Risk Assessment Covid-19 Schools (step 4)



This example risk assessment is not exhaustive and should be used a guide for typical COVID-19 risk management considerations and controls.

You must ensure robust arrangements are in place to control the risks if adopting any part of this assessment. It is important this assessment and proposed action is consulted with employees and their representatives. **Please record and highlight your additional risk control measures / adaptations you have made for your individual school.** Please record that employee have been consulted and made aware of the contents of the risk assessment.

Step 1: Identify the hazards. **Step** 2: Decide who might be harmed and how. **Step** 3: Evaluate the **risks** and decide on precautions. **Step** 4: Record your findings and implement them. **Step 5**: Review your **assessment** periodically and where there have been significant changes or any learning from accidents / incidents or work-related ill health. Risks should be reduced to as low as reasonably practicable.

Having assessed their risk, schools must work through the below system of controls, adopting measures to the fullest extent possible in a way that addresses the risk identified in their assessment, works for their school and allows them to deliver a broad and balanced curriculum for their pupils, including full educational and care support for those pupils who have Special Educational Needs and Disabilities (SEND).

Control Measures/Prevention

You must always:

- 1) Ensure good hygiene for everyone.
- 2) Maintain appropriate cleaning regimes, using standard products such as detergents.
- 3) Keep occupied spaces well ventilated.
- 4) Follow public health advice on testing, self-isolation and managing confirmed cases of COVID-19. Minimise contact with individuals who are required to self-isolate by ensuring they do not attend school.

In specific circumstances:

- Ensure individuals wear the appropriate personal protective equipment (PPE) where necessary.
- Promote and engage in asymptomatic testing, where available.
- Our Local Public Health Team strongly recommend face coverings, where social distancing of 1m+ cannot be maintained.
- Face masks (IIR Surgical Face masks) are recommended for use by staff, where social distancing is not possible.

Response to any infection:

You must always:

- Promote and engage with the NHS Test and Trace process.
- Manage and report confirmed cases of coronavirus (COVID-19) amongst the school community.
- Contain any outbreak by following local health protection team advice.

Key Considerations:

<u>Cleaning / Hygiene protocols</u>: Coronavirus can transfer from people to surfaces. It can be passed on to others who touch the same surfaces. Keeping your school buildings clean and frequent handwashing reduces the potential for coronavirus to spread and is a critical part of making and keeping your school safe.

<u>Ventilation</u>: Adequate ventilation reduces how much virus is in the air. It helps reduce the risk from aerosol transmission, when someone breathes in small particles (aerosols) in the air after a person with the virus has been in the same enclosed area. The law says employers must make sure there's an adequate supply of fresh air (ventilation) in enclosed areas. This has not changed during the pandemic.

You should be maximising the fresh air in a space and this can be done by:

- Natural ventilation which relies on passive air flow through windows, doors and air vents that can be fully or partially opened.
- · Mechanical ventilation using fans and ducts to bring in fresh air from outside, or
- a combination of natural and mechanical ventilation, for example where mechanical ventilation relies on natural ventilation to maximise fresh air.

Ventilation must be considered alongside other control measures needed to reduce risks of transmission as part of making your school building safe. A priority for your assessment is to identify and control poorly ventilated occupied areas.

Respiratory hygiene: The 'catch it, bin it, kill it' approach continues to be very important. The following link contains free resources for you, including materials to encourage good hand and respiratory hygiene -Information about the Coronavirus (e-bug.eu.)

Use of personal protective equipment (PPE) Most staff in schools will not require PPE beyond what they would normally need for their work. The guidance on the use of PPE in education, childcare and children's social care settings provides more information on the <a href="https://example.com/pressettings-normalized-care-com/personal-protective-equipment (PPE) in education, childcare and children's social care settings, including for aerosol generating procedures (AGPs) - GOV.UK (www.gov.uk)

Revised Risk Assessment with effect from August 2021

Social Distancing - No social distancing, however our local Public Health Team recommend 1m+ apart, where possible e.g., Staff to Staff 1m+, Staff to Pupils 1m+ and Staff to Visitors 1m+.

Face Coverings

- Mandatory face coverings remain in place on London transport. We recommend that children and young people aged 11 and over continue to wear a face coverings when travelling to secondary school or college.
- Our Local Public Health Team strongly recommend face coverings, where social distancing of 1m+ cannot be maintained (including the provision of First Aid).
- Government expects and recommends that people wear face coverings in crowded areas such as public transport.
- We recommend that visitors and contractors continue to be required to wear face coverings in schools.

Bubbles – As part of Step 4, the Government advice is that bubbles no longer need to be maintained. However, if there is an outbreak in your nursery, school, or college, or if your nursery, school, or college is in an enhanced response area, you might be advised that it is necessary to reintroduce bubbles or to keep groups apart for a temporary period to reduce mixing between groups.

Contact Tracing - Responsibility for contact tracing will be removed from schools and passed to NHS Test and Trace.

Reporting of Cases - School MDS reporting is to continue for cases. Parents will be asked to continue to let schools know of cases.

Testing - Secondary school pupils and staff are encouraged to continue to take LFD tests 2 x per week throughout the school break if they are attending summer schools or holiday clubs/ activities. Secondary school pupils should take 2x on school site/supervised LFT 3-5 days apart on their first week of return. Pupils should then test 2 x weekly at home until the end of September.

Outbreak - In the event of an outbreak, DsPH can advise on targeted time limited rules if necessary - awaiting further guidance on definitions.

How to use this template:

There are mandatory fields (in black text) that are required to stay in your risk assessment. There are also fields that may or may not apply to your school area (in grey text). The grey sections may apply now or may apply in the future.

Each greyed out point must be fully considered and where applicable and in place at your school, this would be demonstrated by turning the grey text into black text. It is expected that all relevant suggested controls have been fully implemented where they apply to your school. If a control is not relevant and does not apply, please leave it in place as grey text.

