| The Howard INFECTIOUS DISEASES COVID-19 STEP 4 – AUTUMN TERMEARLY YEARS  |
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| **Hazard/****Activity** | **Persons at Risk** | **Risk** | **Control measures in use** | **Residual risk rating****H / M / L** | **Further Action Required** |
|  |  |  |  |  | **YES** | **NO** |
| Awareness of policies and procedures | StaffPupils Others | Inadequate information | * All staff, parents, governors, visitors and volunteers are aware of all relevant policies and procedures.
* All staff have access to all relevant guidance and legislation including, but not limited to, the following:
* The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013
* The Health Protection (Notification) Regulations 2010
* Public Health England (PHE) (2017) ‘Health protection in schools and other childcare facilities’
* DfE and PHE (2020) ‘COVID-19: guidance for educational settings’
* The relevant staff receive any necessary training that helps minimise the spread of infection, e.g. infection control training.
* The school keeps up-to-date with advice issued by, but not limited to, the following:
* DfE
* NHS
* Department for Health and Social Care
* PHE
* Staff are made aware of the school’s infection control procedures in relation to coronavirus via email or staff meetings and contact the school as soon as possible if they believe they may have been exposed to coronavirus.
* Parents are made aware of the school’s infection control procedures in relation to coronavirus via letter and social media – they are informed that they must contact the school as soon as possible if they believe their child has been exposed to coronavirus.
* Pupils are made aware of the need to tell a member of staff if they feel unwell.
 | MED |  | **** |
| Disruption to the running of the school in cases of local outbreak | StaffPupils Others | Infection control | * If you have several confirmed cases within 14 days, you may have an outbreak.
* You should call the dedicated advice service who will escalate the issue to your local health protection team where necessary and advise if any additional action is required, such as implementing elements of your outbreak management plan. You can reach them 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
 | MED |  | **** |
| Cleaning of school | StaffPupils Others | Infection Control | * All hard surfaces to be cleaned on a regular basis, this will include
* All door handles
* All tables and chairs used by staff and pupils
* Toilet flushes and regular cleaning of toilets.
* All classrooms to have spray disinfectant and where possible disposable cloths. If disposable cloths are not available use once and then put in wash.
* Regular cleaning of surfaces will reduce the risk of spreading the virus.
* All used cloths thrown away to be double bagged and then placed in a secure area i.e. lockable bin.
 | MED |  | **** |
| Ventilation class/office | PupilsStaff | Infection control | * Identify any poorly ventilated spaces and take steps to improve fresh air flow
* If mechanical ventilation systems are used to draw fresh air or extract air from a room these should be adjusted to increase the ventilation rate wherever possible
* Ensure that mechanical ventilation systems only circulate fresh outside air and where this is not possible, in a single room supplement with an outdoor air supply
* Where appropriate open external windows, internal doors and external doors to improve natural ventilation
* If external doors are opened, ensure that they are not fire doors and are safe to do so
 | MED |  | **** |
| Poor hygiene practice | StaffPupils Others | Ill Health | * You should continue to ensure that children clean their hands regularly, this can be done with soap and water or hand sanitiser
* Staff and visitors are encouraged to wash their hands with soap or alcohol-based sanitiser (that contains no less than 60% alcohol) and follow infection control procedures in accordance with the DfE and PHE’s guidance.
* Sufficient amounts of soap (or hand sanitiser where applicable), clean water and paper towels are supplied in all toilets and kitchen areas.
* Pupils are supervised by staff when washing their hands to ensure it is done correctly, where necessary.
* Pupils are discouraged from sharing cutlery, cups or food.
* All cutlery and cups are thoroughly cleaned before and after use.
* Cleaners to carry out daily, thorough cleaning that follows national guidance and is compliant with the COSHH Policy and the Health and Safety Policy.
* A senior member of staff arranges enhanced cleaning to be undertaken where required – advice about enhanced cleaning protocols is sought from the HPT/PHE
 | MED |  | **** |
| Spread of infection | StaffPupilsOthers | Lack of infection control | * Spillages of bodily fluids, e.g. respiratory and nasal discharges, are cleaned up immediately in line with guidance, using PPE at all times.
* Parents are informed not to bring their children to school or on the school premises if they show signs of being unwell and believe they have been exposed to coronavirus.
* Staff and pupils do not return to school before the minimum recommended exclusion period (or the ‘self-isolation’ period) has passed, in line with national guidance.
* Pupils who are unwell are not taken on school trips or permitted to enter public areas used for teaching, e.g. swimming pools.
* Parents notify the school if their child has an impaired immune system or a medical condition that means they are vulnerable to infections.
* The school in liaison with individuals’ medical professionals where necessary, reviews the needs of pupils who are vulnerable to infections.
