Risk Assessment Covid-19 Schools



This 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 system of controls below, 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.
- Face masks (IIR Surgical Face masks) are recommended for use by staff.

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.
- We recommend all school staff and eligible pupils take up the offer of a vaccine. You can find out more about the in-school vaccination programme in COVID-19 vaccination programme for children and young people guidance for schools.

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 -<u>Information about the Coronavirus (e-bug.eu.)</u>

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-com/pressettings-norma

Revised Risk Assessment with effect from January 2021

Face Coverings

- From 20 January, face coverings are no longer advised for pupils, staff and visitors in classrooms.
- From 27 January, face coverings are no longer advised for pupils, staff and visitors in communal areas. From 27 January, staff and pupils should follow wider advice on face coverings outside of school, including on transport to and from school. However, local directors of public health are able to recommend the use of face coverings in communal areas, across their area only, where DfE and public health experts judge the measure to be proportionate due to specific health concerns.
- The Government announced the end of Plan B pandemic restrictions, including scrapping the legal requirement for mask-wearing on public transport, in shops and schools. However, the Mayor of London and TFL have advised that passengers must continue to wear a face covering on buses, trains and trams as a condition of carriage, due to the continuing Covid threat.

- The Head Teacher has autonomy to consider recommending/implementing the use of face coverings and social distancing measures in their school (on a risk based approach) to assist with controlling the risks of Covid-19. This may be on a temporary basis, in line with controls including good ventilation, hygiene, cleaning regimes and testing measures.
- The government suggests that you continue to wear a face covering in crowded and enclosed spaces where you may come into contact with other people you do not normally meet.
- See circumstance where people are not able to wear face coverings.

Bubbles – We no longer recommend that it is necessary to keep children in consistent groups ('bubbles'). This means that 'bubbles' will not need to be used in schools. You should make sure your contingency plans (sometimes called outbreak management plans) cover the possibility that it may become necessary to reintroduce 'bubbles' 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. Secondary school pupils should take 2xLFT 3-4 days apart each week.

Outbreak - In the event of an outbreak, DsPH can advise on targeted time limited rules if necessary,

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	28.01.2022
Review date (Monthly)	28.02.2022

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

Resultant Risk Rating Please tick				
High				
Medium	х			
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 Completed
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 following ways:	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 school, to stay at home, arrange to have a PCR test and isolate until the results are received. Asymptomatic people who receive positive lateral flow device (LFD) test results for coronavirus (COVID-19) will be required to self-isolate immediately and won't be required to take a confirmatory PCR test. See further information: here. The following guidance should be followed: When to self-isolate and what to do - Coronavirus (COVID-19) When to self-isolate and what to do - Coronavirus (COVID-19) - NHS (www.nhs.uk) and Stay at home guidance for households with possible coronavirus covid 19 infection symptoms.	relevant guidance to carry out this risk assessment.			

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 Completed
	virus moves from person-to- person in droplets from the nose or mouth spread when a	If a child, young person or staff member displays symptoms of coronavirus in a setting, they should be sent home and advised to get a PCR test and self-isolate until the results are received.				
	person with the virus coughs or exhales	Their fellow household members should follow the guidance: <u>Guidance for contacts of people with confirmed coronavirus (COVID-19) infection who do not live with the person - GOV.UK (www.gov.uk).</u>				
	• the virus can survive for up to 72 hours out of the body on surfaces which people have coughed on, etc	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				
	people can pick up the virus by breathing in the droplets or by	 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 				
	touching contaminated surfaces and then touching their eyes or mouth	 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 follow the stay at home guidance available here. 				
	Exposure to the virus may result mild or moderate symptoms e.g.	Adults who are fully vaccinated and all children and young people aged between 5 and 18 years and 6 months identified as a contact of someone with COVID-19 are strongly advised to:				
	coughing, fever or shortness of breath, more severe symptoms include	take an LFD test every day for 7 days, or until 10 days since your last contact with the person who tested positive for COVID-19 if this is earlier and continue to attend their setting as normal, unless they have a positive test result.				
	pneumonia in both lungs which can lead to	 take this daily test before you leave the household for the first time that day 				

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 Completed
Covid-19 Outbreaks on site	death. The children are generally asymptomatic or have mild symptoms only and the transmission rate to other children or adults is low or negligible	Children under 5 years who are identified as close contacts are exempt from self isolation and do not need to take part in daily testing of close contacts. They are advised to take a PCR test if the positive case is in their household. Pupils with SEND identified as close contacts should be supported by their school and their families to agree the most appropriate route for testing including, where appropriate, additional support to assist swabbing. For further information please see SEND guidance. 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 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 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.	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	WHOTH	Wileit	

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 Completed
		The household (including any siblings) should follow the government 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 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.				