Do not just copy this example, as that may not satisfy the law and may not protect your employees, pupils and visitors. You must think about specific hazards and controls relevant to your school. At the bottom of most sections of the Risk Assessment template, there is space under the heading 'Please add any additional specific arrangements applicable to your school' for you to add items specific to your school which may not be included within the generic template. This risk assessment template must be completed taking into full consideration current government guidelines for schools:

Schools COVID-19 operational guidance (publishing.service.gov.uk)
SEND and specialist settings - additional operational guidance: COVID-19 (publishing.service.gov.uk)
Contingency framework: education and childcare settings - GOV.UK (www.gov.uk)

Risk Assessment Covid-19

Activity/Person/Location	Managing COVID-19 risks
School	St Peter's
Head Teacher	Mrs Clare Scott
Assessor(s) including employee representative	SLT & Governors
Date of assessment	3 rd December 2021
Review date (Monthly)	End of January 2022

Key	
	Social Distancing to minimise potential spread of COVID-19
4	Hygiene protocols to minimise potential spread of COVID-19
+	Additional considerations to manage and control risk

Resultant Risk Rating Please tick				
High				
Medium	X			
Low (normal)				

Risk rating to be applied by each school following implementation of control measures. Select a risk rating to reflect the overall risk once control measures are in place. You are aiming to ensure that the risk is as low as reasonably practicable (ALARP)

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
1. There is a confirmed case of coronavirus in a setting	Staff, pupils, contractors, visitors Possible transmission of the virus between staff to staff, Staff to pupil, pupil to pupil and into the wider community. However, transmission of virus between pupil to pupil and between pupil to staff is negligible. People can catch the virus from others who are infected in the	Protocol in place in line with <u>Guidance for schools and educational settings</u> contains detailed guidance for settings on: cleaning, testing and tracing, PPE and what settings should do in response to a case being confirmed. Schools should refer to this guidance and continue to follow measures, along with handwashing, cleaning, and self-isolation to lower the risk of transmission. Child / young person / staff member with symptoms Anyone with symptoms should be advised NOT to come to the school premises, they should be advised to self-isolate for 10 days (along with their household, apart from household members who are not required to self-isolate) and get a PCR test. PCR tests currently not recommend after a positive LFT Staff and children can return on day 8 if they have had a negative LFT on days 6 and 7 which are 24 hours apart.				

hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
follo vir pe pe dro no sp pe vir ex the su 72 the su pe co pe up bre dro co su the the mo Ex vir mi sy co or	how? (risk) owing ways: rus moves from erson-to- erson in roplets from the ose or mouth oread when a erson with the rus coughs or khales e virus can urvive for up to 2 hours out of	a PCR test and self-isolate for 10 days. Their fellow household members should self-isolate for 10 days unless exempt from self-isolation. Stay at home guidance is available here. Individuals are not required to self-isolate if they live in the same household as someone with COVID-19, or are a close contact of someone with COVID-19, and any of the following apply: • they are fully vaccinated • they are below the age of 18 years and 6 months • they have taken part in or are currently part of an approved COVID-19 vaccine trial • they are not able to get vaccinated for medical reasons Instead, they 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. All staff and students who are attending an education or childcare setting will have access to a PCR test if they display symptoms of coronavirus and are strongly encouraged to get tested in this scenario. Employee refusal to arrange a test will need to be discussed with the manager and the employee. If the child, young person or staff member tests negative, they can return to their setting and the fellow household members (who are not exempt from self-isolation) can end their self-isolation. If a child with symptoms 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				•
sy	evere vmptoms clude	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 1m+ away from other people. Appropriate PPE should also be used if close contact is necessary, further information				

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Covid-19 Outbreaks on site	pneumonia in both lungs which can lead to death. The children are generally asymptomatic or have mild symptoms only and the transmission rate to other children or adults is low or negligible	on this can be found in the guidance: The use of personal protective equipment (PPE) in education, childcare and children's social care settings, including for aerosol generating procedures (AGPs) - GOV.UK (www.gov.uk). Any rooms they use should be cleaned after they have left. The household (including any siblings) should follow the PHE guidance: Stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection - GOV.UK (www.gov.uk). In exceptional circumstances, if parents or carers cannot arrange to have their child collected, if age-appropriate and safe to do so the child should walk, cycle or scoot home. If this is not possible, alternative arrangements may need to be organised by the school i.e., a taxi may be available or the local authority may be able to help source a suitable vehicle which would provide appropriate protection for the driver, who must be made aware that the individual has tested positive or is displaying symptoms. 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 1m+ 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. Any members of staff who have helped someone with symptoms and any pupils who have been in close contact with them do not need to go home to self-isolate unless they develop symptoms themselves (in which case, they should arrange a test) or if the symptomatic person	Contact Local Public Health Team and LCRC in case of an outbreak. Please visit the council's website to access the Outbreak Action Cards and SOP for your setting			

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		subsequently tests positive or they have been requested to do so by NHS Test and Trace.				
		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 with normal household bleach 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.				
		Child / young person / staff member with a positive test result				
		If there is a confirmed case of coronavirus (a child, young person or a staff member with a positive test result) in a setting, they should be sent home and advised to self-isolate for 10 days. Their fellow household members (who are not exempt from self-isolation) should self-isolate for 10 days. Stay at home guidance is available here .				
		Where the child, young person or staff member tests positive, the rest of their class within their childcare or education setting should not be sent home unless the school has spoken to the Local Public Health Team and London Coronavirus Response Centre. The other household members of that wider class do not need to self-isolate unless the child, young person or staff member they live with in that class subsequently develops symptoms.				
		As part of the NHS Test and Trace programme, if other cases are detected within the cohort or in the wider setting, Local Public Health Team has put Outbreak Action Cards and SOPs in various settings as part of the Local Outbreak Management Plan. Further guidance can also be found: Contingency framework: education and childcare settings - GOV.UK (www.gov.uk)				
		Please follow these.				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		In case of an outbreak (please see definitions below), contact the local Public health team and PHE London Coronavirus Response Cell (LCRC) as below:				
		Contact Local PH team on pauline.starkey@lbbd.gov.uk				
		They will				
		 Respond to your enquiries Give advice if there are suspected coronavirus cases (i.e. before test result back) Gives ongoing support to settings managing outbreaks 				
		Contact PHE (LCRC) on 0300 303 0450				
		They will				
		 Give initial advice when there is a person with confirmed coronavirus in a high-risk setting Want organisations to notify them of all confirmed (test positive) cases in high-risk local settings (Notifications to be made via LCRC@phe.gov.uk<mailto:lcrc@phe.gov.uk< li=""> or call 0300303030450) If PHE confirm that there is an outbreak in any setting, they will still: </mailto:lcrc@phe.gov.uk<>				
		 Support setting to complete an outbreak risk assessment Run through infection prevention and control check list Support with communications, if needed Alert local authority public health team who will provide ongoing support. Establish a multi-agency incident management team (if required) 				
		The LA will undertake an outbreak risk assessment to help mitigate the risks. (Please note this is different from the Individual RA and Schools RA already undertaken)				