* Any additional provisions for pupils who are vulnerable to infections are put in place by the headteacher, in liaison with the pupil’s parents where necessary.
 | MED |  | **** |
| Classroom management | Pupils Staff | Infection control | * It is no longer required for forward facing tables etc however care should still be taken on table management in a classroom setting.
* Outbreak management plans should cover the possibility of reintroduction of restrictions on mixing for a temporary period in case of local outbreak.
* It would be sensible to revert back to previous control measures in the event of a local outbreak.
* Continue to use a cautious approach with arrangements.
 | MED |  | **** |
| Singing and Parent and Child Groups  | Pupils StaffParents  | Infection Control  | * There are no restrictions in place for singing in groups.
* Some activities, however, can increase the risk of catching or passing on COVID-19.
 | MED |  | **** |
| Lunchtimes  | Pupils Staff | Infection Control  | * Lunchtime arrangements can revert back to previous arrangements.
* Tables must still be cleaned on a regular basis throughout dinner time activities.
 | MED |  | **** |
| Playtime and using equipment  | Pupils Staff  | Infection Control  | * Previous playtimes and groups can be reinstated and no restrictions in place regarding using and sharing play equipment.
 | MED |  | **** |
| Personal Protective EquipmentFace Coverings  | PupilsStaff | Infection control | * Face coverings are no longer advised for staff and visitors in classrooms or communal areas
* We recommend that they are worn in enclosed and crowded spaces where you may come into contact with people you don’t normally meet. This includes public transport and dedicated transport to school.”
* School will follow director of public health advice in cases of local outbreak.
* Schools put into place any actions or precautions advised by their local HPT.
* https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/999722/PPE\_in\_education\_childcare\_and\_childrens\_social\_care\_settings.pdf
 | MED |  | **** |
| Ill Health | StaffPupilsOthers | Coronavirus Symptoms | * Staff are informed of the symptoms of possible coronavirus infection, e.g. a cough, loss or change to sense of smell or taste and high temperature and are kept up-to-date with national guidance about the signs, symptoms and transmission of coronavirus.
* Any pupil or member of staff who displays signs of being unwell, such as having a cough, fever or a loss or change to their sense of smell or taste, and believes they have been exposed to coronavirus, is immediately taken out of the class and placed in an area where they will not come into contact with others and are supervised at all times.
* For pupils the relevant member of staff calls for emergency assistance immediately if pupils’ symptoms worsen.
* The parents of unwell pupils are informed as soon as possible of the situation by a relevant member of staff.
* Where contact with a pupil’s parents cannot be made, appropriate procedures are followed in accordance with those outlined in governmental guidance.
* Unwell pupils who are waiting to go home are kept in an area where they can be at least two metres away from others.
* Areas used by unwell staff and pupils who need to go home are appropriately cleaned once vacated, using a disinfectant and care to be taken when cleaning all hard surfaces.
* If unwell pupils and staff are waiting to go home, they are instructed to use different toilets to the rest of the school to minimise the spread of infection.
* Any pupils who display signs of infection are taken home immediately, or as soon as practicable, by their parents – the parents are advised to contact NHS 111 immediately or call 999 if the pupil becomes seriously ill or their life is at risk.
* Any members of staff who display signs of infection are sent home immediately and are advised to contact NHS 111 immediately or call 999 if they become seriously ill or their life is at risk.
* Any medication given to ease the unwell individual’s symptoms, e.g. Paracetamol, is administered in accordance with the Administering Medications Policy.
 | MED |  | **** |
| Poor management of infectious diseases | StaffPupils Others | Lack of infection control | * Staff are instructed to monitor themselves and others and look out for similar symptoms if a pupil or staff member has been sent home with suspected coronavirus.
* Staff are vigilant and report concerns about their own, a colleague’s or a pupil’s symptoms to the Headteacher or SLT as soon as possible. .
* The school is consistent in its approach to the management of suspected and confirmed cases of coronavirus.
* The school is informed by pupils’ parents when pupils return to school after having coronavirus – the school informs the relevant staff.
* Staff inform the headteacher when they plan to return to work after having coronavirus.
* A nominated person monitors the cleaning standards of school cleaning contractors and discusses any additional measures required with regards to managing the spread of coronavirus.
 | MED |  | **** |
| Lack of communication | StaffPupilsOthers | UnsafePractices | * The school staff reports immediately to the headteacher about any cases of suspected coronavirus, even if they are unsure.
* The headteacher contacts the local HPT or follows the advice given from and discusses if any further action needs to be taken.
* Schools put into place any actions or precautions advised by their local HPT.
* Schools keep staff and parents adequately updated about any changes to infection control procedures as necessary.
 | MED |  | **** |
| Asymptomatic testing | Pupils Staff | Infection control | * Over the summer, staff should continue to test regularly if they are attending settings that remain open.
