existing level of risk			
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Children and young people will be in the same bubbles and as far as possible with the same staff assigned to that bubble of children which will support consistency and stability.
2. Phased return to school over the first week to ensure transition is supported and successful.
3. Consideration will be given to curriculum delivery to ensure transition is supported and successful from home to school.
4. Academy SLT to ensure that targeted and effective pastoral care is in place to support children designed to meet individual and collective needs. List of vulnerable students under constant review. Protocol for monitoring vulnerable student's wellbeing in place. Staff on site to ensure pastoral care is in place to support individual and collective needs.
5. If a member of staff wishes to wear items of PPE out of their own personal preference e.g. a face covering to come into work – we will be supportive of their decision. If a member of staff wishes to wear an item of PPE out of personal choice – the member of staff should provide their own PPE and this should not be provided by school/taken from school supplies

Remaining level of risk	Consider level of risk following use of control measures

HIGH	MEDIUM	LOW	NEGLIGIBLE

FCAT

Issue that could cause harm:	Emotional distress of the staff – including mental health conditions.		
Existing level of risk			
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**
How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls		

1. Academy SLT to ensure continuous clear and effective communication with staff regarding the detail of plans for the September re-opening of school and this COVID-19 risk assessment and control measures in advance and following 1st September 2020 to aim to minimise uncertainty and anxiety.
2. At least one SLT member of staff on site every day for staff to share any questions or concerns with
3. Continued access for staff to remote wellbeing support from qualified professionals via Line Manager or **teamfcatwellbeing@fcat.org.uk** monitored by HR daily.
4. Ongoing signposting of staff to online/phone wellbeing support.
5. Ongoing review of COVID-19 risk assessment to ensure control measures are implemented and updated if necessary to maintain a safe working environment.
6. To promote the Team FCAT Work and Wellbeing charter.
7. Set up of trust-wide e-mail address for staff to share/report and health and safety concerns relating to COVID-19.

Remaining level of risk	Consider level of risk following use of control measures		
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

Issue that could cause harm:	Risk of COVID-19 illness to extremely clinically vulnerable and clinically vulnerable children staff and family members.		
Existing level of risk			
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**
How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls		

Where a pupil is unable to attend school because they are complying with clinical and/or public health advice, school will immediately offer them access to remote education. Schools should monitor engagement with this activity.

Where children are not able to attend school as parents are following clinical and/or public health advice, absence will not be penalised. All other pupils must attend school

Shielding advice for all adults and children will pause on 1 August, subject to a continued decline in the rates of community transmission of coronavirus (COVID-19). This means that even the small number of pupils who will remain on the shielded patient list can also return to school, as can those who have family members who are shielding. If rates of the disease rise children (or family members) may be advised to shield during the period where rates remain high and therefore they may be temporarily absent. In this event remote learning provision will be activated immediately.

Parents of pupils and staff with significant risk factors should discuss their concerns with pastoral staff and senior leaders respectively.

FCAT

It is anticipated that fewer young people will be advised to shield and that the majority of pupils will be able to return to school. some pupils no longer required to shield but who generally remain under the care of a specialist health professional may need to discuss their care with their health professional before returning to school (usually at their next planned clinical appointment).

Following the reduction in the prevalence of coronavirus (COVID-19) and relaxation of shielding measures from 1 August, we expect that most staff will attend school.

It remains the case that wider government policy advises those who can work from home to do so. We recognise this will not be applicable to most school staff, but where a role may be conducive to home working, for example some administrative roles, school leaders should consider what is feasible and appropriate.

Individuals who were considered to be clinically extremely vulnerable and received a letter advising them to shield are now advised that they can return to work from 1 August as long as they maintain social distancing.

School leaders should be flexible in how those members of staff are deployed to enable them to work remotely where possible or in roles in school where it is possible to maintain social distancing.

People who live with those who are clinically extremely vulnerable or clinically vulnerable can attend the workplace.

Staff who are clinically vulnerable or extremely clinically vulnerable

The measures outlined in the DfE guidance for full opening of schools (page 1 of this risk assessment) will be applied and will mitigate risks significantly for staff, including those who are extremely clinically vulnerable and clinically vulnerable. This will allow most staff to return to the workplace, although we advise those in the most at risk categories to take particular care while community transmission rates continue to fall.

Parents of pupils and staff with significant risk factors should discuss their concerns with pastoral staff and senior leaders.