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 Completed
	,	Child / young person / staff member with a positive test result				
		 The person has tested positive should continue to self-isolate for the required period set out within <u>NHS</u> / <u>Government</u> guidelines. 				
		You may be able to end your self-isolation period before the end of the 10 full days. You can take an LFD test from 5 days after the day your symptoms started (or the day your test was taken if you did not have symptoms), and another LFD test on the following day. If both these test results are negative, and you do not have a high temperature, you may end your self-isolation after the second negative test result.				
		Report your LFT test results after taking each test.				
		You should not take an LFD test before the fifth day of your self-isolation period, and you should only end your self-isolation after you have had 2 negative LFD tests taken on consecutive days. You should stop testing after you have had 2 consecutive negative test results. If an individual is positive on day 5, then a negative test is required on day 6 and day 7 to release from isolation.				
		The default self-isolation period continues to be 10 days, and you may only leave self-isolation early if you have taken 2 rapid lateral flow tests and do not have a temperature in line with guidance.				
		If the test is negative:				
		If your PCR test result is negative but you still have symptoms, you may have another viral illness such as a cold, flu or a stomach bug. You should stay at home until you feel well and for at least 2 more days if you have had diarrhoea or vomiting. Seek medical attention if you are concerned about your symptoms.				

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 Completed
		You can stop self-isolating unless you have been advised by NHS Test and Trace that you are legally required to self-isolate. Anyone in your household who is self-isolating because of your symptoms can also stop self-isolating. Further guidance can be found 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. 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				

What are the hazards? Who may have a how? (ris	d What are you already doing?	What further action is necessary?	Actions by whom?	Action by when?	Date Completed
	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 (if="" (in="" (ipc),="" (please="" 03003030450)="" 14-day="" a="" about="" absence="" alert="" already="" among="" an="" and="" any="" are="" assessment="" associated="" authority="" be="" between="" call="" cases="" cases).<="" check="" closure="" communications,="" complete="" confirm="" contact="" control="" covid-19="" covid-19:="" dates="" definition:="" detailed="" different="" establish="" from="" generally="" guidance="" health="" help="" if="" illness="" in="" incident="" individual="" individuals="" infection="" information="" is="" la="" list="" local="" management="" mitigate="" more="" multi-agency="" necessary.="" needed="" non-residential="" not="" note="" observing="" of="" on="" ongoing="" onset="" or="" outbreak="" period.="" phe="" prevention="" provide="" public="" ra="" reduce="" required)="" risk="" risks.="" run="" schools="" setting="" setting,="" settings="" specific="" still:="" support="" support.="" td="" team="" test-confirmed="" that="" the="" there="" they="" this="" through="" to="" transmission,="" two="" type="" undertake="" undertaken)="" where="" which="" who="" whole="" will="" with="" within="" •=""><td></td><td></td><td></td><td></td></mailto:lcrc@phe.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 Completed
		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.				
		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				
		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 				

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 Completed
		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> 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				
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.			
		Testing after your self-isolation period has ended				
		If you have previously received a positive COVID-19 test result, you are advised not to take another PCR test within 90 days of this result unless you develop any new main symptoms of COVID-19.				
		If you have a positive PCR test result within 90 days of a previous positive test result you must stay at home, self-isolate and follow the steps in this guidance: here.				

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 Completed
		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 PCR test, follow the steps in the guidance here.				
		Asymptomatic testing and the 90 day period – a ll individuals who tested positive can participate in routine asymptomatic infection detection with LFD once they have completed their 10-day isolation period (or if released early from isolation with two negative LFD tests) for their prior infection.				
		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.				
		Self-isolate if they are displaying symptoms and follow the guidance here.				
		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)				
		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 Completed
		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. Get a coronavirus test LBBD. Order a home test kit if you cannot get to a test site.				
		Asymptomatic Testing				
		Asymptomatic testing remains important in reducing the risk of transmission of infection within schools.				
		Staff and secondary school pupils should continue to test twice weekly at home, with lateral flow device (LFD) test kits, 3-4 days apart.				
		Secondary schools should also retain a small asymptomatic testing site (ATS) on-site until further notice so they can offer testing to pupils who are unable to test themselves at home.				
		Schools are strongly encouraged to ask parents and other visitors to take a lateral flow device (LFD) test before entering the school.				
		Further information on Daily Rapid Testing can be found in the Tracing close contacts and isolation section in the following guidance here.				
		There is no need for primary age pupils (those in year 6 and below) to regularly test, unless they have been identified as a contact for someone who has tested positive for Covid-19 and therefore advised to take lateral flow tests every day for 7 days.				
		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 home. 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				