* Regular testing will then pause in settings over the summer if they are closed.
* However, testing will still be widely available over the summer and kits can be collected either from your local pharmacy or ordered online.
* Early years staff should undertake twice weekly home tests whenever they are on site until the end of September, when this will also be reviewed.
* Early years children are not included in the rapid testing programme.
* PHE has advised there are limited public health benefits attached to testing early years children with rapid lateral flow tests.
* Young children may find the rapid lateral flow testing process unpleasant and are unable to self-swab
 | MED |  | **** |
| Positive Cases | PupilsStaff | Infection control | * School no longer need to do contact tracing as close contacts will be identified via NHS Test and Trace.
* School will support NHS Test and Trace when required to help identify close contacts

**From 16th August 2021*** From 16 August 2021, children **under the age of 18** **years** old **will no longer be required** to self-isolate if they are contacted by NHS Test and Trace as a close contact of a positive COVID-19 case.
* Instead, children will be contacted by NHS Test and Trace, informed they have been in close contact with a positive case and advised to take a PCR test.
* We would encourage all individuals to take a PCR test if advised to do so.
* Continue to have a role in working with health protection teams in the case of a local outbreak. If there is an outbreak in a setting or if central government offers the area an enhanced response package, a director of public health might advise a setting to temporarily reintroduce some control measures.
* Staff and children with a positive rapid lateral flow test result should self-isolate in line with the guidance for households with possible coronavirus infection. They will also need to get a free PCR test to check if they have COVID-19.
* Whilst awaiting the PCR result, the individual should continue to self-isolate.
* If the PCR test is taken within 2 days of the positive rapid lateral flow test, **and is negative**, it overrides the rapid lateral flow test and they can **return to the setting**, as long as the individual doesn’t have COVID-19 symptoms.
 | MED |  | **** |
| Reporting to OFSTED | Pupils Staff Others  | Legal Requirement  | * You must notify Ofsted, or the childminder agency with which you are registered, of any confirmed cases in the setting, whether a child or a staff member. You should also tell Ofsted if you have to close the setting as a result.
* This is a legal requirement. Report as **soon** as you are able to, and in any case within **14 days.**
 | MED |  | **** |
| Admitting children into school  | Pupils Staff | Infection Control  | * In most cases, parents and carers will agree that a pupil with symptoms should not attend the school, given the potential risk to others. If a parent or carer insists on a pupil attending your school, you can take the decision to refuse the pupil if, in your reasonable judgement, it is necessary to protect other pupils and staff from possible infection with COVID-19.
* Your decision would need to be carefully considered in light of all the circumstances and current public health advice.
 | MED |  | **** |
| CEV children | PupilsStaff | Infection control | * All CEV children should attend their education setting unless they are one of the very small number of children under paediatric or other specialist care who have been advised by their GP or clinician not to attend
 | MED |  | **** |
| Staff CEV | Staff | Infection control | * CEV people are **no longer advised** to shield but may wish to take extra precautions to protect themselves and to follow the practical steps set out in the CEV guidance to minimise their risk of exposure to the virus
* Staff should attend their place of work if they cannot work from home
* The school will follow DHSC updated guidance
 | MED |  | **** |
| Educational visits | PupilsStaff | Financial risk | * If booking new visits ensure that the school have adequate financial protection in place
* From the start of the Autumn school term you can go on international visits.
* You should be aware that the travel list (and broader international travel policy) is subject to change and green list countries may be moved into amber or red.
* The travel lists may change during a visit and you must comply with international travel legislation and should have contingency plans in place to account for these changes.
* The school should have a contingency plan in place to account for any changes in the government travel list
* Full risk assessments must be undertaken.
 | MED |  | **** |
| Transport and face coverings  |  |  | * We recommend that they are worn in enclosed and crowded spaces where you may come into contact with people you don’t normally meet. This includes public transport and dedicated transport to school ”
* School will follow director of public health advice in cases of local outbreak.
* Schools put into place any actions or precautions advised by their local HPT.
 | MED |  | **** |
| Wraparound care | Pupils | Infection Control  | * Consideration should be given to the latest government advice regarding the specific activity being undertaken and venue visited
* Children should be encouraged to attend settings close to where they live or go to school, ideally within walking or cycling distance
* Where they attend venues further afield they should follow latest guidance <https://www.gov.uk/guidance/coronavirus-covid-19-safer-travel-guidance-for-passengers>
* Wraparound childcare providers can offer provision to all children, without restriction on the reasons for which they may attend
* Ensure you have enough staff available to meet the required ratio
 | MED |  | **** |
| Out of school settings Parents attendance  | Pupils Parents StaffOthers  | Infection Control  | * Parents are no longer limited to specific number attendance.
* Ensure up to date contact information is available in the event of an emergency.
 | MED |  | **** |