FCAT still wishes to support staff in continuing to work from home, if able to do so, balancing this with increasing operational requirements.

1. Staff who are extremely clinically vulnerable (those who have received a letter from Government or clinician advising them to shield) will be advised that they can return to work from 1 August as long as they maintain social distancing and the workplace is COVID secure.
2. Staff who are clinically vulnerable should return to work where possible. Government advice is available for colleagues in these categories and those who are pregnant. Education and childcare settings should endeavour to support flexible deployment where possible.
3. The government is currently undertaking an official review of whether factors including ethnicity can affect people's vulnerability to COVID-19. The government has said this is because a disproportionately higher number of people have died from COVID-19 from black, Asian and minority ethnic (BAME) backgrounds. As such the trust will undertake individual risk assessments for any staff who are within the high risk category and/or BAME background.
4. Staff and children living with those that are extremely clinically vulnerable/clinically vulnerable can attend school and work with children or adults adhering to this risk assessment.

Remaining level of risk	Consider level of risk following use of control measures		
HIGH	**<mark>MEDIUM</mark>**	**LOW**	**NEGLIGIBLE**

Issue that could cause harm:	**Staff health and wellbeing when working from home for which FCAT remains responsible for as the employer.**		
Existing level of risk			
HIGH	**<mark>MEDIUM</mark>**	**LOW**	**NEGLIGIBLE**
How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls		

FCAT

1. Line Managers to maintain regular and reasonable contact with staff in their teams.
2. Encourage staff to undertake a workstation risk assessment and consider any equipment staff may require in order to work from home safely.
3. Encourage staff to take short and regular rest breaks when using a computer screen.
4. To encourage staff not to work excessively long hours and to take a lunch break.
5. To promote the Team FCAT Work and Wellbeing Charter.
6. Continued access for staff to remote wellbeing support from qualified professionals via Line Manager or **teamfcatwellbeing@fcat.org.uk** monitored by HR daily.
7. Ongoing signposting of staff to online/phone wellbeing support.

Remaining level of risk	Consider level of risk following use of control measures		
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

FCAT

Issue that could cause harm:	Lack of Social Distancing and poor hygiene in staff offices and meeting rooms which could increase the risk and rate of transmission of coronavirus (COVID-19)		

Existing level of risk			
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Staff offices to be properly cleaned at the start and end of each day and surfaces (e.g. desks, door and window handles, light switches etc.) cleaned more regularly than normal throughout the day. Academy SLT to agree with the Site Supervisor cleaning schedule and frequency for the offices and meeting rooms in line with operational requirements (e.g. what needs to be cleaned, how should it be cleaned and how often).
2. Staff who are office based and can undertake their job role at home, should discuss the appropriateness of continuing to work from home with their line manager/Headteacher.
3. Limit the number of people in office at any one time.
4. Ensure a 2 metre distance between staff work spaces. Use markers e.g. paint/tape in the office at 2 metre intervals to encourage and maintain social distancing.
5. Use of screens in spaces where appropriate to do so.
6. Use back-to-back or side-to-side working (rather than face-to-face) whenever possible.
7. Reducing the number of people each person has contact with by using 'fixed teams or partnering' (so each person works with only a few others).
8. Provide hand sanitiser in offices and meeting rooms.
9. Staff asked to clean hands upon arrival and exit from the office and regularly throughout the day - wash hands thoroughly for 20 seconds with running water and soap and dry them thoroughly or use alcohol hand rub or sanitiser ensuring that all parts of the hands are covered
10. Prop doors open, where safe to do so (bearing in mind fire safety and safeguarding), to limit use of door handles and aid ventilation.
11. Where possible, all spaces should be well ventilated using natural ventilation (opening windows) or ventilation units
12. Display signage in offices regarding social distancing and good hygiene to reinforce, encourage and promote this for staff.
13. Avoiding use of hot desks and spaces and, where not possible, for example, call centres or training facilities, cleaning and sanitising workstations between different occupants including shared equipment.
14. Use remote working tools to avoid in-person meetings.
15. Only where absolutely necessary participants should attend meetings and should maintain 2m separation throughout.
16. Avoiding transmission during meetings, for example avoiding sharing pens and other objects.
17. Hold meetings outdoors or in well-ventilated rooms whenever possible.