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		Where settings are observing guidance on <u>COVID-19</u> : infection <u>prevention and control (IPC)</u> , which will reduce risk of transmission, closure of the whole setting will not generally be necessary.				
		Outbreak definition as follows. COVID-19 Education Setting Cluster and Outbreak Definitions.				
		Cluster definition: Two or more test-confirmed cases of COVID-19 among individuals associated with a specific non-residential setting with illness onset dates within a 14-day period.				
		(In the absence of detailed information about the type of contact between the cases).				
		End of cluster No test-confirmed cases with illness onset dates in the last 14 days.				
		Outbreak definition:				
		Two or more test-confirmed cases of COVID-19 among individuals associated with a specific non-residential setting with illness onset dates within 14 days, and one of:				
		 Identified direct exposure between at least 2 of the test-confirmed cases in that setting (for example under one metre face to face or spending more than 15 minutes within 2 metres) during the infectious period of one of the cases. When there is no sustained local community transmission - absence of an alternative source of infection outside the setting for the initially identified cases. 				
		End of outbreak No test-confirmed cases with illness onset dates in the last 28 days in that setting.				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		Note: The threshold for the end of an outbreak is higher than the end of a cluster.				
		covid-19-epidemiological-definitions-of-outbreaks-and-clusters				
		When a setting should consider extra action				
		For settings testing pupils, students and staff in asymptomatic test sites (ATS) after the summer holidays, this section only applies after the initial two ATS tests are complete.				
		The thresholds, detailed below, can be used by settings as an indication for when to seek further public health advice, for example when to introduce extra measures. Most education and childcare settings, whichever of these thresholds is reached first:				
		 5 children, pupils, students or staff, who are likely to have mixed closely, test positive for COVID-19 within a 10-day period; or 10% of children, pupils, students or staff who are likely to have mixed closely test positive for COVID-19 within a 10-day period 				
		For special schools, residential settings, and settings that operate with 20 or fewer children, pupils, students and staff at any one time: • 2 children, pupils, students and staff, who are likely to have mixed closely, test positive for COVID-19 within a 10-day period Identifying a group that is likely to have mixed closely will be different for each setting.				
		The <u>Contingency framework: education and childcare settings</u> (<u>publishing.service.gov.uk</u>) provides further guidance and examples for each sector, but a group will rarely mean a whole setting or year group. Schools should work with their local HPTs to identify any additional measures to put in place.				
		All settings should seek public health advice if a pupil, student, child or staff member is admitted to hospital with COVID-19. Hospitalisation could indicate increased severity of illness or a new variant of concern.				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
2. Testing and contact tracing	Staff, Pupils, visitors, contactors (Risk - as set out in section 1)	The NHS Test and Trace programme will play an important role in helping to minimise the spread of coronavirus in the future. It will also include more traditional methods of contact tracing if a child, young person or parent test positive. Testing remains voluntary but strongly encouraged by Public Health.	Parents, visitors, contractors and pupils with a smart phone should download the app.			
		Staff who have had a positive COVID-19 PCR test in the past 90 days should not take another (PCR test) unless they develop new symptoms of Covid-19.				
		If, however, you do have an LFD antigen test within 90 days of a previous positive COVID-19 PCR test, for example as part of your twice weekly workplace testing programme, and the result of this test is positive, you and your household should self-isolate (*unless exempt – see paragraph Tracing close contacts and isolation further down in this section) and follow the steps in this guidance: Stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection - GOV.UK (www.gov.uk).				
		If it is more than 90 days since you tested positive by PCR for COVID-19, and you have new symptoms of COVID-19, or a positive LFD antigen or PCR test, follow the steps in this guidance again.				
		Schools must ensure that staff members and parents/carers understand that they will need to be ready and willing to:				
		Book a test if they are displaying symptoms. 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, including children under 5, but children aged 11 and under will need to be helped by their parents/carers if using a home testing kit.	If a positive test is reported an advice letter will be sent	Head teacher		

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		Self-isolate if they are displaying symptoms and follow the guidance: Stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection - GOV.UK (www.gov.uk).				
		Coronavirus testing is available to everyone in England with symptoms (a new, continuous cough; high temperature; or a loss of or change in your normal sense of smell or taste). Further guidance can be found using the following link: Symptoms of coronavirus (COVID-19) - NHS (www.nhs.uk)				
		You can get an NHS test if at least one of the following applies:				
		you have a high temperature				
		you have a new, continuous cough				
		you've lost your sense of smell or taste or it's changed				
		you've been asked to get a test by a local council				
		you're taking part in a government pilot project				
		you've been asked to get a test to confirm a positive result				
		You can also get a test for someone you live with if they have symptoms.				
		How to book a test				
		 People can register for a test at <u>Testing for coronavirus (COVID-19) - NHS (www.nhs.uk)</u> Those who do not have any access to the internet, or who have difficulty with the digital portals, can ring a new 119 service to book their test. People with hearing or speech difficulties can call 18001 119. 				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		When to get a test				
		If you have symptoms, get a test as soon as possible.				
		Book a visit to a test site to have the test today. Test sites are open 7 days a week Get a coronavirus test LBBD. Order a home test kit if you cannot get to a test site.				
		Asymptomatic Testing				
		Secondary schools were asked to provide testing on-site through an asymptomatic testing site (ATS).				
		Schools should retain a small ATS on-site so they can offer testing to pupils who are unable or unwilling to test themselves at home.				
		During the summer holidays, pupils will potentially mix with lots of other people, so all secondary school pupils should receive 2 on-site lateral flow device tests, 3-5 days apart, on their return in the autumn term.				
		Settings may commence testing from 3 working days before the start of term and can stagger return of pupils across the first week to manage this.				
		Staff should undertake twice weekly home tests whenever they are on site until the end of September, when this will be reviewed.				
		There is no need for primary age pupils to test over the summer period. They will be offered the 2 tests at an ATS at the beginning of the autumn term when they start at their secondary school as a new year 7. Schools may choose, however, to start testing year 6 pupils earlier, including in summer schools, depending on their local circumstances				
		Home testing				
		Both pupils and staff in secondary schools should then be supplied with LFD test kits to self-swab and test themselves twice a week at				

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		home until the end of September, when this will be reviewed. Staff and pupils must report their result to NHS Test and Trace as soon as the test is completed either online or by telephone as per the instructions in the home test kit. Staff and pupils should also share their result, whether void, positive or negative, with their school. Pupils aged 18 and over should self-test and report the result, with assistance if needed. Adolescents aged 12 to 17 should self-test and report with adult supervision. The adult may conduct the test if necessary. Children aged 11 attending a secondary school should be tested by an adult.				
		Confirmatory PCR tests – currently suspended aafter a positive LFT result				
		Those with a negative LFD test result can also continue to attend school and use protective measures.				
		Additional information on PCR test kits for schools and further education providers is available via the following link: Coronavirus (COVID-19): test kits for schools and FE providers - GOV.UK (www.gov.uk)				
		Tracing close contacts and isolation				
		Close contacts will now be identified via NHS Test and Trace and education settings will no longer be expected to undertake contact tracing.				
		As with positive cases in any other setting, NHS Test and Trace will work with the positive case and/or their parent to identify close contacts. Contacts from a school setting will only be traced by NHS Test and Trace where the positive case and/or their parent specifically identifies the individual as being a close contact. This is likely to be a small number of individuals who would be most at risk of contracting COVID-19 due to the nature of the close contact. You may be contacted in exceptional cases to help with identifying close contacts, as currently happens in managing other infectious diseases.				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		Settings will 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, our director of public health might advise a setting to temporarily reintroduce some control measures.				
		Individuals are not required to self-isolate if they live in the same household as someone with COVID-19, or are a close contact of someone with COVID-19, and any of the following apply:				
		they are fully vaccinated				
		 they are below the age of 18 years and 6 months 				
		 they have taken part in or are currently part of an approved COVID-19 vaccine trial 				
		they are not able to get vaccinated for medical reasons				
		Instead, they will be contacted by NHS Test and Trace, informed they have been in close contact with a positive case and advised to take a <u>PCR test</u> . We would encourage all individuals to take a PCR test if advised to do so.				
		Staff who do not need to isolate, and children and young people aged under 18 years 6 months who usually attend school, and have been identified as a close contact, should continue to attend school as normal.				
		18-year-olds will be treated in the same way as children until 6 months after their 18th birthday, to allow them the opportunity to get fully vaccinated. At which point, they will be subject to the same rules as adults and so if they choose not to get vaccinated, they will need to self-isolate if identified as a close contact.				