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 Completed
		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				
		Staff or pupils with a positive LFD test result must self-isolate in line with the stay-at-home guidance here .				
		The advice for people who have a positive lateral flow device (LFD) test result has changed. They are no longer required to have a follow-up polymerase chain reaction (PCR) test, and they should stay at home and self-isolate immediately.				
		People who have a positive LFD test result should only have a follow-up PCR test if:				
		 they wish to claim the <u>Test and Trace Support Payment</u> they have received an <u>email or letter</u> from the NHS because of a health condition that means they may be 				
		 suitable for new coronavirus (COVID-19) treatments they are taking LFD tests as part of research or surveillance programmes, and the programme asks them to take a follow-up PCR test 				
		 they have a positive day 2 LFD test <u>after arriving in England</u> 				
		They will need to arrange a lab-based polymerase chain reaction (PCR) test to confirm the result. Please see guidance: Get a free PCR test to check if you have coronavirus (COVID-19) - 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 Completed
		What to do when you are waiting for your PCR test result If you have any of the main symptoms of COVID-19 you should self-isolate whilst you wait for your test result. If your PCR test is negative, and you are exempt from self-isolation as a contact, you do not need to self-isolate. This does not guarantee you do not have COVID-19, so you should follow advice on how to avoid catching and spreading COVID-19. Read further guidance on what to do if you test negative. If you are a close contact and you are not exempt from self-isolation and you have been notified by NHS Test and Trace that you are				
		legally required to self-isolate, you must self-isolate whilst you wait for your test result and you must continue to do so even if you have a negative result. This is because you could still become infectious during the 10-day isolation period. 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) Mandatory certification				
		From 27 January, mandatory certification is no longer in place and so venues and events are not required by law to use the NHS COVID Pass as a condition of entry, but some may do so voluntarily. Further information on this is available: <u>Using your NHS COVID Pass for travel abroad and at venues and settings in England - GOV.UK (www.gov.uk)</u> .				
		You should not use the NHS COVID Pass as a condition of entry for education or related activities such as exams, teaching, extra-				

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 Completed
		curricular activities or any other day-to-day activities that are part of education or training.				
		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.				
		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				

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 Completed
		Instead, they will be contacted by NHS Test and Trace, informed they have been in close contact with a positive case and advised of the next steps. Please see following guidance: NHS Test and Trace: what to do if you are contacted - GOV.UK (www.gov.uk) . 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.				
		The self-isolation advice for people with coronavirus (COVID-19) has changed. It is now possible to end self-isolation after 5 full days if you have 2 negative LFD tests taken on consecutive days. The first LFD test should not be taken before the fifth day after your symptoms started (or the day your test was taken if you did not have symptoms). The self-isolation period remains 10 full days for those without negative results from 2 LFD tests taken a day apart. Please see guidance: Stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection - GOV.UK (www.gov.uk)				
		Please add any additional specific arrangements applicable to your school.				
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.				

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 Completed
		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.				
		Vulnerable children Where pupils who are self-isolating are within our definition of vulnerable, it is very important that you put systems in place to keep in contact with them, particularly if they have a social worker. Some children may be vulnerable who are not officially in statutory systems and schools should seek to support any children who they believe may have challenging circumstances at home. Further guidance can be found here: Schools COVID-19 operational guidance and Contingency framework: education and childcare settings.				
		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. Please add any additional specific arrangements applicable to your				
		school.				
4. Communication strategy (communication	Staff, Pupils, visitors, contactors (Risk - As set out	Protocol in place and includes:				
to parents / guardians)	in section 1)	 From 20 January, face coverings are no longer advised for pupils, staff and visitors in classrooms. 				