Remaining level of risk	Consider level of risk following use of control measures

HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

FCAT

Issue that could cause harm:	Risk of a person coming into work/school with COVID-19 which could increase the risk and rate of transmission of coronavirus (COVID-19)

Existing level of risk			
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Tell staff, children, young people, parents, carers or any visitors, such as suppliers, not to enter the education or childcare setting if they are displaying any symptoms of coronavirus (following the COVID-19: guidance for households with possible coronavirus infection).
2. If anyone becomes unwell with a new, continuous cough or a high temperature in an education or childcare setting, they must be sent home and advised to follow the COVID-19: guidance for households with possible coronavirus infection guidance.
3. Proper cleaning of the area where anyone has become unwell with symptoms of COVID-19 should take place.
4. If a child is awaiting collection, they should be moved, if possible, to the sports hall changing room where they can be isolated, depending on the age of the child and with appropriate adult supervision if required. Ideally, a window should be opened for ventilation. If it is not possible to isolate them, move them to an area which is at least 2 metres away from other people.
5. If they need to go to the bathroom while waiting to be collected, they should use the accessible toilet within the changing room area if possible. The bathroom should be cleaned and disinfected using standard cleaning products before being used by anyone else.
6. PPE should be worn by staff caring for the child while they await collection if a distance of 2 metres cannot be maintained (such as for a very young child or a child with complex needs). A fluid-resistant surgical face mask should be worn by the supervising adult if a distance of 2 metres cannot be maintained. If contact with the child or young person is necessary, then disposable gloves, a disposable apron and a fluid-resistant surgical face mask should be worn by the supervising adult. If a risk assessment determines that there is a risk of splashing to the eyes, for example from coughing, spitting, or vomiting, then eye protection should also be worn.
7. Staff and parents/carers should be advised about testing for COVID-19 for keyworkers and children in school.
8. Academy SLT should ensure any confirmed cases of COVID-19 following a positive test result should be notified to Jane McCumiskey (FCAT COO) to ensure that the FCAT procedure in the event of this can be followed.
9. LCC Schools & Education Settings Strategic Outbreak Control Plan Flow Chart to be followed.
10. Everyone must wash their hands thoroughly for 20 seconds with soap and running water or use hand sanitiser after any contact with someone who is unwell.
11. Household members of those contacts who are sent home do not need to self-isolate themselves unless the child, young person or staff member who is self-isolating subsequently develops symptoms. If someone in a class or group that has been asked to self-isolate develops symptoms themselves within their 10-day isolation period they should follow 'stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection'. They should get a test, and:
12. if the test delivers a negative result, they must remain in isolation for the remainder of the 10-day isolation period. This is because they could still develop the coronavirus (COVID-19) within the remaining days.
13. if the test result is positive, they should inform their setting immediately, and must isolate for at least 10 days from the onset of their symptoms. Their household should self-isolate for at least 10 days from when the symptomatic person first had symptoms, following 'stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection'

FCAT

Remaining level of risk	Consider level of risk following use of control measures		
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

Issue:	**Risk of renewed local lockdown impacting on the ability to open school.**		
Existing level of risk			
HIGH	MEDIUM	LOW	NEGLIGIBLE
How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls		

1.   Academy SLT to agree contingency plan.
2.   Academy to implement contingency plan for any partial/full closure of the school in conjunction with Executive Headteacher and the Trust, in response to the circumstances presented. This will include communication for children, staff, parents/carers and the implementation of remote learning arrangements.

Remaining level of risk	Consider level of risk following use of control measures		
HIGH	MEDIUM	LOW	NEGLIGIBLE

Issue:	**The number of staff who are available is lower than that required to teach classes in school and operate effective home learning and premises / site operation.**		
Existing level of risk			
HIGH	MEDIUM	LOW	NEGLIGIBLE
How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls		

1. The health status and availability of every member of staff is known and is regularly updated so that deployment can be planned.
2. Full use is made of those staff who are self-isolating but who are well enough to teach lessons online.
3. Flexible and responsive use of teaching assistants and pastoral staff to supervise classes is in place.
4. Full use is made of testing to inform staff deployment.
5. A blended model of home learning and attendance at school is planned for and utilised as necessary.