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3. Contingency Plan to deal with an outbreak	Staff, Pupils, visitors, contactors (Risk - as set out in section 1)	If a local area sees a spike in infection rates that is resulting in localised community spread, appropriate authorities will decide which measures to implement to help contain the spread. The Department for Education will be involved in decisions at a local and national level affecting a geographical area, and will support appropriate authorities and individual settings to follow the health advice. For self-isolating pupils, remote education plans will be put in place. These should meet the same expectations as those for any pupils who cannot yet attend school at all due to coronavirus (COVID-19). Schools should maintain capacity to deliver remote learning for the next academic year, including pupils who face challenges to return due to COVID-19 travel restrictions for the period they are abroad. See guidance on remote education support. Full expectations for remote education, support and resources can be found on the Safeguarding - Get Help with Remote Education - GOV.UK. In the event of a local outbreak, the PH health protection team or local authority may advise a school or number of schools to close temporarily to help control transmission. Schools will also need a contingency plan for this eventuality. This may involve a return to remaining open only for vulnerable children and the children of critical workers, and providing remote education for all other pupils.	Ensure Google Classroom is set up ready for remote teaching and learning by all staff including new teachers Ensure all staff have received training and are confident to deliver this.	Head Teacher Computi ng Lead Rachael Jenkins	Septembe r 2021	
4. Communication strategy (communication to parents / guardians)	Staff, Pupils, visitors, contactors (Risk - As set out in section 1)	Protocol in place and includes:		Head Teacher	ongoing	ongoing

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		 Our Local Public Health Team strongly recommend face coverings, where social distancing of 1m+ cannot be maintained. including for the provision of First Aid. We recommend that visitors and contractors continue to be required to wear face coverings in schools. 	Regular communication with parents to inform them of updates.	Head	ongoing	ongoing
		 If parents of pupils with significant risk factors are concerned, schools should discuss their concerns and provide reassurance of the measures they are putting in place to reduce the risk in school. 	Letter to parents to explain any new arrangements (ongoing)	Teacher		
		If there is an outbreak in the school, the Director of Public Health may advise that face coverings should temporarily be worn in communal areas or classrooms (by pupils, staff and visitors, unless exempt). There are all the Original Alexander and the pupils are all the pupils.	Regular parent updates	Head Teacher	ongoing	ongoing
		 Those positive with Covid-19 or symptomatic - phone or email notification to be urgently made to the school and affected persons to stay away from site until required isolation periods have passed. 	via Groupcall and parent mail.			
		Parents to be advised to follow guidance below COVID-19: guidance for households with possible coronavirus infection - GOV.UK (www.gov.uk)				
5. Shielded and clinically vulnerable Groups including those who are pregnant	Staff, pupils, contractors, visitors (Risk - as set out in section 1)	 Where parents are concerned about their child's attendance, they should speak to their child's school about their concerns and discuss the protective measures that have been put in place to reduce the risk. They should also discuss other measures that can be put in place to ensure their children can regularly attend school. Please see link for specific information on: SEND and specialist settings - additional operational guidance: COVID-19 (publishing.service.gov.uk). School attendance is mandatory for all pupils of compulsory school age, and it is a priority to ensure that as many children as possible regularly attend school. Please see link: School attendance: guidance for schools - GOV.UK (www.gov.uk). 	If parents of pupils with significant risk factors are concerned, we recommend schools discuss their concerns and provide reassurance of the measures they are putting in place to reduce the risk in school. Schools should be clear with parents that pupils of compulsory school age must be in school unless a statutory reason applies (for example, the pupil has			

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
hazards? SEND pupils Black, Asian and Minority Ethnic (BAME) and clinically	UK and international data suggest that people from Black, Asian and Minority Ethnic (BAME) backgrounds are disproportionately	 Where children and young people with EHC plans are not attending their education setting because they are following public health advice, multi-agency professionals should collaborate to agree how to meet their duties to deliver the provision set out in the EHC plan. This may include face-to-face visits to the home, or virtual support by means of video or telephone calls, or via email. As shielding is paused, some 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). Please read COVID-19: guidance on shielding and protecting people defined on medical grounds as extremely vulnerable for more advice. Where a pupil is unable to attend school because they are complying with clinical and/or public health advice, we expect schools to be able to immediately offer them access to remote education. Where schools apply the full measures in this guidance the risks to all staff will be mitigated significantly, including those who are extremely clinically vulnerable and clinically vulnerable. We expect 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. Advice for pregnant women, is available here. If you are 28 weeks pregnant and beyond, or if you are pregnant and have an underlying health condition that puts you at a greater risk of severe illness from COVID-19 at any gestation, you should take a more precautionary approach. 				
vulnerable groups	affected by COVID-19.	 This is because although you are at no more risk of contracting the virus than any other non-pregnant person who is in similar health, you have an increased risk of becoming severely ill and of pre-term birth if you contract COVID-19. Our advice is still that those who are 28 weeks plus, continue to work from home. Previous practices should continue, i.e., Individual Risk Assessment, referral to OH, when necessary. 				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		 Staff should discuss these matters with line management/Schools HR and undertake a risk assessment. All pregnant women should be offered the COVID-19 vaccine at the same time as the rest of the population, in line with the age group roll out. Please see link for further information: COVID-19 vaccines, pregnancy and breastfeeding (rcog.org.uk) Pupil local individual SEND care plans and risk assessments (where in place) reviewed regularly. To include the need for relevant PPE use. Where closer contact may be necessary (for example personal care) appropriate PPE to be worn. This would include disposable gloves, disposable apron and fluid resistant surgical facemask. Eye protection is also required if the individual is coughing, spitting. Management staff to follow manufactures instructions on how to use PPE correctly Individual Health Risk Assessment undertaken with BAME / Clinically Vulnerable staff members using 'appendix 1' of this document. 				

Important considerations for occupied spaces within the school building.