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 Completed
		 From 27 January, face coverings are no longer advised for pupils, staff and visitors in communal areas. From 27 January, staff and pupils should follow wider advice on face coverings outside of school, including on transport to and from school. The Head Teacher has autonomy to consider recommending/implementing the use of face coverings and social distancing measures in their school (on a risk based approach) to assist with controlling the risks of Covid-19. This may be on a temporary basis, in line with controls including good ventilation, hygiene, cleaning regimes and testing measures. However, our local director of public health is able to recommend the use of face coverings in communal areas, across their area only, where DfE and public health experts judge the measure to be proportionate due to specific health concerns. Further guidance can be found here. 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. 				
		 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). 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. • Parents to be advised to follow guidance below COVID-19: guidance for households with possible coronavirus infection - GOV.UK (www.gov.uk)				
		Please add any additional specific arrangements applicable to your school.				
5.	Staff, pupils, contractors, 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 Completed
Shielded and clinically vulnerable Groups including those who are pregnant	(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). 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 	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			
SEND pupils	UK and international data suggest that people from Black, Asian and	 telephone calls, or via email. Those formerly considered to be clinically extremely vulnerable and high or higher risk are not being advised to shield again. Children and young people who were previously identified as being in one of these 14 groups, are advised to continue to follow the guidance: Coronavirus: how to stay safe and help prevent the spread. Children and young people previously considered CEV should attend school and should follow the same COVID-19) guidance as the rest of the population. In some circumstances, a child or young person may have received personal advice from their specialist or clinician on additional precautions to take and they should continue to follow that advice. Please read COVID-19: guidance on shielding and protecting people defined on medical grounds as extremely vulnerable for more advice. We recommend staff who were previously identified as being in a vulnerable group and are required to be in a school setting should have an individual health risk assessment in place. Where a pupil is unable to attend school because they are complying with clinical and/or public health advice, we expect 	been granted a leave of absence, is unable to attend because of sickness, is absent for a necessary religious observance etc.).			

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 Completed
Black, Asian and Minority Ethnic (BAME) and clinically vulnerable groups	Minority Ethnic (BAME) backgrounds are disproportionately affected by COVID-19.	 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 were classed as 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. Given the clinical data that suggest that risk of complications from COVID-19 increase from around 26 weeks' gestation, further considerations should be made from this stage. However, general advice on reducing risk of COVID-19 infection applies at all gestations. All pregnant workers must undertake a workplace risk assessment. Advice for pregnant women, is available here 	School leaders should be flexible in how those members of staff are deployed. People who live with those who are clinically extremely vulnerable or clinically vulnerable can attend the workplace.			
		 Previous practices should continue, i.e., Individual Risk Assessment, referral to OH, when necessary. Our advice is still that those who are 26 weeks plus, continue to work from home. 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 links for further information: COVID-19 vaccines, pregnancy and breastfeeding (rcog.org.uk) and COVID-19 vaccination: women of childbearing age, currently pregnant or breastfeeding - GOV.UK (www.gov.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. 				

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 Completed
		 Management staff to follow manufacturer's instructions on how to use PPE correctly. 				
		Individual Health Risk Assessment undertaken with BAME / Clinically Vulnerable staff members using 'appendix 1' of this document.				
		Please add any additional specific arrangements applicable to your school.				

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.
- 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 be provided to all state-funded education settings, which started roll out in September 2020, to help assess whether a space is poorly ventilated.
 Further guidance can be found: <u>Identifying poorly ventilated areas by using CO2 monitors (hse.gov.uk)</u>. <u>Summary findings from the DFE survey of the use of CO2 monitors, and data on applications for air cleaning units can be found here: CO2 monitor survey and applications for air cleaning units GOV.UK (www.gov.uk)</u>
- 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.

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 Completed
		ach continues to be very important. The following link contains free resour <u>Coronavirus (e-bug.eu.)</u>	ces, including materials to en	courage go	od hand a	nd respiratory
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. See section 4 for advice on face coverings.	Advice / instruction on recommended hygiene and cleaning practices			
		 Appropriate disposal of face coverings and hygiene arrangements are in place are in place for staff and pupils who continue to wear face coverings. 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 				

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 Completed
7.	Staff, pupils,	Waste to be stored safely and securely kept away from children. Please add any additional specific arrangements applicable to your school.				
Reception areas	contractors, visitors (Risk - as set out in section 1)	See section 4 for advice on face coverings. 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 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.				

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 Completed
	2. "	Face coverings continue to be used. Contractors and delivery companies should have safe systems of work, risk assessment and follow our Covid-19 secure arrangements. Please add any additional specific arrangements applicable to your school.				
8. Classrooms	Staff, pupils, contractors, Visitors	See section 4 for advice on face coverings.				
	(Risk - as set out in section 1)	 COVID-19: cleaning of non-healthcare settings outside the home -GOV.UK (www.gov.uk) 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 				

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 Completed
		 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. 				
		• Considering the guidance: Covid-19-SEND-risk-assessment-guidance.				
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-covid-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. 				
		+				
		School kitchens should be complying with the guidance for food businesses on coronavirus (COVID-19)				

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 Completed
		Please add any additional specific arrangements applicable to your school.				
10. Communal Areas (Halls, Corridors, Staircases)	Staff, pupils, Contractors, Visitors (Risk - as set out in section 1)	See section 4 for advice on face coverings. 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.				
11. Toilets	Staff, pupils, Contractors, visitors	Toilets will need to be cleaned regularly and pupils must be encouraged to clean their hands thoroughly after using the toilet.				