Remaining level of risk	Consider level of risk following use of control measures		
HIGH	MEDIUM	LOW	NEGLIGIBLE

FCAT

Issue that could cause harm:	Travel to and from work/school for staff/children which could increase the risk and rate of transmission of coronavirus (COVID-19).		
Existing level of risk			
HIGH	<mark>**MEDIUM**</mark>	**LOW**	**NEGLIGIBLE**
How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls		

1. Encouraging parents and children and young people to walk or cycle to their education setting where possible and are aware of the Coronavirus (COVID-19): safer travel guidance for passengers when planning their travel
2. LCC Bus Transport operators are being instructed to tape off the seats on their services to allow social distance spacing between bus users. Users must get on and off one at a time under the supervision of the driver and follow all school rules regarding staying in that spaced seat at all times during the journey. (Double decker buses will have a maximum of 15 seats available and single just 10. Smaller coaches will be spaced accordingly and numbers reduced to fit spacing needs.) Jacqueline Day at LCC has verified that these are the instructions which operators must adhere to under LCC control. GCA will work with stagecoach for the 46X private hire to implement the same controls on that service. GCA will alert parents to these measures via PMX to ask students to be aware and follow these rules, which GCA staff will also reinforce at the Academy. We have audited the student numbers for each service and LCC will allocate suitable size vehicles to meet the distancing requirements. These measures, followed correctly, will ensure social distancing can be observed in transporting children to and from the site.
3. Taking appropriate actions to reduce risk if hygiene rules and social distancing is not possible, for example when transporting children and young people with complex needs who need support to access the vehicle or fasten seatbelts.
4. Encouraging staff to travel to work by personal vehicle, walk or cycle instead of using public transport.
5. Advise staff not to car share.
6. Encourage staff to follow social distancing in the staff car park.

Remaining level of risk	Consider level of risk following use of control measures		
HIGH	<mark>**MEDIUM**</mark>	**LOW**	**NEGLIGIBLE**

FCAT

Issue that could cause harm:	Communication failure with staff, parents, carers, children visitors, contractors, volunteers etc. which could increase the risk and rate of transmission of coronavirus (COVID-19)		
Existing level of risk			
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**
How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls		

1. Tell parents that if their child needs to be accompanied to the education or childcare setting, only one parent should attend.
2. Tell parents and young people their allocated drop off and collection times and the process for doing so, including protocols for minimising adult to adult contact (for example, which entrance to use)
3. Make clear to parents that they cannot gather at entrance gates or doors, or enter the site (unless they have a pre-arranged appointment, which should be conducted safely).
4. Advise visitors that they cannot enter the site unless they have a pre-arranged appointment, which should be conducted safely.
5. Ensure parents and young people are aware of recommendations on transport to and from education or childcare setting (including avoiding peak times). Read the Coronavirus (COVID-19): safer travel guidance for passengers.
6. Talk to staff about the plans (for example, safety measures, timetable changes and staggered arrival and departure times), including discussing whether training would be helpful.
7. Communicate early with contractors and suppliers that will need to prepare to support your plans for opening for example, cleaning, catering, food supplies, and hygiene suppliers.
8. Discuss with cleaning contractors or staff the additional cleaning requirements and agree additional hours to allow for this.
9. Communicate early with contractors and suppliers that will need to prepare to support your plans for opening for example, cleaning, catering, food supplies, and hygiene suppliers. Share academy risk assessment.
10. Discuss with cleaning contractors or staff the additional cleaning requirements and agree additional hours to allow for this. Share academy risk assessment. (Cleaning RA. All cleaning operatives will have completed a training session)
11. A tight window of arrival and departure will be maintained.
12. Communications on social distancing arrangements take place regularly to reinforce key messages

Remaining level of risk	Consider level of risk following use of control measures		
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

FCAT

Issue that could cause harm:	Home-visits to children, parents and carers which could increase the risk and rate of transmission of coronavirus (COVID-19) e.g. delivery of food parcel to vulnerable family.

Existing level of risk			
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Home visits should be a last resort and alternative measures implemented firstly.
2. Where a home visit is absolutely essential this must be agreed by the Headteacher and the member of staff must undertake the home visit on a volunteer basis only. No member of staff should be forced to undertake a home visit.
3. A time for home visit should be pre-arranged between the school and the parent/carer.
4. The member of staff should maintain a distance of 2 metres from any adult or child and must not enter the home.
5. The member of staff should drive to the home, knock on the door, leave the food parcel and return to their vehicle, locking the doors and drive away.
6. Lone working arrangements should be implemented between the member of staff and a member of SLT (e.g. agreed appointment time for the visit, member of staff to call SLT to confirm they have safely completed the home visit).
7. The member of staff must have business insurance for their personal vehicle.