- Frequent and thorough hand cleaning should now be a regular practice. The school should continue to ensure that staff / visitors and pupils clean their hands regularly. This can be done with soap and water to minimise possible adverse dermatological effects (20 seconds minimum recommended) or with sanitiser.
- Implementation and maintaining an appropriate cleaning schedule. This should include regular cleaning of areas and equipment (for example, twice per day), with a particular focus on frequently touched surfaces. PHE has published guidance on the <u>cleaning of non-healthcare settings</u>.
- Keep occupied spaces well ventilated when your school is in operation, it is important to ensure it is well ventilated and that a comfortable teaching environment is maintained. You should identify any poorly ventilated spaces as part of your risk assessment and take steps to improve fresh air flow in these areas, giving particular consideration when holding events where visitors such as parents are on site, for example school plays/parents' evenings.
- Mechanical ventilation is a system that uses a fan to draw fresh air, or extract air from a room. These should be adjusted to increase the ventilation rate wherever possible and checked to confirm that normal operation meets current guidance and that only fresh outside air is circulated. If possible, systems should be adjusted to full fresh air or, if this is not possible, then systems should be operated as normal as long as they are within a single room and supplemented by an outdoor air supply.

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed

- Where mechanical ventilation systems exist, you should ensure that they are maintained in accordance with the manufacturers' recommendations. Opening external windows can improve natural ventilation, and in addition, opening internal doors can also assist with creating a throughput of air. If necessary, external opening doors may also be used (if they are not fire doors and where safe to do so).
- CO2 monitors will also be provided to all state-funded education settings from September to help assess whether a space is poorly ventilated. Further information with be issued as monitors are rolled out.
- The school should aim to achieve a sensible balance between increased ventilation and a comfortable temperature (thermal comfort) in classrooms and other occupied spaces. The minimum temperature maintained in classrooms and offices should not be below 16°C. To balance the need for increased ventilation while maintaining a comfortable temperature, consider: opening high level windows in colder weather in preference to low level to reduce draughts, increasing the ventilation while spaces are unoccupied (for example, 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 draughts Heating should be used as necessary to ensure comfort levels are maintained particularly in occupied spaces.
- The 'catch it, bin it, kill it' approach continues to be very important. The following link contains free resources, including materials to encourage good hand and respiratory hygiene Information about the Coronavirus (e-bug.eu.)

6. Entry to school premises egress from school premises	Staff, pupils, contractors, visitors (Risk - as set out in section 1)	Schools should consider well in advance future events, including parents' evenings – how they will be managed in terms of COVID-19 arrangements e.g., maintaining good hygiene and well ventilated spaces.		Advice / instruction on recommended social distancing of 1m+ / hygiene and cleaning practices		
		We currently discourage non-essential visitors to the school. All visitors must wear a face covering.	•	Information / protocol on safe		
		We have written to parents to encourage the use of face coverings whilst on the school site, and to avoid stopping to chat on the school pathways.		entry to be disseminated to parents / carers / contractors		
		Our Local Public Health Team strongly recommend face coverings, where social distancing of 1m+ cannot be maintained.	•	Staff reminded of protocols and the		