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 Completed
	(Risk - as set out in section 1)	 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. Please add any additional specific arrangements applicable to your school.				
12. Staff Areas including: • Staff rooms • Meeting rooms • Offices	Staff, contractors, visitors, (Risk - as set out in section 1)	See section 4 for advice on face coverings. 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.				

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 Completed
		 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 from outside, or 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 Please add any additional specific arrangements applicable to your school.				
13. Lifts	Staff, pupils, contractors, visitors (Risk - as set out in section 1)	It is recommended that controls remain in place for the use of lifts (confined space). Continue to wear a face covering in crowded and enclosed spaces.				
		 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. 				

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 Completed
		People to wear face coverings when not using lifts on their own.				
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>: <u>guidance for first responders</u> - 				
		GOV.UK (www.gov.uk) Preserve life: CPR				

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 Completed
		 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 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 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)	The Government has announced the end of Plan B pandemic restrictions, including scrapping the legal requirement for mask-wearing on public transport, in shops and schools. However, the Mayor of London and TFL have advised that passengers must continue to wear a face covering on buses, trains and trams as a condition of carriage, due to the continuing Covid threat. We recommend that staff assisting on school transport wear face masks.				

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 Completed
		Children and young people aged 11 and over, unless they are exempt, should wear a face covering when travelling on dedicated transport to and from secondary school or college. Please follow the link for further information: Dedicated transport to schools and colleges COVID-19 operational guidance - 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. 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 COVID-19, 				

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 Completed
		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) Please add any additional specific arrangements applicable to your school.				
16. School Trips	Staff, pupils, contractors, visitors (Risk - as set out in section 1)	We recommend that you consider whether to go ahead with planned international educational visits at this time, recognising the risk of disruption to education resulting from the need to isolate and test on arrival back into the UK. You should refer to the Foreign, Commonwealth and Development Office travel advice and the guidance on international travel before booking and travelling. You are advised to ensure that any new bookings have adequate financial protection in place. You should speak to either your visit provider, commercial insurance company, or the risk protection arrangement (RPA) to assess the protection available. Independent advice on insurance cover and options can be sought from the British Insurance Brokers' Association (BIBA) or Association of British Insurers (ABI). Any school holding ATOL or ABTA refund credit notes may use these credit notes to rebook educational or international visits. You should undertake full and thorough risk assessments in relation to all educational visits and ensure that any public health advice, such as				

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 Completed
		hygiene and ventilation requirements, is included as part of that risk assessment. is available and is supported by specialist advice from the OEAP. .				
		 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. 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. Please add any additional specific arrangements applicable to your school. 				
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). 				

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 Completed
		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. 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 Please add any additional specific arrangements applicable to your building.				
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. Please add any additional specific arrangements applicable to your school. 				
19. Behaviour of pupils / staff	Staff, pupils, contractors, visitors	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).				

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 Completed
	(Risk - as set out in section 1)	 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. 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. Please add any additional specific arrangements applicable to your school. 				
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. Please add any additional specific arrangements applicable to your school. 				
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. 				

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 Completed
		Walk-through disinfecting systems and cleaning premises using fog, mist or UV treatment				
		The HSE and public health bodies have agreed joint <u>advice for duty holders</u> 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 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.				
		Please add any additional specific arrangements applicable to your school.				
22. Dealing with / clearing up with	Staff, pupils, visitors	-				
Body Fluids	(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. 				
		Please add any additional specific arrangements applicable to your school.				
23	Staff, pupils	+				

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 Completed
Equalities and Mental Wellbeing	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 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. Please add any additional specific arrangements applicable to your school. 				
24. Staff taking leave	Staff, pupils, parents	Staff may want to take a holiday over the half term break, 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 quarantine can be accessed at coronavirus (COVID-19): how to selfisolate 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.				

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 Completed
Dunilo toldo s		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.				
Pupils taking leave		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.				
		Please add any additional specific arrangements applicable to your school.				
25. Business	Staff, pupils,	+				
Continuity	Closure of premises	 Schools Business Continuity Plan has been reviewed to include COVID-19 related risks. 				
		Please add any additional specific arrangements applicable to your school.				
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.				

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.