Remaining level of risk	Consider level of risk following use of control measures

HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

Issue that could cause harm:	Implementation of the Emergency Evacuation Procedure/ Emergency Plan which could increase the risk and rate of transmission of coronavirus (COVID-19)

Existing level of risk			
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Existing Academy Emergency Evacuation procedure to continue to be followed, however ensuring that a 2 metre social distance is possible at all times when evacuating the building and when congregating at the emergency evacuation point. In addition, staff are to close doors as they leave the building on the route they take.
2. Existing Academy Emergency Plan to be followed in the event of loss of electrical power, loss of water supply, loss of communications, intruder etc. however ensuring that a 2 metre social distance is possible at all times.
3. To review any Personal Emergency Evacuation Plans (PEEP) for staff and children to ensure that control measures are implemented to minimise the risk and rate of transmission of coronavirus (COVID-19) between an individual and the adult facilitating the emergency evacuation.

Remaining level of risk	Consider level of risk following use of control measures

HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

FCAT

Issue that could cause harm:	**Premises statutory servicing, testing and monitoring not being completed resulting in legislative non-compliance and risk to health and safety of all groups.**

Existing level of risk			
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. All statutory servicing (weekly/monthly/6 monthly and annual testing and monitoring systems and audits) are in place and continuing in line with current trust and academy procedures.
2. To ensure a schedule of contractors is determined (so that that they can be appropriately briefed in advance of visiting the school and on the day regarding the academy's procedures for social distancing and good hygiene) for: Gas, Electric, Water, Lifts, Alarm, Fire equipment, Pat testing, Kitchen, Emergency lighting, Doors, Plant equipment, Ventilation.

Remaining level of risk	Consider level of risk following use of control measures

HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

Issue that could cause harm:	**Security during the partial closure and wider re-opening of schools** (intruders, trespassers)

Existing level of risk			
HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Academy Security Procedures
2. Academy Opening and Closing procedures
3. Academy Out of hours' procedures
4. Academy Lockdown plan
5. Academy Emergency Plan
6. FCAT Abusive Parents policy
7. CCTV
8. Increased COVID 19 signage including not to enter with any symptoms

Remaining level of risk	Consider level of risk following use of control measures

HIGH	**MEDIUM**	**LOW**	**NEGLIGIBLE**

Issue that could cause harm:	**Lack of Social Distancing and poor hygiene in Extracurricular activities including Before/After School Club provision which**

FCAT

	could increase the risk and rate of transmission of coronavirus (COVID-19)
Existing level of risk	

HIGH	MEDIUM	LOW	NEGLIGIBLE

How to manage it (control measures)	List your control measures required to reduce risk – add appropriate detail about the type and location of controls

1. Keeping children within their year groups or bubbles where possible. If it is not possible to maintain bubbles being used during the school day then schools should use small, consistent groups.
   1. Ensure regular cleaning of environment and equipment in line with COVID Cleaning Schedule.
   2. Follow the control measures as outlined under section titled "Lack of Social Distancing in the learning environment (classroom/ workshop/ hall/ outdoors) which could increase the risk and rate of transmission of coronavirus (COVID-19)" and section titled "Lack of social distancing and poor hygiene during break/ playtimes and lunchtimes which could increase the risk and rate of transmission of coronavirus (COVID-19)" and section titled Contact with surfaces/shared resources and poor hygiene which could increase the risk and rate of transmission of coronavirus (COVID-19)

Remaining level of risk	Consider level of risk following use of control measures

HIGH	==MEDIUM==	LOW	NEGLIGIBLE

Authorisation by Risk Assessor and Headteacher

OVERALL level of risk	Consider level of risk following use of control measures

HIGH	==MEDIUM==	**LOW**	**NEGLIGIBLE**

Assessor's comments	Insert comments relevant to findings as appropriate

Name of assessor	**Signature of assessor**	**Date**
S Baker	*S Baker*	13/01/2021

Head teacher comments	Insert comments relevant to assessment as appropriate

Name of Head teacher	**Signature of Head teacher**	**Date**
A Ashcroft	*AMAshcroft*	13/01/2021

Risk assessment reviews	Set future review dates & sign/comment upon completion