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		We recommend that visitors and contractors continue to be required to wear face coverings in schools.	discretion to flex up if necessary • All parents and visitors will only have access to the school			
		 Appropriate disposal of face coverings and hygiene arrangements are in place are in place for staff and pupils who continue to wear face coverings. 1m+ distancing maintained on school entry approaches, where possible. Face coverings continue to be used where 1m+ distancing cannot be maintained staff/visitors. 	in the event of an emergency and if they have an appointment.			
		 Clean hands thoroughly more often than usual. Hand washing / sanitisation stations (ideally soap and water to minimises possible adverse dermatological effects) at point of entry to school. All people entering the school must sanitise hands prior to entry. (20 seconds minimum recommended for washing with soap and water) Staff trained on hygiene protocols to eliminate cross-infection risks. Enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents Age-appropriate instruction provided to pupils on hand washing methods. To dispose of waste from people with symptoms of coronavirus, such as disposable cleaning cloths, tissues, and PPE: Put it in a plastic rubbish bag and tie it when full Place the plastic bag in a second bin bag and tie it Put it in a suitable and secure place marked for storage Waste to be stored safely and securely kept away from children. 	 Protocols to be communicated to parents and visitors 			
		Breakfast and After School Club are open Nursery Parents will drop off their children at the Nursery door				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		 Reception, Year 1 and Year 2 parents will drop their children at their classroom doors Junior (Year 3-6) children will go to their classroom via the junior playground or dropped by their parents Parents can drop off their children between 8:45am and 9:00am. 				
7. Reception areas	Staff, pupils, contractors, visitors (Risk - as set out in section 1)	Our Local Public Health Team strongly recommend face coverings, where social distancing of 1m+ cannot be maintained. We insist that visitors and contractors continue to wear face coverings in schools.				
		 Enhanced cleaning frequency of regular touched items. Catch it, Bin it, kill it notices displayed. Hand washing poster displayed. Hand sanitiser stations located in reception. Sanitisation/hand washing protocols observed when handling deliveries. Non fire/security doors propped open to minimise touching of surfaces and increase ventilation. Provision of closed top bins available for disposal of face coverings and other PPE which may be worn. Face coverings are not recyclable at present and should not be placed in recycle bins. Further guidance can be found here https://www.gov.uk/guidance/coronavirus-covid-19-disposing-of-waste 				
		 Ventilation is maximised (maintaining thermal comfort) in this space via: Natural ventilation - passive air flow through windows, doors and air vents that can be fully or partially opened Mechanical ventilation - using fans and ducts to bring in fresh air from outside, or 				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		 a combination of natural and mechanical ventilation, for example where mechanical ventilation relies on natural ventilation to maximise fresh air Note: Fire Doors must not be propped open unless connected to specifically designed electronic/magnetic devices which release automatically when fire alarm is activated. Screens will remain in place. Queuing minimised, where reasonably practicable. 1m+ distancing maintained, where possible. Face coverings continue to be used where 1m+ distancing cannot be maintained staff/visitors. Contractors and delivery companies should have safe systems of work, risk assessment and follow our Covid-19 secure arrangements. 				
8. Classrooms	Staff, pupils, contractors, Visitors (Risk - as set out in section 1)	Our Local Public Health Team strongly recommend face coverings, where social distancing of 1m+ cannot be maintained. We recommend that visitors and contractors continue to be required to wear face coverings in classrooms. COVID-19: cleaning of non-healthcare settings outside the home - GOV.UK (www.gov.uk)				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		 Classroom based resources and equipment used and shared is cleaned regularly, along with all frequently touched surfaces. Increased cleaning frequencies of hard surfaces / emptying of bins. in place. Adequate tissues are available to clear up spills and to catch sneezes in line with Catch it / Bin it / Kill lit advice. Enhanced cleaning frequency of regular touched surfaces / items. Catch it, Bin it, kill it notices displayed. Hand washing poster displayed. Hand sanitiser available for staff / pupil use. Non fire / security doors propped open to minimise touching of surfaces. Ventilation is maximised (maintaining thermal comfort) in this space via: Natural ventilation - passive air flow through windows, doors and air vents that can be fully or partially opened Mechanical ventilation - using fans and ducts to bring in fresh air from outside, or A combination of natural and mechanical ventilation, for example where mechanical ventilation relies on natural ventilation to maximise fresh air. CO2 monitors installed to identify if a space is poorly ventilated. Remedial action taken. 				
		 Classrooms arranged with forward facing desks. Staff maintaining distance from pupils and other staff as much as possible. Small adaptations made to the classroom to support distancing have been made where possible. This includes seating pupils side by side and facing forwards, rather than face to face or side on. 				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		 Considering the guidance: <u>Covid-19-SEND-risk-assessment-guidance</u>. Where possible, social distancing of 1m+ is maintained. Face coverings continue to be used where 1m+ distancing cannot be maintained staff/visitors. 				
9. Lunch times/Break times	Staff, pupils, contractors, visitors					
	(Risk - as set out in section 1)	The school should put in place and maintain an appropriate cleaning schedule. This should include regular cleaning of areas and equipment (for example, twice per day), with a particular focus on frequently touched surfaces. PHE has published guidance on the COVID-19: cleaning of non-healthcare settings outside the home - GOV.UK (www.gov.uk) Hand washing / sanitisation to be followed e.g., clean hands thoroughly more often than usual. Hand washing / sanitisation stations (ideally soap and water to minimises possible adverse dermatological effects) at point of entry to school (20 seconds minimum recommended for washing with soap and water). Enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents. Outdoor spaces utilised where practicable. Face coverings continue to be used where 1m+ distancing cannot be maintained staff/visitors.				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
10. Communal Areas (Halls, Corridors, Staircases)	Staff, pupils, Contractors, Visitors (Risk - as set out in section 1)	Our Local Public Health Team strongly recommend face coverings, where social distancing of 1m+ cannot be maintained. We insist that visitors and contractors continue to be required to wear face coverings in schools. All staff are required to wear a face covering in communal areas and corridors. If the school leases out halls and facilities for third parties to use in the evening or on weekends, this must be risk assessed in terms of, hygiene - including enhanced cleaning regimes to determine if the hall can be used by third parties in line with COVID-19 arrangements. Enhanced cleaning frequency of regular touched surfaces / items. Catch it, Bin it, kill it notices displayed. Hand washing poster displayed. Hand sanitiser available for staff / pupil use. Non fire / security doors propped open to minimise touching of surfaces. Ventilation is maximised (maintaining thermal comfort) in these spaces via: Natural ventilation - passive air flow through windows, doors and air vents that can be fully or partially opened Mechanical ventilation - using fans and ducts to bring in fresh air from outside, or A combination of natural and mechanical ventilation, for example where mechanical ventilation relies on natural ventilation to maximise fresh air.				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		 Where possible, social distancing of 1m+ is maintained. Face coverings continue to be used where 1m+ distancing cannot be maintained staff/visitors. 				
11. Toilets	Staff, pupils, Contractors, visitors (Risk - as set out in section 1)	Our Local Public Health Team strongly recommend face coverings, where social distancing of 1m+ cannot be maintained. We recommend that visitors and contractors continue to be required to wear face coverings in schools. Toilets will need to be cleaned regularly and pupils must be encouraged to clean their hands thoroughly after using the toilet. Hand washing protocol increased to before and after use of toilet facilities (20 seconds minimum recommended) Hand washing poster displayed in all WCs Enhanced cleaning, including cleaning frequently touched surfaces often, using standard products such as detergent. Ventilation is maximised (maintaining thermal comfort) in this space via: Natural ventilation - passive air flow through windows, doors and air vents that can be fully or partially opened Mechanical ventilation - using fans and ducts to bring in fresh air from outside, or A combination of natural and mechanical ventilation, for example where mechanical ventilation relies on natural ventilation to maximise fresh air.				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		 Where possible, social distancing of 1m+ is maintained. Face coverings continue to be used where 1m+ distancing cannot be maintained staff/visitors 				
12.Staff Areas including:Staff roomsMeeting roomsOffices	Staff, contractors, visitors, (Risk - as set out in section 1)	Our Local Public Health Team strongly recommend face coverings, where social distancing of 1m+ cannot be maintained. We insist that visitors and contractors continue to be required to wear face coverings in schools.				
• Offices		 Enhanced cleaning frequency of regular touched surfaces / items. Catch it, Bin it, kill it notices displayed. Hand washing poster displayed. Increased natural ventilation. Hand washing/sanitisation protocols to be followed available for staff / pupil use. Non fire / security doors propped open to minimise touching of surfaces. Increased cleaning frequencies of hard surfaces. Hand washing poster displayed. Increased natural ventilation. Handwashing /sanitisation protocols to be followed. Ventilation is maximised (maintaining thermal comfort) in this space via: Natural ventilation - passive air flow through windows, doors and air vents that can be fully or partially opened Mechanical ventilation - using fans and ducts to bring in fresh air 				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		 a combination of natural and mechanical ventilation, for example where mechanical ventilation relies on natural ventilation to maximise fresh air 				
		Conduct meetings where possible via Teams				
		 Where possible, social distancing of 1m+ is maintained. Face coverings continue to be used where 1m+ distancing cannot be maintained staff/visitors. 				
		The staff room has a maximum of 6 people at one time Staff meetings will take place via zoom/Teams				
13. Lifts	Staff, pupils, contractors, visitors	It is recommended that controls remain in place for the use of lifts				
	(Risk - as set out in section 1)	(confined space). This would typically include, restricted numbers allowed to use lifts at any one time, to allow for 1m+ social distancing and wearing a face covering.				
		 Increased Hygiene protocols introduced including enhanced 				
		cleaning, including cleaning frequently touched surfaces often, using standard products such as detergents.				
		Protocol in place to restrict number of people using lifts to a				
		minimum.People to wear face coverings when not using lifts on their own.				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
14. First Aid	Staff, pupils, visitors (Risk - as set out in section 1)	 Adequate numbers of trained staff to administer First Aid. Check First aid boxes content and facilities available. 				
		Where closer contact may be necessary, we recommend appropriate PPE to protect First Aider and casualty. This would include disposable gloves, disposable apron and fluid resistant surgical facemask. Eye protection is also required if the casualty is coughing, spitting, or vomiting.				
		The best way to protect is through rigorous cleaning, personal hygiene and regular hand hygiene.				
		 First Aid PPE provided to include disposable gloves, disposable apron and fluid resistant surgical facemask. Eye protection is also required if the casualty is coughing, spitting, or vomiting. 				
		Guidance for first aiders				
		Try to assist at a safe distance from the casualty as much as you can and minimise the time you share a breathing zone.				
		If they are capable, tell them to do things for you, but treating the casualty properly should be your first concern. Remember the 3P model – preserve life, prevent worsening, promote recovery.				
		Please see link: <u>COVID-19</u> : guidance for first responders - GOV.UK (www.gov.uk)				
		Preserve life: CPR				
		 Call 999 immediately – tell the call handler if the patient has any COVID-19 symptoms Ask for help. If a portable defibrillator is available, ask for it 				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		Before starting CPR, to minimise transmission risk, use a cloth or towel to cover the patient's mouth and nose, while still permitting breathing to restart following successful resuscitation If available, use: a fluid-repellent surgical mask disposable gloves eye protection apron or other suitable covering Only deliver CPR by chest compressions and use a defibrillator (if available) – don't do rescue breaths (for CPR in paediatric settings see specific guidance from the Resuscitation Council UK) Contact the Health and Safety team if it is suspected that a staff member at work has been diagnosed as having COVID-19 attributed to an occupational exposure (not societal) to coronavirus (needs to be evidence based). Management and staff must read and follow manufactures instructions on how to use PPE correctly. Guidance on PPE and the correct fitting of face masks can be found here: COVID-19: personal protective equipment use for non-aerosol generating procedures - GOV.UK (www.gov.uk)				
15. Transport Arrangements	Staff, pupils, Contractors, visitors (Risk - as set out in section 1)	Mandatory face coverings remain in place on London transport. We recommend that staff assisting on school transport wear face masks. The government expects and recommends that face coverings are worn in enclosed and crowded spaces where you may come into contact with people you don't normally meet. We recommend that children and young people aged 11 and over continue to wear a face covering when travelling to secondary school or college. Please follow the link for further information: Dedicated transport to schools and colleges COVID-19 operational guidance -				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		GOV.UK (www.gov.uk) and Transport to schools and colleges during the COVID-19 pandemic - GOV.UK (www.gov.uk) The approach to dedicated transport should align as far as possible with a system of controls, it is important to consider: Frequent and thorough hand cleaning should now be regular practice. You should continue to ensure that pupils clean their hands regularly. This can be done with soap and running water or hand sanitiser. The 'catch it, bin it, kill it' approach continues to be very important. Put in place and maintain an appropriate cleaning schedule with				
		 a particular focus on frequently touched surfaces. Vehicles should be well ventilated when occupied, particularly by opening windows and ceiling vents. You should balance the need for increased ventilation while maintaining a comfortable temperature. 				
		 Discussion between school, local authority and transport provider to confirm suitable safe protocols are in place e.g., avoid overcrowding should be minimised / cleaning / hygiene and supervision arrangements. The transportation of special needs children risk assessment reviewed in line with Covid-19 requirements. 				
		 Face coverings continue to be used where 1m+ distancing cannot be maintained staff/visitors. Drivers and passenger assistants will not normally require personal protective equipment (PPE) on home to school transport. However, where the care and interventions that a pupil ordinarily receives on home to school transport required the use of PPE before CO-19, that should continue as usual. For further guidance, please see link: 				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		SEND and specialist settings: additional COVID-19 operational guidance - GOV.UK (www.gov.uk) Children who regularly spit or require physical contact (in the 'children with complex medical needs' section) guidance on the specific steps that should be taken to care for children with complex medical needs, such as tracheostomies - this includes aerosol-generating procedures For more information read: The use of personal protective equipment (PPE) in education, childcare and children's social care settings, including for aerosol generating procedures (AGPs) - GOV.UK (www.gov.uk)				
16. School Trips	Staff, pupils, contractors, visitors (Risk - as set out in section 1)	It is recommended the school does not go on any international visits before the start of the autumn term. From the start of the new school term, you can go on international visits that have previously been deferred or postponed and organise new international visits for the future. Ensure that any new bookings have adequate financial protection in place and assess insurance type required. The travel list is subject to change and green list countries may be moved into amber or red. The travel list could also change, whilst on a visit, so you must have a contingency plan in place. The school must undertake a full and thorough risk assessment in relation to educational visits. Please see following links: Health and				
		 safety on educational visits - GOV.UK (www.gov.uk). Specialist advice is available from: The OEAPNG https://oeapng.info School has observed and followed current guidance on educational visits. The school has undertaken a full and thorough risk assessments in relation to all educational visits to ensure they can be done safely. 				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		 As part of this risk assessment, the school has considered what control measures need to be used and is aware of wider advice on visiting indoor and outdoor venues. 				
		School trips are restricted to local visits for the autumn term				
17. Air conditioning systems	(Risk - as set out in section 1)	When your school is in operation, it is important to ensure it is well ventilated and that a comfortable teaching environment is maintained.				
		If using a central ventilation system that removes and circulates air to different rooms, it is recommended that you turn off re-circulation and use a fresh air supply. 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.				
		 Ventilation / air conditioning / extraction systems maintained. Mechanical ventilation systems have been adjusted to increase the ventilation rate wherever possible and checked to confirm that normal operation meets current guidance and that only fresh outside air is circulated. Natural ventilation – has been maximised to include opening windows and opening internal non fire doors to assist with creating a throughput of air and external doors where safe to do to (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). 				
		To balance the need for increased ventilation while maintaining a comfortable temperature, consider and indicate where in place: Opening high level windows in colder weather in preference to low level to reduce draughts.				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		 Increasing the ventilation while spaces are unoccupied (for example, 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 draughts. The school has assessed its ventilation systems and requirements. Heating should be used as necessary to ensure comfort levels are maintained particularly in occupied spaces. HSE guidance on use of air conditioning systems followed https://www.hse.gov.uk/coronavirus/equipment-and-machinery/air-conditioning-and-ventilation and CIBSE coronavirus (COVID-19) advice 				
18. Fire	Staff, pupils, contractors, visitors Smoke inhalation, exposure to heat	 Fire risk assessment and Emergency Evacuation Plans revised to consider areas which may not be in use and changes of use to the building. Personal Emergency Evacuation Plans (PEEPS) in place and revised where necessary. Ensure emergency evacuation routes out of the building are not compromised including fire doors and final exit doors. Fire Assembly points arranged and monitored. 				
19. Behaviour of pupils / staff	Staff, pupils, contractors, visitors (Risk - as set out in section 1)	 Review of the school's pupil behaviour policy to ensure that they cover COVID-19 risk related incidents (to include individual risk assessment of children with known challenging behaviour). Non-compliance (designated space for de-escalation/cooling-off period with 1m+ social distancing, where possible. Designated spaces in place for pupils displaying ACEs/Trauma/anxiety, SEND and non-compliance. Provision in place for the school to be able to sanction pupils who wilfully refuse to adhere to arrangements and deliberately cough or spit at pupils or staff, putting them at risk. 				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		 Policy reviewed in line with current Government guidance considering staff also. Guidance is available here. Training in place to reinforce expectations of staff behaviours, including adult to adult interactions. Behaviour policy has reverted to pre Covid expectations 				
20 Behaviour of parents / visitors / contractors (Violence and aggression)	Staff, pupils, visitors (Risk - as set out in section 1)	 The school's violence and aggression policy has been reviewed to ensure that it covers COVID-19 risk related incidents. Provision is in place as the school will not tolerate and will take the firm action should any person wilfully refuse to adhere to arrangements. 				
21. COSHH Cleaning / Sanitisation products	Pupils due to required increased cleaning/sanitisin g of hard surfaces and items in classrooms, there is a need to ensure no residual traces of cleaning products / or access to the cleaning / sanitising product by children	 COSHH risk assessment updated to include all newly introduced cleaning products Training provided to all staff members required to use cleaning products (in consultation with the schools cleaning provider) Manufacturers COSHH Safety Data Sheet provided to users of chemical outlining safe use, storage, emergency arrangements and PPE to be used. Strict instruction to staff / cleaning provider to always keep any cleaning / sanitisation products stored / secure and out of reach of children The school has worked with in house or external cleaning provider to ensure safe systems and protocols for use and storage are in place. Walk-through disinfecting systems and cleaning premises using fog, mist or UV treatment The HSE and public health bodies have agreed joint advice for duty holders considering using walk-through spraying or misting disinfecting systems. Walk-through disinfecting systems are not recommended under any circumstances, as this could be harmful and does not reduce 				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		the spread of COVID-19, this view is supported by the World Health Organisation. Fog, mist, vapour or UV (ultraviolet) treatments may be suitable options to help control the spread of COVID-19, as long as this has been considered as part of a COVID-19 Risk Assessment and users are competent, properly trained and follow the correct procedures. Any service believing, they may need to use such a system, must discuss this with the health and safety team prior to purchase and use.				
22. Dealing with / clearing up with Body Fluids	Staff, pupils, visitors (Risk - as set out in section 1)	Where clearing up of body fluids is required, the staff member must wear full appropriate PPE. This will include disposable gloves, disposable apron and fluid resistant surgical facemask and eye protection or face shield. PPE and waste disposal protocols to be followed (double bag waste). Handwashing protocols to be followed. Protocol in place to respond to emergency cleaning requirements and increased cleaning requests.				
23 Equalities and Mental Wellbeing	Staff, pupils Mental wellbeing could be affected by C-19 pandemic	Governing boards and school leaders should have regard to staff (including the headteacher) work-life balance and wellbeing. Schools will ensure they have explained to all staff the measures they are proposing putting in place and involve all staff in that process. All employers have a duty of care to their employees, and this extends to their mental health. Schools have mechanisms to support staff	SLT to re-establish clear lines of communication between staff members and SLT to ensure all staff know who they can go to with a concern or for any support.			

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		wellbeing. The Department for Education is providing additional support for both pupil and staff wellbeing in the current situation. Information about the extra mental health support for pupils and teachers is available. You can access useful links and sources of support on Promoting and supporting mental health and wellbeing in schools and colleges - GOV.UK (www.gov.uk) Schools' mental wellbeing and support mechanisms for staff and pupils reviewed. The school has equalities policies to protect their employees, and others, from harm and continue to assess health and safety risks and considers how to meet equalities duties in the usual way.	Teaching staff aware of protocol to speak to Phase Leader or Learning Leader with queries. These can then be dealt with or passed on to DHT/HT if needed. Wellbeing INSET being led on 1st and 2nd Sept Wellbeing sessions provided by Andrew Miles half termly All staff can approach the HT, DHT, AHT or SBM with any concerns All staff can contribute to the whole school risk assessment document which will be emailed to all staff and displayed in the staffroom. All staff to be made aware they have access to an individual risk assessment if needed			
24. Staff taking leave	Staff, pupils, parents	Staff may want to take a holiday, which may involve travelling abroad. Please check here for latest advice: https://www.gov.uk/guidance/travel-advice-novel-coronavirus . The government has set a requirement for people returning from some countries to quarantine on their return. The latest guidance on	Class teachers to bring any travel plans to attention of HT who will assess risk in relation to which travel list country is on. SLT to ensure protocols are in place for staff being able to work from home			

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
Pupils taking leave		quarantine can be accessed at coronavirus (COVID-19): how to self-isolate when you travel to the UK. There is a risk that where staff travel abroad, their return travel arrangements could be disrupted due to factors arising beyond their control in relation to coronavirus (COVID-19), such as the potential for reinstatement of lockdown measures in the place they are visiting. Where it is not possible to avoid a member of staff having to quarantine during term time, school management should consider if it is possible to temporarily amend working arrangements to enable them to work from home. Schools may want to mirror and adapt the above guidance in relation to pupils. Individual Schools needs to take into account their Pupil Absence Management Policy and possibly adapt/amend and make the appropriate decision for their setting. The school is working to and relayed relevant travel advice to staff and pupils.	and ensure progress of children isn't inhibited.			
25. Business Continuity	Staff, pupils, Closure of premises	 Schools Business Continuity Plan has been reviewed to include COVID-19 related risks. 				
26. Travel Plan	Staff, pupils (Risk - as set out in section 1)	 School Travel Plan has been developed in line with Coronavirus (COVID-19): safer travel guidance for passengers. Please add any additional specific arrangements applicable to your school. Parents should be encouraged where possible to walk or cycle their children to school rather than using any form of transport. This will 				

What are the hazards?	Who may be harmed and how? (risk)	What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Complet ed
		 encourage healthy lifestyle; help reduce pollution and avoid overcrowding at car parks and help maintain social distancing. Car parking and permit availability to be reviewed Staff should not be car sharing or transporting pupils in their own or school vehicles. 				
27. Supply teachers, temporary or peripatetic staff, recruitment	Staff, temporary and peripatetic staff (Risk - as set out in section 1)	 Where applicable, you can continue to use supply teachers and staff. It is recommended to use the <u>Crown Commercial Service's agency supply deal</u> when hiring agency workers. This offers a list of preferred suppliers, who must provide transparent charging rates. You can get support by emailing supplyteachers@crowncommercial.gov.uk with your school's requirements and contact details. Supply staff and other temporary or peripatetic staff can move between schools. Such staff and visitors must follow the school's arrangements for managing and minimising risk based on the system of controls. They should also have access to information on the safety arrangements and be provided with this as soon as possible after the booking. You can continue recruiting members of staff. Schools should consider a flexible approach to interviews, with alternative options to face-to-face interviews offered where possible, with guidance available here. 				

It is important you discuss your assessment and proposed action with employees and their representatives. A risk assessment is only effective if you and your employees act on it. You must follow through with any actions required and review it on a regular basis. You should review your risk assessment if you think it may no longer be valid e.g., following an accident/incident, or if there are significant changes to the hazards in your workplace, such as new equipment or work activities. You should consider, at a minimum, an annual review of your assessment. Risk assessment guidance is available for further information and advice on carrying out a risk assessment.

Disclaimer. Template correct at the time of development, although any links referred to internal/external should be checked regularly as official advice is likely to be updated as the situation continues to develop.

